

A Quick-Start Guide to Using Evidence-Based Policy at the Local-Level



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

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ACKNOWLEDGMENTS

We want to acknowledge and thank the representatives of the participating communities for their insights, engagement, and contributions to the local policy lab and this guide.

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SUGGESTED CITATION

Kelly, M.A., Puddy, R.W., Kucik, J., Mwaungulu, G., & Edmiston, A. (2023, February). *A Quick-Start Guide to Using Evidence-Based Policy at the Local Level*. Centers for Disease Control and Prevention, Office of Policy, Performance, and Evaluation.

DEDICATION

We dedicate this guide to the life and memory of Christopher Kochtitzky, a CDC colleague and friend. This project, like so many, would not have been possible without his insight and leadership. Chris was a key contributor in conceptualizing the local policy lab and sharing the evidence with the participants. His passion for the intersection of urban planning and public health—and for the use of policy to facilitate community health and well-being—are legendary.

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A QUICK-START GUIDE TO USING EVIDENCE-BASED POLICY AT THE LOCAL-LEVEL

Public health practitioners recognize the transformative impact that evidence-based policies can have on the health of communities, particularly when working on potential solutions to address the root causes of health issues. This has become even more apparent as the understanding of the impact of social determinants of health is clearer, especially because they can be impacted by policy levers. However, the process of identifying, developing, adopting, and implementing policies based on evidence may seem overwhelming. While there are certainly many factors to consider, this guide describes several “quick-start elements” for engaging in a policy process which can help to accelerate the adoption of evidence-based policies in an accessible way. Designed to support public health practitioners and their partners as they seek to leverage policy to address the public health needs of their communities, the guide illustrates a practical, applied policy process that health agency staff can use based on their practices.

This Local Policy Quick-Start Guide is informed by activities and observations arising from a year-long applied policy lab, managed by the National Association of County and City Health Officials (NACCHO) and co-created with the Centers for Disease Control and Prevention (CDC). During this experience, four local community-based teams came together to develop policy action plans (see Appendix) in a structured experience patterned on the [CDC Policy Process](#). Composed of representatives from the local health department and various community partners, each community’s team worked through the first three domains of the policy process—problem identification, policy analysis, and strategy and policy development—to enhance the participants’ policy-related skills and knowledge in an applied approach to the local context. The policy content in this Local Policy Quick-Start Guide is generalized from the experiences of the local policy lab participants and can be used by other communities seeking to address other health topics and content areas.



What this Guide is:

- A tool to help communities consider the first steps in leading a policy process to address local public health issues.
- A collection of peer-informed practices for how to approach local policy solutions to improve health in the community.
- A reference tool, including links to select resources and customizable templates.

What this guide is not:

- A prescriptive model meant to dictate your approach.
- A detailed, comprehensive walkthrough of each step involved in creating a policy solution.

The practices and tools described in this guide can be used to facilitate the identification, adoption, and implementation of evidence-based policies that improve multiple public health areas, such as preparedness and response. When utilized in this context, policy solutions have the potential to create lasting impacts by addressing a variety of public health threats to communities, including infectious disease outbreaks, natural disasters, man-made emergencies, and more.

Cross-Cutting Themes in the Policy Process:

Throughout this guide, users will find symbols accompanying some quick-start elements. These symbols represent observed cross-cutting themes which emerged during the participating communities' engagement in the local policy lab. The cross-cutting themes are:



Accessing and Assessing Evidence:

Are local data available?

Where can I find evidence-based interventions?



Building strategic partnerships for policy:

What type of partnerships are most valuable?

How do I identify and engage interested parties?

How do I navigate interested parties' input?



Forging feasibility so the work feels "doable":

Has work already been done in this area?

What resources are available to me?

Can I find mentors or champions?

CDC POLICY PROCESS OVERVIEW

The [CDC Policy Process](#) provides a systematic way to develop evidence-based policies that can help address public health problems in your community. The policy process consists of the five domains—problem identification, policy analysis, strategy and policy development, policy enactment/ adoption, and policy implementation—and two cross-cutting areas for consideration, stakeholder engagement and evaluation. Following all steps in the policy process can ultimately result in implementation of a policy.

Broadly defined, a “[Policy](#)” is a law, regulation, procedure, administrative action, incentive, or voluntary practice of governments and other institutions. When applied to public health, effective policy based on science can facilitate systems-level change that can have a profound impact on the well-being of communities. This framework can provide a roadmap for undertaking effective local policy work.

The five domains of the CDC Policy Process are:

- I. Problem Identification: **Clarify and frame issue to be addressed through policy**
- II. Policy Analysis: **Identify and evaluate different policy options that can address the problem/issue**
- III. Strategy and Policy Development: **Think through the process to get an identified policy adopted**
- IV. Policy Enactment/Adoption: **Follow identified steps towards policy adoption**
- V. Policy Implementation: **Focus on operationalizing the adopted policy**

Resource Table 1: CDC Policy Process

Name	Description	Source
CDC Policy Process	A model for the conceptualization, development, adoption, and evaluation of policy	CDC Office of Policy, Performance, and Evaluation

Figure: CDC Policy Process



LEADING WITH EVIDENCE

Policies with a strong evidence base may have a higher likelihood of success when adapted for local jurisdictions. The evidence base for a particular policy consists of information pertaining to the health, economic, and budgetary impacts of potential policy options on a community.

It can be useful to think of [different types of evidence](#) that can inform decisions related to the use of local policy interventions. Best available research evidence refers to the quality of information gleaned from research studies focused on, in this case, the specific policy in question and whether the policy produces the intended outcome; contextual evidence refers to measurable factors that are likely to influence policy implementation, including feasibility, utility, and acceptability; and experiential evidence refers to the tacit knowledge gained by those who live in the community or have experience with the people who would be affected by the policy.

The elements described in this Local Policy Quick-Start Guide are designed to help you:

1. Use appropriate data and information to understand the root causes of public health problems,
2. Use these three types of evidence to identify the strongest policy options, and
3. Plan how to develop and adopt policies that impact public health at the local level.

As communities take steps to consider using policy to impact health outcomes, they can find value in further exploring how to incorporate evidence in their decision-making processes through the resources provided in the table below.

Resource Table 2: Leveraging Evidence-Based Policy

Name	Description	Source
Understanding Evidence	Resources providing guidance on how to use various types of evidence in evidence-based decision making	CDC National Center for Injury Prevention and Control, Division of Violence Prevention
The Guide to Community Preventive Services (The Community Guide)	Collection of evidence-based findings about interventions intended to improve health directly or indirectly	Community Preventative Services Task Force
Help Make the Case...	Resources to help make the case for evidence-driven policy to improve health	CDC Office of Policy, Performance, and Evaluation



POLICY QUICK-START ELEMENTS

The following quick-start elements were gathered from and informed by the real-world experiences of the four communities participating in the local policy lab as they worked through several domains of the [CDC Policy Process](#). This list of elements is not intended to be exhaustive or prescriptive. The elements can offer communities insights to potentially boost the impact of the CDC Policy Process on their local policy-focused efforts. These quick-start elements have been categorized into the following areas:

- Understand Your Community's Problem/Issue
- Build Your Team
- Develop Policy
- Engage the Community
- Advance Policy Adoption

UNDERSTAND YOUR COMMUNITY'S PROBLEM/ISSUE

An accurate understanding of the community problem to be addressed can expedite the identification of appropriate policy solutions for consideration. Additionally, policy efforts that focus on health issues that are seen as problems by the local community are more likely to garner local support and buy-in for policy solutions. This section describes practices that may foster a deeper understanding of the community concern that is being addressed through policy.

Issues of Local Importance

→ Using Community Data to Scope the Policy Topic



The identification of an appropriate policy solution is driven by community need. This need may be identified systematically, using a process such as a [community health assessment](#) (CHA), [community health needs assessment](#) (CHNA), or other mechanism for collecting data to identify health priorities. Team members might consider the use of surveys and focus groups among community members to get a feeling for the community's pulse and gain practical knowledge that may inform the evidence-base used in making policy decisions. Having data to back a community's need for a policy solution can provide evidence and leverage throughout the policy process, which will be valued by some key interested parties.

→ Leverage Conversations in the Community, at Local Events, and in the Local Media



Needs also can be recognized through less formal processes, such as community forums.

While these conversations may be recorded and analyzed in a methodological manner, this approach may be better utilized as a strategy to generate ideas about health priorities rather than as a data collection mechanism. In addition, local newspapers, social media, and locations that encourage informal community-centered conversations (e.g., community boards, churches, farmers markets) may be utilized to get a sense of how the community perceives the problem identified.

→ Investigate Previous Efforts to Address the Identified Issue



Consider taking the time to learn about what work, if any, has already been done on a policy approach to address the health issue of interest. An early investigation can help avoid duplicative efforts and may be a source of guidance and lessons learned from the earlier work. Engagement with local historians, government staff with institutional knowledge, local governmental attorneys, and others may assist with efforts to understand past work.



COMMUNITY REFLECTIONS

During the course of developing its policy solution, one participating community discovered that a similar policy had been proposed previously in that jurisdiction and was now on pause. Although the delayed discovery of the past efforts required the team to adjust its approach, this new knowledge created an opportunity for those who had led the previous effort to get involved and collaborate on the recent work.

Appropriate and Contextual Knowledge of Health and Policy Work

- Ensure a baseline of knowledge on the relevant topic area for all collaborators who will be members of the policy team

Ensuring that all members of the policy team have a baseline-level of knowledge in the subject-matter area being addressed can minimize potential barriers to the work. This level-setting also could allow individuals to focus their attention on applying their unique perspectives and subject-matter expertise at the outset of policy activities. The identification of online resources and trainings as well as glossaries of common terms can facilitate comprehension of the baseline information.

- Identify and Attempt to Connect with Subject-Matter Experts



Individuals who have expertise in fields related to the identified problem or

potential policy solutions may be willing to assist efforts to use local policy to improve health. The utilization of these subject-matter experts could provide teams with both research and experiential policy evidence through the sharing

of important lessons from past challenges, an understanding of what successful policy could look like, and resources that can support policy efforts. Teams can identify these policy authorities through personal and professional networks, conferences and professional development events, publications and online resources, and online searches to obtain support for their activities. Consider both local and national figures who represent governmental agencies and research, academia, non-profits, and grassroots organizations in your search for expert assistance.

- Consider the Community Impact of Proposed Policies



As health topics are being narrowed and prioritized and specific policy solutions are analyzed, it is important

to consider the impact of the proposed policy on the community and on vulnerable populations in particular, in order to avoid unintended consequences. While a formal [Health Impact Assessment](#) (HIA) may be out of reach for many communities due to lack of data or other resources, the [Health in All Policies](#) (HiAP) framework and health equity strategies offer approaches that promote awareness and consideration of these issues.



COMMUNITY REFLECTIONS

A city planner working with Columbia/Boone County, Missouri became a key subject-matter expert on the project. He helped the team understand the nuances of developing a meaningful and actionable Complete Streets policy for the jurisdiction.



Resource Table 3: Understand Your Community’s Problem/Issue

Name	Description	Source
<u>POLARIS: Problem Identification</u>	This webpage provides information on identifying the true underlying problem causing the public health issue and interested parties to include in this stage of the policy process.	CDC Office of Policy, Performance, and Evaluation
<u>Mobilizing for Action in Planning and Partnerships (MAPP): Collecting and Analyzing data</u>	Phase 3 of the MAPP process is collecting and analyzing community data. This webpage provides resources and information on the four MAPP assessments which, when combined, give a comprehensive view of the health, and the factors that affect the health of the community.	National Association of County and City Health Officials (NACCHO)
<u>MAPP: Identifying and Prioritizing Strategic Issues</u>	Phase 4 of the MAPP process is identifying and prioritizing strategic issues. This webpage provides resources focused on using the information from visioning processes and the four MAPP assessments to discover and prioritize the most important issues facing a community.	National Association of County and City Health Officials (NACCHO)
<u>Paving the Road to Health Equity</u>	This webpage defines health equity, discusses four pathways to improving health equity, and links to a special supplement in the Journal of Public Health Management and Practice focusing on health equity.	CDC Office of Health Equity
<u>Building a Movement, Transforming Institutions: A Guide for Public Health Professionals</u>	This online guide provides information and resources for institutionalizing an approach for embedding health equity into everyday work, including policies. These tips may be helpful in considering how an eye to health equity can be present throughout the policy process.	PolicyLink
<u>Health in All Policies Resource Center</u>	The Health in All Policies Resource Center provides resources and tools that support a collaborative approach to health promotion that recognizes the importance of including health considerations when making policy decisions.	CDC Office of Policy, Performance, and Evaluation
<u>Health in All Policies (HiAP)</u>	This webpage provides resources related to HiAP and Health Impact Assessment (HIA), including toolkits, guides, and webinars.	National Association of County and City Health Officials (NACCHO)
<u>County Health Rankings and Roadmaps: Use the Data</u>	This webpage provides guidance on how to find and understand data that can be used to assess community needs and guide community policy efforts.	University of Wisconsin Population Health Institute
<u>Health Impact Assessment (HIA) Tools and Methods</u>	This compilation of resources can assist communities undertaking a Health Impact Assessment (HIA).	World Health Organization

BUILD YOUR TEAM

By establishing the structure for your team, you are setting the foundation upon which your work will be built. The identification of ground rules and team roles can make a positive impact on team success. This section provides information that can assist in the creation of a high-functioning policy team.

Team Members and Their Roles

→ Find Teammates that Add Value to the Policy Activity



Individuals and entities that want to use evidence-based policy to address a community health issue can identify and involve those who are well-positioned to shepherd the success of the policy process. Incorporating a policy lens early on, whether by including people from organizations that employ policy to address the community health issue of interest, individuals with subject-matter expertise in the health concern or related policies, or a local policy professional experienced in navigating local legislative processes, can add value to the team's policy work. This can be done by conducting a "stakeholder analysis," a process which goes beyond the identification of key interested parties and considers all parties who may be involved in the work or impacted by the policy. This analysis is an opportunity for thoughtful reflection of all parties' potential roles

in the project (i.e., the utilization of the policy process to address a health issue with an evidence-based policy solution). Such roles could include members of the "policy team," a community champion, a needed subject matter expert, or a key legislative contact.

→ Identify Team Roles to Ensure Accountability and Drive Productivity



Identification of appropriate team roles can support an increased understanding of the community issues being addressed, reduce duplicative work, and promote accountability. To accomplish this, high-level action planning at the outset of the effort can be used to identify steps for each activity needed to complete the domains of the policy process. As part of the action planning, the team can determine what roles are needed at each step and which team members would assume which roles. Consideration of factors such as area of expertise or experience, organizational proximity to the central issue, and staffing and availability may help inform decisions about assigning roles to team members.

→ Utilize a Team Coordinator

Coordinators can advance project progress and promote accountability by monitoring whether activity steps are on schedule and within scope and by helping to find solutions if schedule disruptions arise. A coordinator can schedule meetings, establish timelines, identify action items, and use other project management tools to keep the policy process on track and ensure that responsibilities are completed on time. The coordinator role can be assumed by a willing member of the policy team or can be someone selected by the team. Regardless of the selection method, the team and the project would benefit from a coordinator who has availability and organizational skills.

→ Use Strong Facilitation

Facilitators can ensure that all points-of-view are heard and differences in opinion are addressed during team meetings by guiding conversation and keeping activities on task. For this role, consider individuals with facilitation training or



COMMUNITY REFLECTIONS

One community observed that its local policy lab team included individuals from a variety of sectors who had worked together on numerous projects in the past. None of the original lab participants, however, had engaged in policy change prior to embarking on the policy activities for the lab. The absence of an individual with policy experience created unforeseen hurdles that delayed progress at the outset of the community's policy work.

who have experience moderating groups of individuals focused on achieving a goal as a group. Facilitation skills can be employed during policy team meetings as well as other policy process activities, such as community forums seeking input on problem identification.

➔ **Focus Team by Establishing Vision, Values, and Norms**

Establishing team norms, vision, and values can help keep the team focused on addressing the public health issue at hand. Incorporating all team members in the process of creating these guiding principles can increase buy-in and support.

➔ **Build a Foundation of Trust**

Strengthening team bonds and building an environment of trust can encourage the sharing of honest opinions among teammates and support an appreciation for individual perspectives, values, and working styles—all factors that can influence the performance of a team. These elements are important in building the foundation for a high performing team, helping to ensure productivity, efficiency, and commitment throughout the process.



COMMUNITY REFLECTIONS

Establishing a shared vision and set of values helped the Beaufort County, South Carolina team stay focused on the systems-level change needed for the community. The process also gave the policy lab team an understanding of one another’s different backgrounds and perspectives, which enabled them to navigate toward proposed solutions.

Linn County, Iowa found that convening team members outside of the workplace encouraged the creation of professional and interpersonal bonds. These strengthened connections have had a direct impact on team performance and encouraged the discovery of additional collaborations for the future.

Resource Table 4: Building Your Team

Name	Description	Source
POLARIS: Strategy and Policy Development	This resource identifies interested parties who can help you work through the strategy and policy development process.	CDC Office of Policy, Performance, and Evaluation
MAPP: Engaging Local Public Health System Partners	This presentation provides information on identifying partners to be part of your work.	National Association of County and City Health Officials (NACCHO)
MAPP Evolution Blueprint Executive Summary	A summary of the redesign of the MAPP framework to address health inequities and other evolving public health needs.	National Association of County and City Health Officials (NACCHO)
Identifying partners: Circles of Involvement	This worksheet allows you to consider the array of partners you may engage with and their role in the work.	National Association of County and City Health Officials (NACCHO)
Facilitating Meetings of Diverse Individuals	This webinar provides tips for facilitating groups made up of individuals with diverse perspectives.	National Association of County and City Health Officials (NACCHO)
Applications and Tools for Creating and Sustaining Health Teams	This collection of articles provides information on many of the core processes for developing teams, including developing a charter, facilitation, and effective meeting management.	Public Health Foundation

DEVELOP THE POLICY

Focusing on the content and structure of evidence-based policies under consideration as well as the process by which those policies will be developed can facilitate their successful adoption and integration into the community. This section describes quick-start elements to consider while the policy is under development.

Definition of “Policy”

→ Operate Under a Definition of “Policy” that is Appropriate for the Community



Different interpretations of the meaning of “policy” can affect discussions about policy work with individuals and organizations outside of the policy team. For example, the enforceability of a policy (i.e., the ability to operationalize it and ensure adherence) has been cited as an issue when participants in the Local Policy Lab have discussed their proposed policies with outside interested parties. Conversations with community leaders and those knowledgeable in the local policy process can be instrumental in determining the appropriate language that falls within the locally accepted parameters for the definition of “policy.”



COMMUNITY REFLECTIONS

A team from a participating community encountered difficulties when attempting to collaborate with community leaders. The team consulted with experts in the local legislative process in an attempt to identify the root cause of the difficulties and learned that the local decisionmakers did not have the type of authority required by the language of the proposed policy. After identifying the key sticking point in the policy language, the local policy lab team was able to successfully work with community leaders to make adjustments that made the text of the policy acceptable and within decisionmakers’ authority.

→ Build an Evidence-Based Policy



Communities seeking data on the potential health, economic, and budgetary impacts of a proposed policy can seek out guidance and resources from non-profit organizations, non-governmental organizations, and other entities that may have gathered this information on the policies under consideration. Subject-matter experts, academic institutions, and other public health policy-focused entities may be knowledgeable as to the location of these information sources.

Resources for Policy Development, Adoption, and Implementation

→ Leverage Academic Programs and Institutions



Local academic institutions with programs related to policy can serve as valuable information and staffing resources for policy-related activities. While policy teams may benefit from access to subject-matter experts and student volunteers, the academic institutions also gain benefit from opportunities for students to apply the lessons learned in the classroom. Online lists of federal academic awardees in relevant focus areas, such as the [CDC Prevention Research Centers](#), can help communities as they begin the process of identifying potential academic partners.





Resource Table 5: Develop the Policy

Name	Description	Source
<u>POLARIS: Strategy and Policy Development</u>	This resource offers steps to help make the selected policy option actionable.	CDC Office of Policy, Performance, and Evaluation
<u>Engaging Local Public Health System Partners: The Academic Community</u>	This presentation provides strategies for engaging with academic partners around a community health improvement planning process and how to sustain that partnership.	National Association of County and City Health Officials (NACCHO)
<u>The Guide to Community Preventive Services (The Community Guide)</u>	The Community Guide provides a comprehensive list of interventions across public health topics, including policies. Interventions are rated by evidence level.	Community Preventive Services Task Force
<u>County Health Rankings and Roadmaps: What Works for Health</u>	The webpage provides evidence informed programs and policies across public health topics.	University of Wisconsin Population Health Institute
<u>Definition of Policy</u>	The webpage provides an overview of the definition of a policy and how it relates to public health.	CDC Office of Policy, Performance, and Evaluation
<u>Long-Range Planning for Health, Equity and Prosperity—A Primer for Local Governments</u>	This ChangeLab Solutions guide describes strategies that can be used by land use planners to bring a health equity lens to policy solutions.	ChangeLab Solutions
<u>CDC Prevention Research Centers</u>	The Prevention Research Centers program funds academic institutions to conduct applied public health prevention research related to public health interventions based on the latest science.	CDC National Center for Chronic Disease Prevention and Health Promotion, Division of Population Health

ENGAGE THE COMMUNITY

Community members play an integral role in the policy process, particularly the development of effective policy, as they are the ones who will be accepting, implementing, and living with the rules and considerations that are being created. Ideas for how to engage with the community in the policy process can be found in this section.

Policy Development through the Community

- ➔ Seek community input to increase buy-in and help refine/reframe the topic as needed



Engaging the community early in the policy process can promote awareness of the policy activity and bring expertise and practical knowledge to the effort. This can increase community buy-in and help the policy team better understand nuances that need to be incorporated into the policy to encourage local adoption. Focus groups and pop-up proof-of-concept installations can facilitate community feedback on the particular policy when possible.

Community Champions

- ➔ Consider roles in the policy process that may be filled by community partners and potential champions



Community members can serve as both passionate supporters on topics they hold dear and as representatives of the interests held by various local populations. [Incorporation of these community members into various domains within the policy process](#) may aid in the facilitation of policy acceptance and adoption. The identification of potential collaborations with local nonprofits, grassroots advocacy organizations, and other community partners can assist searches for those individuals who may be willing to participate in policy work.

Community Understanding of Policy Efforts

- ➔ Strategically plan methods for developing meaningful connections with the entire community



The creation of significant connections with diverse communities can encourage buy-in during the policy process and help to ensure that the policy being developed is [impactful while being equitable](#). Team members may consider the development of culturally appropriate communications when gathering feedback and requesting community support. Additionally, supporting culturally relevant community events, such as fairs and celebrations, can be another way to create deep community connections.

- ➔ Leverage potential economic impacts to engage with interested parties with financial concerns



The perception of an economic impact can vary between positive and negative depending on the perspective of interested parties in the community. Being aware of different viewpoints and perspectives can help prepare the policy team to address a variety of concerns interested parties may have about the economic impact of the policy. Using tailored fact sheets describing economic and health benefits and holding community-wide discussions are tools that may facilitate these efforts.



Resource Table 6: Engage the Community

Name	Description	Source
<u>MAPP: Engaging Community Members</u>	This presentation describes different levels and roles for community involvement and how to consider a strategy for reaching out to your community members.	National Association of County and City Health Officials (NACCHO)
<u>Principles of Community Engagement—Second Edition</u>	This report provides community principles to guide and assess the collaborative efforts of community members, health professionals, and researchers.	Agency for Toxic Substances and Disease Registry

ADVANCE POLICY ADOPTION

Certain activities may boost the chances of a policy being adopted by a community's members and leadership. This section provides examples of methods that can be utilized to improve the chances of policy adoption within a local community.

Policy Language Identification

→ Identify examples of evidence-based policies that may be adapted for community use



Engaging with local policy experts, attorneys, and subject-matter experts may help uncover policy examples that could be leveraged to prepare adoptable policy language while reducing team workload. There may also be value in the identification of organizations that could assist with the development and adoption of a particular local policy based on existing templates. As language for the policy is identified, it can be shared with interested parties for feedback as an additional way to engage the community in the process, ensure the policy is worded in a contextually appropriate manner, and help to secure buy-in. Adaptable policies are often feasible, appropriate, and meaningful for the population of interest.

Effective Communication Planning and Messaging

→ Develop engagement and communication strategies for various groups of interested parties



Strategic communication can be useful when considering an approach to leveraging interested parties in the adoption process, as different groups may require different messaging, tone, and even messengers depending on their respective perspectives. Teams that leverage communication strategies to determine when and where to initiate contact with interested parties in the local community may uncover potential barriers to policy adoption efforts that may require additional information on the community's value of the policy activity. When these issues are addressed early, frequently, and effectively, these interested parties may

turn into policy champions that can support a policy effort and provide critical feedback along the way. Considerations for improving strategic communications include gaining a deep understanding of the different audiences you engage; setting out the objectives of each of your communications and identifying the best format to meet those objectives prior to crafting a message; and weighing the best method(s) for delivering your messages.



COMMUNITY REFLECTIONS

Linn County, Iowa drafted a communication plan highlighting key messages illustrating the positive impacts of policy change for both community members and other identified groups of interested parties. This plan has proved invaluable to reaching out to key community groups and individuals, both important interested parties for achieving policy adoption goals.

→ Use clear messaging

When conducting outreach to community groups, partners, and other interested parties and individuals for buy-in, feedback, or support, clearly articulating the messages can help avoid confusion. Careful review and testing of communication materials can be used to ensure that the intended messages are clearly conveyed, thereby minimizing risk that recipients may misconstrue the goals and potential impact of the proposed policy. Storytelling is an effective and accessible messaging strategy that lends a personal touch. Likewise, leveraging the results of national studies and/or focusing on the potential health, economic, and budgetary impacts of the policy can serve as helpful communication mechanisms that articulate potential positive outcomes from policy adoption.



➔ **Utilize Policy Process Activities to Encourage Future Investment in Policy Adoption and Implementation**



When financial, human, or other resources are not readily available to support policy adoption and implementation efforts, teams may consider identifying different methods to obtain resources and push their work forward. Teams can look towards other communities who have implemented similar policies to provide a proof-of-concept that positively influences

the prioritization of their own policy issue for future activity in their communities. Additionally, teams may find it possible to leverage their initial policy activities to secure external funding from the various levels of government (e.g., federal, state, city), nonprofit foundations, or others interested in supporting these types of efforts. Fostering effective communications with entities that may lend future support can create opportunities to advance adoption and implementation of the policy.

Resource Table 7: Advance Policy Adoption

Name	Description	Source
POLARIS: Policy Enactment	This webpage discusses the importance of policy enactment and who is often involved	CDC Office of Policy, Performance, and Evaluation
POLARIS: Policy Implementation	This webpage describes steps that may be needed to increase the likelihood the policy will achieve its intended outcomes.	CDC Office of Policy, Performance, and Evaluation
Tools and Resources	Approaches and toolkits for planning communication work in a strategic, evidence-based manner.	FrameWorks Institute



APPENDIX: LOCAL POLICY LAB— COMMUNITY PROFILES AND ACTION PLANS

This appendix contains the community profiles and actions plans that were developed by the communities that participated in the Local Policy Lab. In order to preserve the privacy of the participating community members, individual names were removed from the “By Whom” portion of the Action Plan tables.



BEAUFORT COUNTY, SOUTH CAROLINA TEAM PROFILE

COMMUNITY CHARACTERISTICS

Beaufort County, SC:

- Population: 186,444.

Sheldon Township:

- 68% African-American
- 51% at 200% of the federal poverty level
- Transportation is a major barrier to accessing health care and adopting healthy behaviors
- A USDA designated food desert

PHYSICAL ACTIVITY CHARACTERISTICS

- 60% of residents report that physical activity is important
- 36% report following a healthy lifestyle

HEALTH CHARACTERISTICS

- High rates of chronic disease and related health conditions (such as obesity, high cholesterol, hypertension)

POLICY EXPERIENCE

Experience in policy, systems and environmental change relative to:

- Pedestrian planning,
- food systems,
- access to health care, and
- school health.

VISION STATEMENT

The residents of Sheldon Township have equitable and safe access to physical activity.

PROBLEM STATEMENT

- Sheldon Township is a rural community with limited access to physical activity and fiscal resources
- The primary issue is the lack of physical opportunities for the residents of Sheldon Township
- Sheldon Township is a rural community, with many residents living with chronic disease and poverty
- Sheldon has a strong sense of community and the capacity to implement policy change

PROPOSED POLICIES

- Policy 1: Access to safe places for physical activity (possibly local schools or faith-based institutions)
- Policy 2: Social support initiatives in community settings (exercise clubs, to include but not limited to walking or a biking group)

ACTION PLAN

- Selected Policy:** Faith Based Shared-Use Pedestrian Planning
- Problem Statement:** Sheldon Township residents lack access to safe and convenient active living opportunities.
- Vision:** Increase access to Sheldon residents for healthy lifestyles.
- Goal:** Implement shared-use agreements in Sheldon Township
- SMART Objective:** By February 2021, shared-use agreements will be in place in 5 churches in the Sheldon Township Faith-Based Consortium.

STRATEGY: USING DATA

Action Steps What needs to be done?	By Whom Who will take actions?	Resources and Support Available	Resources and Support Needed	Interested Parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Collect, analyze Sheldon Township Quality of Life (QOL) data	Team member 1	Identify relevant QOL indicators. Community Health Needs Assessment data	Needed: QOL data comparison between Sheldon and Beaufort County at large	Health Department, Hospital, Sheldon Township, Federally Qualified Health Centers (FQHCs)	Health Department, Hospital, Sheldon Township, FQHCs

STRATEGY: ENGAGE INTERESTED PARTIES

Action Steps What needs to be done?	By Whom Who will take actions?	Resources and Support Available	Resources and Support Needed	Interested Parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Conduct 2 community meetings to disseminate data findings and to introduce project	Team members 1 and 2	Space, materials, facilitator	Participants	Health Department, Hospital, Sheldon Township, FQHCs AccessHealth Lowcountry	Health Department, Hospital, Sheldon Township, FQHCs AccessHealth Lowcountry
Research review of: shared use agreements in faith communities, joint use agreements in rural communities, shared use language	Team member 1	Academic journal articles	How the evidence translates to Sheldon Township	Health Department, Hospital, Sheldon Township, FQHCs AccessHealth Lowcountry, Together for Beaufort County	Health Department, Hospital, Sheldon Township, FQHCs, Together for Beaufort County
Meet with Sheldon Township leadership to introduce project.	Team member 3	Previous relationships/collaborations	Buy-in from leadership	Medi-Assist, Sheldon Consortium	Medi-Assist Sheldon Township

Action Steps What needs to be done?	By Whom Who will take actions?	Resources and Support Available	Resources and Support Needed	Interested Parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Meet with individual churches to introduce project (2 churches identified for project launch)	Team member 3	Previous relationships/collaborations	Buy-in from churches and health ministries	Medi-Assist, Sheldon Consortium	Medi-Assist Sheldon Township

STRATEGY: IMPLEMENTATION

Action Steps What needs to be done?	By Whom Who will take actions?	Resources and Support Available	Resources and Support Needed	Interested Parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Secure 2 churches for project launch	Team member 3	Previous relationships/collaboration, meaningful engagement from churches	Alignment of goals between the project, health ministries and the Consortium	Sheldon Township, Medi-Assist	Sheldon Township, Medi-Assist
Conduct Feasibility Study to determine evaluation measures, efficaciousness, best practices, sustainability planning	Team members 1 and 3	Peer reviewed feasibility research	Translate research to Sheldon, identification of best practices	Health Department, Sheldon Township, Medi-Assist	Health Department, Sheldon Township, Medi-Assist
Secure landscape architect to guide process of development of 1 mile walking trail to include: signage, indigenous plants/foilage, resting stations	Team member 3	Architect	Funding	Medi-Assist	Medi-Assist
Promote project	Team members 4 and 5	Available: Beaufort-Jasper-Hampton Comprehensive Health Services, Inc. (BJHCHS), Medi-Assist		BJHCHS	BJHCHS, Medi-Assist



COLUMBIA/BOONE COUNTY, MISSOURI TEAM PROFILE

COMMUNITY CHARACTERISTICS

- 2016 population: 176,594
- Median age is younger than national average (30.6 years)
- Predominately white (81.8%) and English speaking (92.2% speak only English in the home)
- Well-educated (over 45% have a bachelor's degree or higher)
- 37% do not have sidewalks in their neighborhood
- 14.7% do not consider their neighborhood to be extremely safe

PHYSICAL ACTIVITY CHARACTERISTICS

- 29% of adults report no leisure time physical activity
- 82% have access to exercise opportunities
- Only 21.4% reported being physically inactive in last 30 days
- 73% of residents would like to walk more often, but 64% of residents do not believe Columbia is a walkable community
- 75% would like to ride their bike more often, but 58% would be more likely to do this if the streets were safer

HEALTH CHARACTERISTICS

- 28% of adults have obesity
- Leading cause of death is heart disease and cancer

POLICY EXPERIENCE

- Tobacco policies—Tobacco 21 (T21), smoke free streets, e-cigarettes, Tobacco Retail Licensure (TRL)
- Food Policy Council (recently established)
- Vision Zero
- Complete Streets

VISION STATEMENT

To have a physically active community that is accessible for all in an environment that promotes physical activity.

PROBLEM STATEMENT

The primary issue to address is access to physical activity resources. This is a county wide issue, though noting a focus on those with disabilities, rural residents, and adults.

PROPOSED POLICIES

- Policy idea 1:** Update City of Columbia Master Plan (e.g., enhance sidewalks by creating landscape buffers or interactive routes; add protective bike lanes).
- Policy idea 2:** Update Boone County Master Plan to include Complete Streets aspects specifically sidewalks and bike lanes where appropriate.
- Policy idea 3:** Enhance PA and PE Policies at Columbia Public Schools (e.g., set recess standards throughout the district. Include curriculum on navigating all forms of transportation).
- Policy idea 4:** Improve transit system.
- Policy idea 5:** Increasing access to gyms.

ACTION PLAN

- Selected Policy:** Complete Streets—Protected Bike Lanes
- Problem statement** Resident do not feel safe using current active transport options.
- Vision:** To create an environment that promotes safe and accessible physical activity options for all.
- Goal:** Create a safe environment for active transport for all residents.
- SMART objective:** By the end of 2020, the City Council of Columbia will adopt an updated Complete Streets policy in order to create a safer environment.

STRATEGY: GATHER DATA TO UNDERSTAND ENVIRONMENT

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Launch activity: Review current Complete Streets policy for language	All	By Oct 9th meeting	Columbia Daily Tribune articles, City City Council memos	Understanding of prior process in adopting 2004 Complete Streets policy	Past and present Columbia city councilmembers; economic development finance professional	All
Meeting with community development	Team Member 1: set meeting. Team member 2: set agenda	Invite to November meeting	Email meeting rooms. Staff time.	Good understand of prior process. Vision, objectives. Ideas of where language should be changed.	Planning group	Planning Group
Research Existing examples for Complete Streets policies	Team member 3	August 30, To be reviewed by Planning Group	PedNet has info completed due to grant work in process	<ul style="list-style-type: none"> ■ Vision Zero ■ Google Search 	Team members 3, 1, 4 and 4	Planning Group
Focus Groups with diverse community members	Team member 2	End of March	Some have been completed	Funding for incentives, food, etc.	Team member 2	All

STRATEGY: COMMUNITY ENGAGEMENT

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Launch activity: Pop up complete street	Team member 3	5/20	Staff	Materials for pop up	PedNet, Farmers Market	Entire community
Develop a media plan	Team member 4 (organization)	3/20	Staff	Funding Interns	All interested parties can have input. PedNet	Community interested parties
Engage the community on the policy itself	Team member 5 (organization)	4/20	Staff PedNet population	Funding	All interested parties (schools, Columbia Police Dept., district)	Community interested parties
Advocacy to city leadership	Team member 5 (organization)	5/20	Time Member connections	Extra voices	People in all wards to speak up	Entire committee



JACKSON, MISSISSIPPI TEAM PROFILE

COMMUNITY CHARACTERISTICS

- Population: 173,514
- Predominantly African-American (82%)
- Persons in poverty: 29%

PHYSICAL ACTIVITY CHARACTERISTICS

- Around 68% reported doing physical activity during past 30 days
 - 61.5% female vs 72.7% male
 - 63.4% black vs 73.8% white

HEALTH CHARACTERISTICS

- Around 32% obesity
 - 41.6% female vs 25% male
 - 41% black vs 21.6% white

POLICY EXPERIENCE:

- Shared Use Agreement
- State Employee Wellness Program
- Helmet Ordinance
- DAP/OAP annual report
- Healthy Food Beverage policy with Churches
- Provide TA to local communities to create health policies

VISION STATEMENT

The City of Jackson is pioneering healthier initiatives to improve a culture of health for ALL.

PROBLEM STATEMENT

- Citizens do not have access to safe spaces, including public parks and walking trails for physical activity.
- Citizens do not have adequate education for safe practices during physical activity.

PROPOSED POLICIES

Policy 1: Complete Streets Policy

Policy 2: Shared Use Agreements

ACTION PLAN

Selected Policy: Complete Streets Ordinance

Problem statement: Citizens need increased access to safe spaces, including public parks and walking trails for physical activity.

Vision: The City of Jackson is pioneering healthier initiatives to improve a culture of health for ALL.

Goal: Develop a policy to increase physical activity (PA) for Jacksonians.
Increased awareness for the need of built environments and connectivity.

SMART objective: By June 30, 2020, the city council of the City of Jackson will adopt an ordinance for the enhancement of the existing complete street policy.

STRATEGY: DRAFT A POLICY ROADMAP

Action Steps Launch activity: What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Output What will we have at the completion of this action?
Research policy language and previous actions	Team members 1 and 2	09/2019	Local HD Staff Time COJ Policy Analyst COJ Attorney Staff time	TA from NACCHO Policy language from COJ	MSDH COJ Planning COJ Public Works	Comparison of example policy language Review of previous attempted policies that are similar
Draft policy	Subcommittee Members	12/2019	Model Policies from Smart Growth America and Change Lab Solutions Existing policies in MS			
Engage experts (technical and SME) to inform key policy	Team member 1	10/2019	Staff time Existing relationships with interested parties	Admin support	COJ Mayor's Office COJ Council Chairs CDC and NACCHO Safe States SME Preventative Health	Key experts and SMEs identified Notes from meetings and calls
Pilot review of the policy	Team member 8 (organization)	11/2019	Examples of other complete street policies	Staff time; Policy language requirements	COJ Planning COJ Legal	NACCHO interested parties Policy draft reviewed by team and interested parties
Revise Proposed policy based on community input	Subcommittee	6/30/2020	City Legal	Existing City of Jackson policies	Team member 2 (representative from Office of Mayor) City Legal City Planning	Policy draft for council agenda
Finalize policy language	Team members 8, 9, and 10 (organizations)	12/2019	Staff Time	Admin support TA from NACCHO TA from MSDH	COJ Mayor's Office Interest Groups Preventative Health State Health Officer	Key experts and SMEs identified Notes from meetings and calls

STRATEGY: MOBILIZE COMMUNITY CHAMPIONS AND OTHER INTERESTED PARTIES

Action Steps Launch Activity: What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Output What will we have at the completion of this action?
Establish Process	Team members 3, 4, 5 and 6	02/28/2020	Committee Connections	Internal Connections One for each ward	Committee	List of key community Interested parties
Community conversation with each ward (1-7)	Team members 6, 2 and 1	3/31/2020 -06/30/2020	Council members 7 meeting locations	Internal Connections email/calendar Meeting space	Community Partners in respective wards	Compilation of Pros and cons from community
Gain community input for proposed policy	Team members 3, 4, 5 and 6	05/31/2020	One page document Infographic Draft policy	Community Events City of Jackson Worksite Wellness Committees	Community members and workers Council members Faith-based leaders	Feedback from community members and interested parties regarding proposed policy
Strengthening existing relationships within City of Jackson officials	Committee	06/30/2020	City of Jackson Attorney NACCHO	Proof reading of policy and Policy review	Committee	Successful community participation and policy adoption/implementation

STRATEGY: BUILD OUR COLLABORATIVE EFFORTS

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Output What will we have at the completion of this action?
Prepare Community Policy Action Plan—one page overview	Team members 1 and 5	02/12/2020	Policy Models PHM MSDH AHA	Infographic Policy Draft	Subcommittee members COJ	Infographic One page overview for community distribution
Develop awareness of community members before policy is presented	Team members 7 and 6	06/30/2020	City of Jackson Events Community Partner Events	Staff time Surveys/Evaluation	Community members and workers Council members Faith-based leaders	Participation in all events related to physical activity and community engagement in the City of Jackson
Garner support from community members and city council members	Large Committee members	06/30/2020	Predeveloped tools Speakers	Incentives Funding Surveys/Evaluation	Community members and workers Council members Faith-based leaders	Ability to increase the physical activity of community members
Presentation of Community Policy Action Plan with detailed outline regarding Complete Streets policy	Large Committee Members	06/30/2020	Predeveloped tools Policy Draft	City of Jackson Events Community Partner Events	Community members and workers Council members Faith-based leaders	Community members have better understanding of draft policy and in support of policy adoption



LINN COUNTY, IOWA TEAM PROFILE

COMMUNITY DEMOGRAPHICS:

- Total Population: 225,909
- Age: 6.3% under 5 years, 23.2% under 18 years, 15.8% 65 years and over
- Sex: 50.7% female
- Race and Hispanic origin: 88.4% White, 5.9% Black or African American, 2.7% Two or more, 2.6% Asian, 0.3% American Indian and Alaska Native, 0.1% Native Hawaiian and Pacific Islander
- Foreign born persons: 4.0% (2013-2017)
- Owner-occupied housing: 74.2%
- Median Household Income: \$62,702
- Persons in poverty: 9.0%
- Persons without health insurance (age 65 and under): 4.2%
- Education: 94.7% High school graduate or higher, 32.3% Bachelor's degree or higher

PHYSICAL ACTIVITY CHARACTERISTICS

Linn County:

- Adults meeting recommended guidelines = 46.5% (BRFSS, 2017)
- Adolescents at least 1 hr P.A. per day = 26% (Iowa Youth Survey, 2016)

Cedar Rapids:

- 30+ Minutes of exercise, 3+ days per week= 51.4 % (Gallup Healthways Well-Being Index, 2016)

HEALTH CHARACTERISTICS:

Linn County:

- Adult overweight/obesity = 67.8% (BRFSS, 2017)
- 5th Grade overweight/obesity = 35.0% (CRCSD, 2016)
- Kindergarten overweight/obesity = 31.8% (CRCSD, 2016)
- Adult diabetes prevalence = 7.9% (BRFSS, 2017)
- Heart disease mortality = 152.9/100,000 people (LC Death Dataset, 2016)

Cedar Rapids:

- Obese = 31.5%, Overweight = 35.0%, Obese/overweight = 66.5% (Gallup Healthways Well-Being Index, 2016)
- Diabetes prevalence = 9.7% (Gallup Healthways Well-Being Index, 2016)

POLICY EXPERIENCE:

- Complete Streets adoption
- The MPO's focus on biking/walking for both adults and children (SRTS funding of ~\$250K per year and trails funding of ~1.67 million per year)
 - Blue Zones Project® in two communities
 - Let's Move!
 - Community Transformation Grant

TEAM VISION STATEMENT

All people in Linn County live, work, and play in a connected and inclusive environment that encourages safe opportunities for physical activity.

PROBLEM STATEMENT

The primary issue/outcome related to physical activity the team wants to address is related to obesity rates. In Linn County, more than $\frac{2}{3}$ of adults (67.8%) have overweight or obesity. More than $\frac{1}{3}$ of fifth graders (35.0%) and slightly less than $\frac{1}{3}$ of kindergarteners (31.8%) in the largest Linn County school district have overweight or obesity. Only 26% of adolescents are getting at least 1 hour of physical activity per day. The primary target population is youth.

Low-income populations are disproportionately affected by not meeting physical activity recommended guidelines. Additional considerations for target populations may include low-income neighborhoods, neighborhoods within walking distance to schools or parks, or areas where transportation is needed for access to safe places for physical activity. Focus is the Cedar Rapids metro area.

PROPOSED POLICIES

Strategy 1: **Activity-friendly routes to everyday destinations**

- Policy Lever: Safe routes to school, parks, and/or work

Strategy 2: **Access to Safe Places for Physical Activity**

- Policy Lever: Shared use agreements (consider schools, colleges/universities, cities, county, non-profit organizations)

ACTION PLAN

Selected Policy: Safe Routes to Parks

Problem statement: There is a need to address high youth obesity rates for low-income populations within the metropolitan areas of Linn County.

Vision: All people in Linn County live, work, and play in a connected and inclusive environment that encourages safe opportunities for physical activity.

Goal: To increase physical activity and improve social connectedness through access to neighborhood parks.

SMART objective: By March 1st, the Linn County Board of Supervisors, the City of Cedar Rapids, or the City of Marion will adopt safe routes to parks policy. All Cities in Hiawatha and Robins will be invited to participate in the policy adoption discussion.

STRATEGY: POLICY DRAFTING AND REVIEW

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications What will we have at the completion of this action?
Launch activity: Research best practices and examples especially from Iowa, collect local data—usage reports	Team member 1: collect local data, justification. Team members 2 and 3: research best practices	Aug. 31, 2019	Published literature on safe routes to parks projects	Parks and recreation	City and county planning departments and parks and recreation departments	Safe Routes Team
Alert key community members and groups, partners, and other interested parties	Team members 1, 2 and 3	Aug. 31, 2019	Safe Routes Partnership Safe Routes to Parks website	Talking points for key interested parties	Same as Communications list (city and county staff)	Linn County Engineer Community Development Director County Policy Director City of Marion Linn County Conservation Board of Health, Board of Supervisors
Draft initial policy language	Team members 4 and 5	Sept 8	Change Lab Solutions Model Language American Planning Association	Template/ sample policy language from national organizations	Rest of Safe Routes group to review	Safe Routes Team
Finalize draft policy	Safe Routes Team	November 13, 2019	Change Lab Solutions American Planning Association		Safe Routes Team	Safe Routes Team
Gather groups for policy review	Safe Routes Team	February 1, 2020	Draft policy		All interested parties engaged in step 2 (TBD after initial interested party engagement) plus: Planning departments Parks depts of cities and county Conservation Department, Board, and Foundation	City and County staff and department heads (planning, parks and recreation), boards and commissions and associated subcommittees, elected officials
Provide information to other jurisdictions regarding upcoming SRTP	Team member 1 and Team member 8 (organization)	November 13, 2020	Safe Routes presentation and handouts		Corridor MPO Executive Committee Robins, Hiawatha, Ely, Palo, Fairfax, Marion, Cedar Rapids	PowerPoint Presentation

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications What will we have at the completion of this action?
Final policy drafted to the following for review: <ul style="list-style-type: none"> ■ Linn Board of Health (BOH) ■ Linn Board of Supervisors (BOD) ■ Cedar Rapids City Council ■ Marion City Council 	Team members 3 and 1: Marion and Hiawatha Team members 5 and 6	Varies: Marion ready for review mid-February 2020 Linn County and Cedar Rapids TBD.	Draft policy, Safe Routes Presentation	Additional information about funding possibilities for Safe Routes implementation	In addition, engage the following: Marion—Planning Hiawatha—Parks and City Manager	
Share adopted policy(ies) with other jurisdictions in Iowa that may have interest in SRTP initiatives	Safe Routes Team	TBD	Safe Routes presentation, adopted policy(ies)		Peer cities/counties, Iowa Public Health Association, Iowa Planning Association	Peer cities/counties, Iowa Public Health Association, Iowa Planning Association

STRATEGY: INTERESTED PARTY ENGAGEMENT

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Assess who is missing from planning group	Safe Routes Team	September 1, 2019	Brainstorm list of additional partners		TBD	TBD
Engage key interested parties not currently present	Safe Routes Team	November 1, 2020	Safe Routes presentation and handouts		Staff: Parks and recreation/conservation, planning, community development Policy makers: board of health, conservation board, board of supervisors, department heads, city council	Safe Routes Team and interested parties
Engage interested parties and community members to solicit input	Safe Routes Team	Ongoing beginning February 2020	Safe Routes presentation, handouts, media coverage/opinion articles		Community leaders, media, Healthy Hometown advisory groups	Safe Routes Team
Engage disability groups (start with Peer Action Disability Support)	Team member 4	March 2020	Safe Routes presentation and handouts		Support groups, neighborhood associations	Safe Routes Team

STRATEGY: COMMUNICATIONS AND IMPLEMENTATION PROPOSAL

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Develop Communication Plan	Team member 5	Ongoing beginning October 1, 2019	Presentations and handouts from CDC, Safe Routes Partnership, Community Guide, National Parks and Recreation Association	Sample news releases and/or proclamations	City and county staff, policy makers, media, and all audiences/general public	See Communication Plan

STRATEGY: STATE OF PRACTICE

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Assess current conditions	Team member 1	September 13, 2019	Sidewalk network map for Marion, IA	Sidewalk network map for the remainder of Linn County	Corridor MPO City and county planners GIS Department at Linn County	
Review best practices and example policies	Team member 2	September 13, 2019		Central repository of Safe Routes to Parks projects		Safe Routes Team
Look for best practices from around the region/country	Team member 2	September 13, 2019		Documentation of Safe Routes to Parks practices	National subject matter experts	Safe Routes Team
Develop "built environment map" to map current resources and access to resources	Team member 7	May 10, 2020	Current food system map to build base layers	GIS maps of current resources, and access to resources	LCPH epidemiologist, Linn County GIS, Corridor MPO, City planners	LCPH epidemiologist, Linn County GIS, Corridor MPO, City planners

STRATEGY: IDENTIFY FUNDING OPPORTUNITIES

Action Steps What needs to be done?	By Whom Who will take actions?	By When By what date will the action be done?	Resources and Support Available	Resources and Support Needed	Interested parties to Engage Whose involvement is necessary to complete this step?	Communications Who should be informed about/involved with these actions?
Submit funding application to Safe Routes Partnership	Team member 3	December 2019	Project documentation for proposed project	Grant writing support from Safe Routes Team	All Safe Routes Team, City and county staff, Corridor MPO	YMCA leadership

