
VHCIP Provider Sub-Grant Program Final Report



RiseVT

Embracing Healthy Lifestyles in Franklin and Grand Isle Vermont

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Appendix A: RiseVT Scorecards

Appendix B: UVM Center for Rural Studies Evaluation

and lower healthcare costs where we live, work, play, and learn.

Acknowledgments

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Executive Summary

We envision a region that supports and embraces healthy lifestyle. We see bike and pedestrian friendly communities with easy access to fresh and healthy local produce and foods. We see an environment that fosters and promotes healthy gathering places, events, municipalities, worksites, and neighborhoods. Thriving downtowns, rural destinations, and recreational landscape will capture the imagination and attention of many as they bring forth the essence of Northern Vermont's vibrant and sustainable farms, diversified agriculture, alternative energies, and deeply rooted family heritage.

In 2014, a multi-sector group of leaders from throughout Vermont's Franklin and Grand Isle Counties led by the CEO of Northwestern Medical Center and District Director of the Vermont Department of Health, formed the 'Community Committee on Healthy Lifestyles.' Their intent was to improve the health of adults and children through primary prevention. Using an intensive Results Based Accountability process, the committee identified the need to focus on reducing obesity by increasing physical activity and enhancing healthy eating.

The RiseVT name and logo emerged from the work of the Community Committee on Healthy Lifestyles and built a foundation in best practice. Research shows that long term, evidence-based prevention approaches like the RiseVT community-wide campaign improves a community's overall health and ultimately reduces healthcare costs. After successfully piloting RiseVT with individuals, families, businesses, schools, and municipalities, this innovative effort to engage our entire community in healthier lifestyles launched in June 2015.

RiseVT is an innovative, engaging, community-based best practice wellness initiative that provides a formal framework – we call them scorecards – for individuals, families, schools, child cares, businesses, and municipalities to use in assessing and guiding their wellness efforts. RiseVT amplifies local resources while partnering with others on creative, positive approaches to engage our community in healthy behavior change.

It sparked interest in people from all ages, from 0 to 92, and from small businesses with only two employees to large businesses including almost 1000 employees. RiseVT has engaged

municipalities within a rural setting with less than 2000 residents, to larger, more urban destinations with over 12,000 people. Through its innovation and engagement, RiseVT is changing the wellness landscape within our region and we confident that it will change the landscape of all of Vermont. RiseVT is a movement that continues to gain momentum as more and more of people explore embracing healthier lifestyles

More than 12,600 individuals have already connected with RiseVT – that is approximately 10% of our population in northwestern Vermont. We are reaching individuals who are engaging in more physical active and healthier food choices. Many families are getting involved and a growing number are taking advantage of the free health coaching resource through RiseVT. To ensure individuals are surrounded by a culture that supports their efforts to make healthier choices, RiseVT is involved with 46 businesses, 15 schools, and 9 municipalities, and 4 child care sites. These collaborations resulted in policy and infrastructure changes such as smoke-free business sites and community parks, establishing and implementing Safe Routes to School, boosting access to recreational opportunities, including sidewalks in municipal plans and infrastructure changes, facilitating healthier eating by offering healthier options, and establishing or strengthening worksite wellness programs. At the same time, RiseVT is reaching out to the most vulnerable populations by having a monthly presence at the Agency of Human Services and integrating into other community resources, including Martha’s Kitchen (soup kitchen) and the Champlain Valley Office of Equal Opportunity (food shelf). RiseVT also extends its reach by collaborating with the public libraries and school nurses throughout our region.

The beauty of RiseVT’s approach is meeting each person, family, business, school, child care, and municipality where they are and encouraging and supporting them on their individual path to better health. What kind of things show up on the scorecards? For individuals and families, the scorecard starts with the simple step of taking the RiseVT pledge to working towards a healthier lifestyle. The scorecards include strategies such as keeping a bowl of fresh fruit on the counter so the easy choice becomes the healthy choice, as well as things like trying new recipes, taking time to dance to your favorite song, and creating a smoke-free zone inside your house. You do not have to adopt healthy habits all at once because it’s about the journey to better health.

Habits are changing. Social media is abuzz with people enjoying active play and the pleasure of healthy foods. Policies are shifting. Worksites are going smoke free, businesses are becoming breast feeding friendly, schools are addressing healthy food choices and physical activity, and municipalities are addressing walk-ability and recreation.

Discussion

Project Description

RiseVT is a collaborative and community-based approach to achieving improved population health outcomes using a community-wide campaign, a recommended strategy for increasing physical activity and improve nutrition as identified in The Community Guide (www.communityguide.org). RiseVT was designed using the Vermont Prevention Model (Socio-Ecological Model) to enhance the health impact by targeting policies, infrastructure, education, the environment and culture within municipalities, worksites, schools and families by providing a structure of support.

RiseVT encourages and celebrates healthy behaviors, targeting, schools, worksites and municipalities. Organizations can work to achieve higher RiseVT status levels. For example, a school providing education promoting walking/biking to school would earn a bronze level, while fully implementing a Safe Routes to School Travel Plan including the 5 E's (Education, Enforcement, Engineering, Encouragement, and Evaluation) could achieve a Gold level. The same would be true at a worksite level. A worksite that offers worksite wellness classes only would earn a bronze level. A worksite that implements a comprehensive wellness program with financial incentives and supportive policies for employees to actively engage, along with those classes, would achieve gold level recognition. Our scorecards are in Appendix A.

In addition, RiseVT provides support and health coaching to individuals across Franklin and Grand Isle. As individuals engage with RiseVT, they are encouraged to take the RiseVT Individual Scorecard (see Appendix A), which guides them through simple questions about their health to receive their personal score once completed. The score is based out of 100 and an individuals' goal should be to achieve the closest score to 100 that they can get. After their completion, they have the opportunity to engage in one-on-one health coaching or be referred to local community resources such as tobacco cessation, diabetes education, primary care and more. RiseVT is aligned with Northwestern Medical Center's Lifestyle Medicine Department and encourages RiseVT participants to engage in their offerings such as well coaching or the Complete Health Improvement Program (CHIP). The goal of the RiseVT individual scorecards is to provide education and encourage individuals to access available community resources.

RiseVT developed a central clearinghouse for all things health and wellness which addresses a long-term community need. This includes a robust and engaging, free online presence available around-the-clock and without the need for RiseVT membership. The RiseVT website carries information about how to engage with RiseVT, a Healthy Waypoints Map to identify local parks, paths and trails in our region, a community calendar, blog postings and more. By allowing various organizations to submit events and

resources to be listed, we can engage additional community partners, increasing buy-in and increase collaborations in our efforts.

The RiseVT Team is made up of a RiseVT Coordinator, health coaches, wellness specialists and advocates. The team works together to implement policy change; provide technical assistance; and leverage community interest, involvement, and ownership in improving health. The RiseVT Team actively engages municipal leaders, employers, and other organizations within their community on policy changes and resource development. They help organize, facilitate, and mobilize grass-roots efforts regarding population health, based on the needs of that specific community by encouraging participation in an upcoming program, taking on a community challenge, passing a smoke-free parks ordinance, building a bike path, increasing Safe Routes to School, etc. By having these initiatives emerge from within the community, ownership and sustainability are enhanced. Encouraging communities to expand access to recreational facilities and programming has proven effective in getting northwestern Vermont moving forward with a variety of efforts, including Fit & Healthy Swanton and Fit & Healthy Enosburg.

Built from effective practices outlined in The Community Guide, RiseVT is a highly visible community-wide campaign incorporating multi-component strategies to an all-inclusive audience. It's positive and if sustained over time it will influence the knowledge, attitudes and behaviors of the community. RiseVT is focused on moving forward. And, most important to Franklin and Grand Isle counties, it serves as an all-important brand that moves us from the bottom of the healthcare demographic to the top.

Expected Outcomes

1. Increase the overall health of residents by decreasing the percent of overweight and obese individuals*
2. Increase the number of employers offering a wellness program in which 50% of employees participate
3. Expand resources for biking and walking
4. Increase fruit and vegetable consumption by 10% *
5. Decrease the number of people with no leisure time physical activity from 26% to 19%*
6. Increase the number of students walking/biking to school from 15% to 20%*

*Please note that items 1, 4, 5 and 6 are populations health outcome measures from the Behavior Risk and Reduction Surveillance Survey (BRFSS) where data is only released on indicators every 2 years.

RiseVT is designed to achieve a progression of significant short-, medium-, and long-term output and outcome goals. In our first year and a half, we have already exceeded all our three-year engagement goals. We are working toward our mid-range goals of increasing physical activity during leisure time, increasing the consumption of fruits & vegetables, etc. All our

measures align with our long-term goal of reducing obesity in our community and decreasing the illness and expense associated with it. Based on the EPODE¹ model and using best practices, baseline BMI surveillance data will be collected starting in 2017 in school-based settings (ages range 6-12 years old). These data will be collected in partnership with schools, pediatricians, families and include an intensive information communication campaign for the community. The development and implementation of themed campaigns directly targeting children and families will be “solution-oriented and motivational for positive behavior changes without stigmatizing any culture or people.”² The Scientific Advisory Board and Lifestyle Medicine Medical Director will provide oversight to ensure these data are collected in an appropriate and non-stigmatic manner and the communication campaign reflects official recommendations.

Lessons Learned

There were several key elements that were considered in the design and implementation of this initiative. First and foremost, determining why obesity must be prevented and understanding the determining factors for prevention were important to quantify. Secondly, identification of key stakeholders that go beyond health professionals to include politicians, economic stakeholders, local stakeholders, teachers, media, town planners, and others all have a role to play. It was important to maintain the key stakeholder group to a manageable number (~25) to ensure robust conversation and the ability to act move the initiative forward. Stakeholders should be grounded in the local data including overweight and obesity for youth and adults; inactivity; no leisure time; limited fruit intake; consumption of vegetables, tobacco use. These data are available through the Vermont Department of Health and the hospital Community Needs Assessment. After reviewing data, the key stakeholders should agree that the issue is important and that they are willing to commit time to identifying interventions for their community. Census data should be used to identify areas of need in the county and local knowledge of community readiness, including champions/community activators who can carry the message forward, is essential in determining target areas. After examination of the relevant data, the Community Committee on Healthy Lifestyles engaged in the Results Based Accountability (RBA) process to identify performance measures. The Vermont Prevention Model (socio-ecological model) illustrates that there are many factors in play that influence individual and population health. This model supports the need for inclusive strategies addressing multiple levels simultaneously over time across age, gender and culture. The areas listed above provide a strong foundation for the launch of RiseVT and is highly recommended as part of the statewide rollout strategy. The ability to respond

¹ EPODE ‘Ensemble Prévenons l’Obésité Des Enfants’ (*Together Let’s Prevent Childhood Obesity*)

² Borys, JM Bodo YL Henauw SD Moreno LA Romon M Seidell JC Visscher TLS (2011) *Preventing Childhood Obesity*: 103

quickly and make adaptations during the roll-out are fundamental to the success of the community-wide campaign.

During the implementation of the community-wide campaign we continually observed our numbers increase across all identified objectives. We purposefully selected objectives and outcomes that were challenging but obtainable to show success and maintain momentum. The traditional and social media areas of implementation showed great promise immediately and gained increased traction over time which propelled RiseVT into the limelight. Continuous marketing and promotion proved to be key to making headway into schools, businesses, and municipalities.

A unique challenge included working with small business owners (under 15 employees). Many of Franklin and Grand Isle businesses are limited in staff and may only have one or two employees. This is extremely challenging when you are trying to create wellness challenges or policy changes. Often the feedback would include “what is the point, there is only two of us.” To respond to this gap, in the summer of 2016, the RiseVT team created the RiseVT Small Business Umbrella. The Small Business Umbrella caters to businesses with less than 15 employees and provides expertise to increase wellness collaboratively across the small business community. The Small Business Umbrella network meets 4 times a year and provides webinars that focus on health and wellness in the workplace. In addition, the umbrella offers free health coaching and biometric screenings, organized health challenges, participation in a Worksite Wellness Program, and community recognition through traditional and social media. Currently, four local business are actively involved with a goal to increase participation in 2017.

Another challenge we observed in working with schools was the use of one universal scorecard for the school. This scorecard would be completed by the school administration but frequently did not reach the children and teachers in the classroom. At the request of classroom teachers, RiseVT developed scorecards for individual classrooms and further refined them to address the stages of development for each age group increasing their ability to take part in wellness opportunities. This proved to be very successful and is in use in many of the local schools.

The use of the Cerner Wellness Solution as a health management platform was not as successful as originally hoped. While there are currently 337 people registered in Cerner. It is unclear how many are active on the site. There are many competing sites like this including apps that can be used to track and assess individual’s health behaviors including weight and food intake. In addition, private insurance companies have similar sites that are also linked to “rewards” for participation and improved health outcomes.

Project Evaluation

In addition to the following, a formal evaluation with the Center of Rural Studies at the University of Vermont is included in [Appendix B](#).

RiseVT

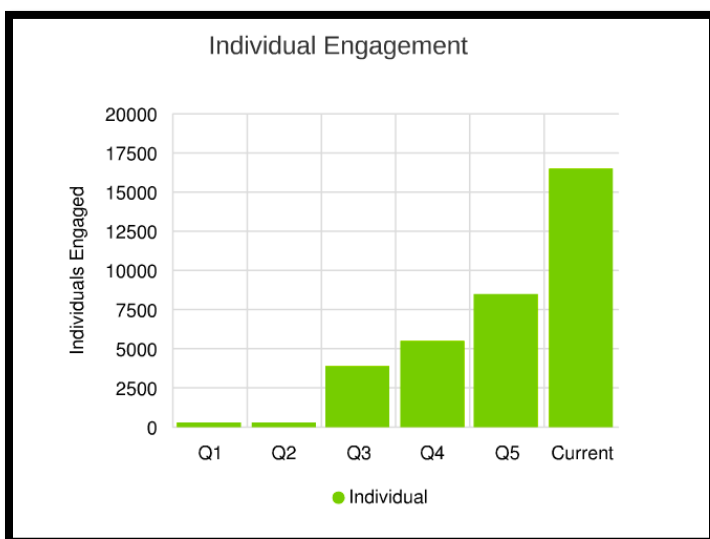
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Individuals

RiseVT engages individuals through the individual scorecard, Cerner online wellness portal, health coaching offered at worksites, social media as well as attendance at community events.

The goal of individual engagement is to increase connectivity and provide education about community resources that are available within the community. In addition, one-on-one health coaching has been

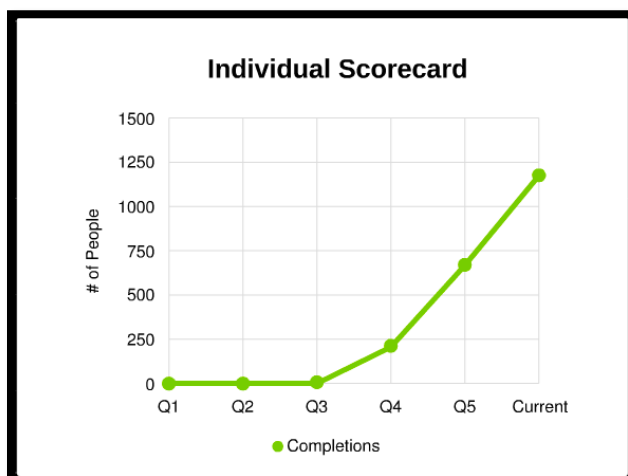
offered to small worksites with less than 50 employees.



The graph to the left shows the current engagement for RiseVT over the past two years. Currently, RiseVT has engaged with over 16,000 individuals. 12,637 people have seen RiseVT at events across Franklin and Grand Isle, 2,214 people have taken the RiseVT Pledge or taken the Health Assessment, 1,175 people have completed the RiseVT Individual

Scorecard and know their score, 337 people are using the RiseVT Wellness Dashboard (Cerner), and 257 individuals have participated in health coaching. A community engagement goal was not identified in the original grant, however, this graph positively shows how our engagement has thrived, sustained and increased during our campaign.

One of our biggest challenges for individuals was having them complete the individual scorecard. When we first launched the RiseVT Scorecard Challenge, participants had to download a scorecard and complete it over a three-month period. During this time, individuals would be challenging themselves and their families to add wellness activities into their daily life. Once they completed the three-month challenge they would be entered to win prizes and recognition. Unfortunately, during the first three quarters, we saw zero returns. We took feedback from participants, which included “it’s too time consuming,” or “I wish it was faster.” From there we launched and developed the individual online scorecard in Quarter 4. This scorecard guides them through simple questions about their health that



will give them their RiseVT score (based on a total of 100 points) instantly once completed. After their completion, they will have the opportunity to engage in one-on-one health coaching or referral to local community resources such as tobacco cessation, diabetes education, primary care, or additional opportunities to improve their personal score.

The graph above shows the increase in participation from the scorecard challenge. From this technique, over 1000 individuals have taken the challenge and we have referred 149 individuals to health coaching, 23 to primary care for a primary care provider, 14 to tobacco cessation and 20 to dental providers.

Health coaching at worksites is effective and meaningful for our participants. Currently, health coaching is offered free on-site at 8 different locations to 175 people. The success of this initiative can be seen the results of health coaching at one site, Swanton village, population 2,386.

The RiseVT Health Coach began working with Swanton Village employees in May 2015. By May 2016, 24 employees or 66% of village employee population participated in health coaching. During the initial screening, 38% of these 24 individuals were identified as pre-hypertensive which put them at moderate risk for developing cardiovascular disease. By the end of the year, only 8% of these 24 individuals screened were pre-hypertensive which means that 30% of employees taking part in health coaching reduced their cardiovascular disease risk to low risk. In addition, over 108 total pounds were lost, the overall population reduced their cholesterol by 4 points, 1 Individual quit smoking, 21% started using the gym and 16% decreased or stopped medication. It can be suggested through this project, that health coaching at small non-profit businesses positively impacts the health of employees. As of this writing, Swanton village employees have continued to engage in wellness activities including a worksite community garden.

Engagement has been a key component for individuals and RiseVT is constantly looking at our engagement and how we can create innovative and fun ways for our community to become involved in RiseVT. An example of this innovation has been our RiseVT Smoothie Bikes. They have become a staple at our events. Our stationary bikes include blenders on them and participants can spin on the bike and make a delicious healthy smoothie at the same time. We often source local ingredients to increase awareness of local food availability for participants. We have utilized the smoothie bikes at schools, events, businesses and the bikes have achieved a notoriety of their own.

An equally important piece of individual engagement has been Rise VT's social media presence on several social media sites including Facebook, Pinterest, Twitter, YouTube and Instagram. Social media is an incredibly huge part of a community campaign. According to the Center of Disease Control and Prevention, social media can, "Increase the timely dissemination and potential impact of health and safety information, leverage audience networks to facilitate information sharing, expand reach to

include broader, more diverse audiences, personalize and reinforce health messages that can be more easily tailored or targeted to particular audiences, facilitate interactive communication, connection and public engagement and empower people to make safer and healthier decisions.” Integrating social media into health communication campaigns and activities allows health communicators to leverage social dynamics and networks to encourage participation, conversation and community – all of which can help spread key messages and influence health decision making” (www.cdc.gov) RiseVT has been most successful on Facebook while continuing to be active on other social media platforms. Currently, over 9,573 individuals “like” RiseVT on Facebook and the weekly reach runs between 15,000- 20,000 people. It is a positive way to engage with our population and we have seen a “virtual” wellness community growing organically from these efforts. Users post recipes, questions and activities that they are utilizing in their lives and communicating back and forth to each other. It has increased brand recognition and positively impacted the overall success of RiseVT.

In the summer of 2015, RiseVT launched a series of “RiseVT Show Up Events” in the center of our largest municipality, Saint Albans. The event was publicized solely through social media. During the free RiseVT Show Up Events, participants engage in physical activity with a local fitness champion in a public park. Because of the popularity of these events, by the summer of 2016, weekly Show Up Events were offered in 4 different municipalities and averaged 15-20 participants at each event.

This simple, low cost strategy increased the visibility of physical activity in a community. The public visibility of the events increased interest and participation by businesses and others.

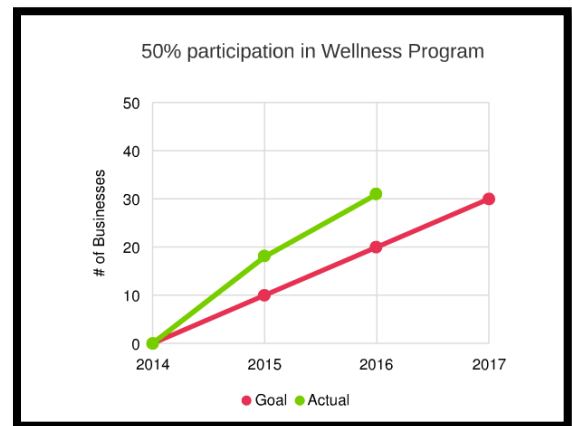
The St. Albans Messenger newspaper is a strong partner for RiseVT. The Messenger devotes two-pages every week to RiseVT that includes recipes, outdoor recreation, success stories and more. This collaboration strengthened the RiseVT brand and helped connect to populations that may not be on social media.

We are aware that, over the past 18 months, RiseVT is reaching early adopters or innovators. To expand reach and address this issue, RiseVT table talks were launched in the spring of 2016. This innovative approach seeks to engage with vulnerable populations by developing relationships and rapport with vulnerable populations. RiseVT partners with local community organizations such as the food shelf, soup kitchen, homeless shelter, Agency of Human Services, Abenaki Tribal Council and others. Each month, RiseVT staff rotate among these organization and engage the clientele by providing linkages to needed services as well as offering blood pressure checks. Being a consistent presence RiseVT staff have been able to address and refer clients to a host of community resources such as tobacco cessation, housing, primary care, domestic violence support and more.

Individual engagement is a vital component of RiseVT and maintaining a level of engagement, enthusiasm and motivation throughout a campaign is challenging. Thus, innovative and unique approaches must be trialed to continue the success of RiseVT while addressing community needs.

Businesses

During our initial funding, RiseVT projected that by the end of 2017, we would be working with 30 local businesses. Our goal was to increase their wellness offerings, support the development of policies and practices that support a healthy work environment and increase their worksite wellness participation to 50% in their employee population. Currently, RiseVT is working with 46 local businesses. The graph on the right shows the number of employers with over 50% employee participation in a wellness program. Our goal was to have 30 businesses by 2017 reach this goal. RiseVT met the goal in middle of 2016 and currently have 32 businesses that have wellness programs where over 50% of their employees are participating.



RiseVT utilizes the RiseVT Business Scorecard to interactively engage, inspire and motivate employers to adopt healthy behaviors and practices within their organization. A great example of a business who has utilized the scorecard to increase their wellness offerings is the Franklin County Home Health Agency (FCHHA). During their year collaborating with RiseVT they rose from bronze status to gold and adopted many health policies and practices that are listed below.

- Established a worksite wellness committee was established made up of staff members from both the Enosburg and St. Albans locations. This committee worked to spearhead the changes that followed within FCHHA.
- Increased utilization of resources available to them through Blue Cross Blue Shield's Accountable Blue program.
- They became a Tobacco Free business and have ordered signs from the Department of Health to display outside their building.
- Achieved Breastfeeding Friendly Employer status with the support of the Vermont Department of Health St. Albans District Office.
- Conducted a health assessment of their employees to better identify appropriate wellness programming.
- Offered \$100 employee wellness benefit towards the purchase of personal wellness gear and activities.
- Staff educational opportunities are available, such as, planning advance directives, Lyme disease, Alzheimer's disease awareness and empathic communication.
- Adopted an agreement for discounted gym memberships with local sports facilities Duke's and Collins-Perley Sports Complex.
- Built a raised bed "salad garden" at the worksite.

- Replaced unhealthy food with healthy food for internal meetings.
- Organized a one-week health goal challenge to allow employees to focus on one aspect of their health that they would like to improve.
- Collaborated with Restorative Justice to conduct a conflict resolution workshop.

These changes are not unique to just Franklin County Home Health. RiseVT has supported adoption of over 40 policies in local businesses including smoke free, breastfeeding friendly and healthy eating practices at meetings and celebrations.

A unique challenge while working with Franklin and Grand Isle businesses involved their small size where they may only have one or two employees. This is extremely challenging for the small business when trying to create wellness challenges and policy changes. In the summer of 2016, RiseVT responded to this gap by creating the RiseVT Small Business Umbrella. The Small Business Umbrella caters to businesses with less than 15 employees and offering a networking opportunity for small businesses to increase wellness collaboratively. The Small Business Umbrella holds 4 meetings per year and provides webinars on health and wellness in the workplace. In addition, these businesses have access to free health coaching and biometric screenings, support to organize health challenges, participation in a Worksite Wellness Program, and public recognition for their efforts. Four local business are actively involved in the small business umbrella and a goal of 2017 will be to increase this participation.

As RiseVT continues to grow, capacity is always challenging, with our businesses. A business collaboration is a timely task but reaps many results. Finding the correct capacity and workload for the RiseVT team will be needed during the next year to maintain sustainability and interest in RiseVT Business Collaboration.

Schools

Schools have been a key collaborator with RiseVT. Currently, RiseVT is working with 15 schools that include primary and secondary education. RiseVT utilizes the RiseVT School Scorecards to engage with schools and help them adopt and develop a healthier school environment.

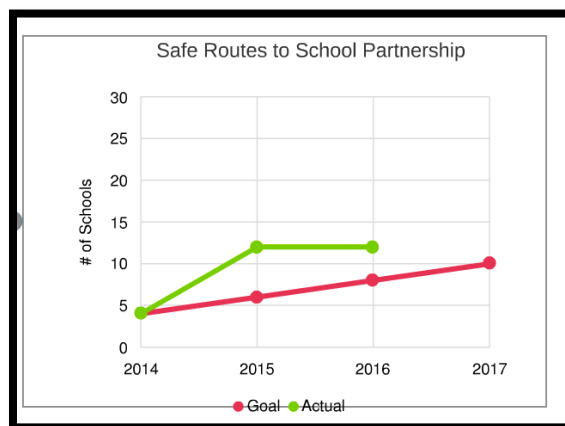
During year one, the RiseVT approach utilized one scorecard that aimed to encompass all schools. After one year, we quickly learned that the needs of a primary school environment were completely different than a secondary learning environment. In year two, the RiseVT team developed two different scorecards for the different age groups.

RiseVT

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RiseVT also learned quickly that not only did the overall school want to develop healthy policies and practices. Classrooms were also motivated to make changes in their classrooms. In the winter of 2015, RiseVT created the Classroom scorecard, which challenged classrooms to develop their own policies in their class such as not withholding physical activity or recess as a punishment. Over 20 classrooms participated in this scorecard during the first year. The feedback we received after the first year, set us up to revamp our second year. Teachers and students wanted different activities, and different ideas so RiseVT responded. During the summer of 2016, the RiseVT team created a classroom scorecard challenge for grades K-8. Each grade level now has their own scorecard tailored to their learning abilities and comprehension. It challenges them to participate in daily brain breaks, physical activity and more. In addition, every week, teachers receive a newsletter from RiseVT, which includes ideas, and strategies from the CDC School Health to increase wellness. Since this launch in the fall, over 60 classes are participating and rising towards better health.

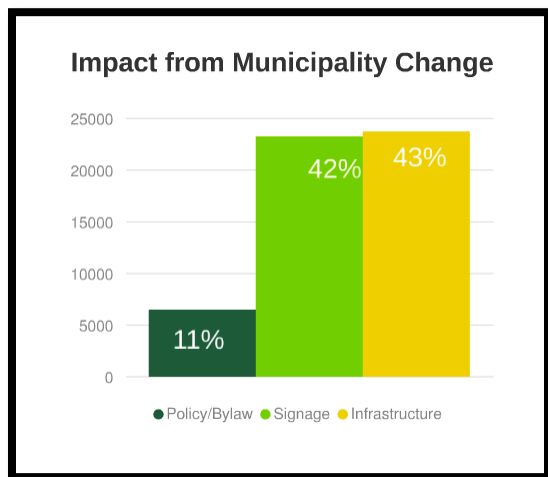
A major goal of RiseVT as noted above was to increase our local school participation in Safe Routes to School. Safe Routes to School is a best practice approach that engages schools to increase the number of students and staff walking or biking to school. The graph on the right shows that our goal was to increase our local participation to 10 schools regionally and RiseVT increased participation to 12 as of 2015. During the past two years, the statewide Safe Routes to School program lost funding due to federal cuts, which resulted in the loss of the statewide coordinator. This had a huge effect on our local region while the state organization came up with their sustainability plan. Currently, there are regional Safe Routes to School champions that RiseVT is working with to hopefully increase our number of schools that are adopting strategies to increasing walking and biking to school.



In addition to increasing walking and biking to school, RiseVT also wanted to provide education to students on safety and rules of the road. In 2015-2016, RiseVT partnered with Local Motion to provide onsite training and a bike trailer to students at 10 schools across Franklin and Grand Isle. This training reached 2000 children and they received a combined 7,300 hours of BikeSmart Curriculum.

Municipalities

RiseVT is currently working with 9 municipalities. Like our other components, RiseVT utilizes the RiseVT Municipality scorecard to engage with our local towns and cities. This innovative approach includes best practice and evidence based strategies to improve community wellness.



During our collaborations with municipalities, our focus has been on policy and infrastructure development. In Franklin and Grand Isle there are approximately 55,000 people. The graph on the left shows the percent of individuals impacted from our policy and infrastructure changes at the local level. These policies include breastfeeding friendly parks and paths, recreation committee creation, removal of unhealthy snacks at community pool, path signage and smoke free locations.

In addition, providing and supporting physical activity and healthy eating infrastructure has been a big piece of our municipality collaboration. The list below indicates all the projects that were completed through RiseVT with support and funding.

- Imagination Playground – an interactive playground that is portable for all ages available in Saint Albans City
- Ballroom Dancing was supported to bring together the older population in Franklin County.
- Library Family Pool Passes are available at Georgia, Saint Albans, Fairfield and Swanton for check out.
- Saint Albans City Twilight Games which offers free drop in play for students in the evening during the summer.
- Walking bridge creation in Montgomery Vermont that connects local recreational facilities and school.
- 40 Bike racks dispersed throughout the community at schools, parks and recreational facilities.
- Outdoor play kitchen for toddler age children to encourage play with healthy food and imagination.
- Highgate Library put in a composter for their raised bed that is open to the community encourage healthy gardening.
- Raised beds were created at our local Abenaki Tribal Council to increase healthy eating in the tribe.
- Taste Tests throughout the region (current served 1000 individuals to try fresh, local produce.)
- Signage throughout the town at recreation paths and recreation facilities in Highgate, Swanton, Saint Albans Town, Saint Albans City and South Hero.
- Water Fountain at Highgate arena, which serves their sports teams and recreational path. As of March 2016, 10,000 bottles of water were saved.
- Snowshoes are available for check out across all libraries in Franklin and Grand Isle
- Swanton Enhancement Project Collaboration with NOTCH to offer Summer Camp. RiseVT has helped fund this two-week camp FREE camp for children in Swanton during the Summer of 2016

- Blenders for Saint Albans City Pool to replace soda for a fresh healthy snack during the day.
- Outdoor Elliptical Machine and Exercise Bike to added to Houghton Park in Saint Albans
- Richford Day Camp- Catch Equipment added for the group of 100+ kids who meet daily in Richford over the summer
- Breastfeeding friendly stations with changing tables were created at the following locations with the help of the Vermont Department of Health - Swanton Library, Georgia Library, Swanton Recreation
- Outdoor winter ice rink added behind local senior center and is being utilized by all the community.
- Toddler Playground added in Alburgh where there currently are playgroups and active story times.
- Town of Saint Albans- Trail Plan by Sinocity which provided a trail cleanup day, and a long-term vision currently being championed by a group of advocates in Saint Albans City.
- Mark Fenton came and provided a walkability study for 5 municipalities which now all have 5 active sidewalk and infrastructure committees.
- Swanton Recreation is adding a skate park and kayaks for check out.
- Richford collaboration between NOTCH, Town of Richford and RiseVT.
- Outdoor musical instruments at Taylor Park in Saint Albans.
-

Working within municipalities is an important component of RiseVT. By creating a community where walking, biking, and healthier options are accessible, we are creating a community where the healthiest choice is the easiest choice.

Project Sustainability

Sustained investment in primary prevention represents one of the strategic keys to improving population health and bending the cost curve of healthcare expenses long-term. The Prevention Institute says, “For every dollar we spend on prevention, we see a five-to-one return on investment in just five years. We simply can't fix our economy without it.” That is a powerful research-based finding and perspective which represents a significant opportunity for Vermont.

RiseVT was initially funded in Franklin & Grand Isle Counties by this grant which was matched \$1 for \$1 by Northwestern Medical Center through the hospital's operating budget. Each source contributed \$200,000 per year for the first two years. In the second year of RiseVT, the hospital increased its contribution to \$300,000 through a budget reconsideration with the Green Mountain Care Board. In the third year of RiseVT, the grant has ended and the hospital is now carrying nearly all the approximately \$500,000 expense in its operating budget, with some small operational grants assisting. This is a financial challenge for the hospital, as there are internal and regulatory pressures to continue to reduce expenses within hospital budgets to help make healthcare more accessible for patients. Even with those pressures, the NMC Board and Leadership remains committed to investing in prevention for the long-term health of the community, as that is true healthcare reform in action.

Currently, RiseVT is pursuing transformational funding through the State's All Payer Model with the evolving approach to accountable care organizations in the state. This would provide temporary funding to establish RiseVT infrastructure at the state level and begin to roll out RiseVT initiatives in communities around the state in a planned manner. We expect to submit that application in January of 2017. The remainders of the local expenses for that roll out (including the existing expenses of FGI RiseVT) would be born through hospital operating budgets or other sources to be determined.

Moving forward, a multi-faceted approach to funding primary prevention will be needed to achieve sustainability. Diversifying funding will enhance sustainability, as it better ensures continuity of effort should one source temporarily waiver or permanently close. We envision a mixture of funding sources including:

- the Accountable Care Organization(s);
- hospital operating budgets;
- insurance companies, such as Blue Cross/Blue Shield;
- public/private partnerships providing new or re-directed funding or in kind contributions, from partners such as the Vermont Department of Health, major employers, municipalities, etc; and
- grants and philanthropic support to advance population health.

Conclusion

RiseVT began as a hope that became an idea and quickly evolved beyond being a program and became a movement. It is flourishing in our local community with individuals, families, businesses, schools, and municipalities actively embracing healthier lifestyles. The emphasis on positive energy and encouragement (avoiding negative messaging, shaming, or scolding) has helped many be open to participating. The emphasis on amplifying existing resources has avoided duplication and turf battles. The emphasis on collaboration has drawn in many partners. All of this combines to enable a movement to emerge. Our progress on our short-term indicators, which evidence shows align with long-term culture change and health improvement is encouraging and has drawn significant interest from key leaders around Vermont. As we work to continue to expand RiseVT's impact within Franklin and Grand Isle Counties, there is a formal Statewide Stakeholders group actively working to create and launch a sustainable roll out of RiseVT across Vermont. As the nation and Vermont progress through healthcare reform and the system shifts from fee-for-service medicine to a population health approach, the strategic business need for primary prevention to help reduce demand for costly medical treatment will be even clearer. Primary prevention is the path to healthier lifestyles, improved quality of life, and lower healthcare costs long term. RiseVT is an evidenced-based approach using best practices from The Community Guide, the CDC, and EPODE that offers a path forward toward a healthier future for all through primary prevention. The time to rise is now.

Appendix A:

The RiseVT Scorecards in an Embedded PDF:



Rise-Business-Scorecard-v1.1.pdf



Rise-Childcare-Scorecard-v1.0.pdf



Rise-Municipality-Scorecard.pdf



Rise-School-Scorecard-Grade-7-12.pdf



Rise-School-Scorecard-Grade-K-6.pdf



Rise-Small-Business-Scorecard.pdf



RiseVT Individual Scorecard - RiseVT.pdf

Appendix B:

UVM Center for Rural Studies Evaluation as an embedded file:



RiseVT 10-21 UVM
Rurual Studies.docx



Business Name: _____

Contact Name: _____

Phone Number: _____

Business Address: _____

Number of Employees: _____

BRONZE

Employer must complete all 5 Core Activities and 2 optional activities to qualify for Bronze Certified Organization

Core Requirements:

Promotion of Tobacco Free Education (*Included, but not limited to 802 Quits, handouts readily available, Human Resource referrals to local and statewide tobacco cessation opportunities*)

Bronze Level Breastfeeding Friendly Employer

Daily encouragement of physical activity or walking (*This may include stair point-of-decision prompts for increasing stair use where elevators exist, allowing employees to utilize scheduled breaks for physical activity, timer built into worksite email prompting movement*)

Celebrations, events and meeting include at least one healthy option.

- Please see Vermont Department of Health Healthy Eating Guidelines for Worksites

-
- RiseVT Pledge form is posted in worksite and employer encourages employees to sign pledge.
 - Employer to work with RiseVT to identify strategies to encourage and motivate employees to sign the pledge
 - *“I pledge to become a Rise Vermonter and learn about simple lifestyle changes I can make that I know will give me lasting benefits to my health and well-being.”*
-

Optional Activities:

- Food/beverage is not used as reward
(Employer pledges to use alternatives to rewards such as Wellness Day, massages, etc.)
-

- Personal Stress Management is embedded within the organization.
(This could include but is not limited to mindfulness, daily stretching, and yoga.)
-

- Drinking water is readily available onsite
-

- Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____
-

SILVER

Employer must complete all 5 Core Activities and 2 optional activities to qualify for Silver Certified Organization (in addition to bronze requirements)

Core Requirements:

- 50% of employees have signed the RiseVT Pledge and taken Individual Scorecard Challenge

Employer participates in at least 1 community engagement activity per year.
This could include but is not limited to mentoring, volunteering, donations or food drives.
What have they done _____

Incentives are offered to encourage and motivate employees to embrace a healthy lifestyle. This could include, but is not limited to, financial benefit, space with videos and/or equipment on site, discount gym memberships.

Established Worksite Wellness Committee that is named and meets at least quarterly.

Identified area in the worksite for breaks, which includes a microwave and refrigerator.

Optional Activities:

Counseling services and EAP services are offered at the worksite.
(This could include offering conflict resolution at the worksite.)

Promotion of special events and incentives to motivate employees to participate in worksite wellness activities *(Examples: Contests, health challenges, team based competitions, publicity of success stories)*

Providing education and awareness to employees around one of these activities:

- Identifying a local food champion on staff who would promote the use of Vermont's Harvest of the Month Program
- Establish/revise a food policy to include healthy local food at all business events
- Creation of a procedure for donating food to local food shelf or charitable organization after business events that provide food
- CSA information is posted and dispersed

-
- Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____

GOLD

Employer must complete all 5 Core Activities and 3 optional activities to qualify for a Gold Certified Organization (in addition to bronze and silver requirements)

Core Requirements:

- At least one of the following wellness opportunities are offered at the worksite: biometric screenings, immunization clinics, or health coaching.
-
- Worksite is tobacco free with appropriate signage and website advertisement if applicable.
-
- 50% of employees are participating in worksite wellness program *(This may be a cumulative number that includes all wellness activities including but not limited to: Immunization clinic, health coaching, biometric screenings, incentive programs)*
-
- Organization wellness committee has a vision, mission and plan to develop and expand worksite wellness.
-
- Wellness activities are building into in-service meetings, retreats and/or staff meetings. *(This could include but is not limited to – Brain breaks, staff led stretching exercise, walk and talk meetings, standing meetings)*

Optional Activities:

Connection with Vermont Department of Health Lactation Consultant to improve support to breastfeeding women in the workplace

Refillable water stations have been installed

Fitness Room onsite

Joint Use Agreement between organization in community to open facilities for physical activity outside the business hours (*Example: Open gym, fitness classes, weight rooms*)

Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____

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V1.1



Childcare Provider Name: _____

Phone Number: _____

Address: _____

Number of Kids: _____

Number of Faculty/Staff Members: _____

We have developed a checklist for childcare provider to work on to reach three different levels of participation, Bronze, Silver and Gold.

BRONZE

Childcare must complete all 6 Core Activities and 3 optional activities to qualify for Bronze Certified Organization

CORE REQUIREMENTS:

Childcare facility values high quality and healthy nutrition and follows all of the following guidelines.

- Childcare follow the 100% juice guidelines which indicates:
 - Children 6 months or younger never receive 100% juice
 - Children 1-6 years old receive only 4-6 ounces of 100% fruit juice per day
 - Children 7-18 only receive 8-12 ounces of 100% fruit juice per day
- Adults sit with children at all mealtimes to encourage mealtimes that are calm, non-stressful and are able to assist with healthy portion sizes
- Only milk, water and 100% juices are offered at the childcare and drinking water is available upon request

Breastfeeding is supported in the childcare by including:

- A comfortable space is made available for nursing mothers other than a bathroom
- Bronze Level Breastfeeding Friendly Employer (*if staff are employed at childcare*)
- Staff have initial and ongoing conversations with parents about how to support breastfeeding for families.
- Formula is stored out of sight in all areas of the childcare center

-
- Daily Encouragement of Physical Activity or walking is promoted through the following but is not limited to:
- Dancing to age appropriate music at least 1 time per week to encourage fun, safe, physical activity for all
 - Supervised Tummy Time is offered several times per day for infants
 - Active play is never withheld as a punishment
 - How you encourage active play? _____
-

- Children over the age of 2 are allowed 2.5 hours or less screen time/week and children under the age of 2 are not exposed to screen time during childcare hours.
-

- Childcare is meeting the requirements of USDA for childcare centers and has achieved 1-2 stars in the VT State STARS program.
-

- Smoke-free Signage at childcare center is visible and posted
-

OPTIONAL ACTIVITIES: *(complete 3/5)*

- Healthy Taste Testing is offered at least once per month to encourage children to try new food
-

- Celebrations offer healthy options
-

- Tooth brushing is made available to all children and staff
-

- Community resources and classes are provided to parents by a newsletter or bulletin board
-

- Did we miss something or is your childcare doing something else that is healthy and fun?
Tell us more : _____
-

SILVER

Childcare must complete all 5 Core Activities and 3 optional activities to qualify for Silver Certified Organization (in addition to bronze requirements)

CORE REQUIREMENTS:

Childcare facility values high quality and healthy nutrition and follows all of the following guidelines:

- Childcare follows the 100% juice guidelines which indicates and is only offered at mealtimes:
 - Children 6 months or younger never receive 100% juice
 - Children 1-6 years old receive only 4-6 ounces of 100% fruit juice per day
 - Children 7-18 only receive 8-12 ounces of 100% fruit juice per day
 - Childcare participates in CSA or promotes garden sharing and uses fresh produce for taste tests, snacks and lunches.
 - Only milk, water and 100% juices are offered at the childcare and drinking water is available inside for self-serve
 - All meals to preschoolers are served family-style to encourage self-serve if facility serves meals
-

Breastfeeding is supported in the childcare by including:

- Comfortable space is made available for nursing mothers other than a bathroom which includes a comfortable seat such as a rocking chair.
 - Staff have received appropriate training on how to bottle feed a breastfed baby
 - Staff have written literature available on how to bottle feed a breastfed baby and has implemented it into practice
-

Daily Encouragement of Physical Activity or walking is promoted through the following but is not limited to:

- Dancing to age appropriate music at least 3 times per week to encourage fun, safe, physical activity for all
- Childcare facility takes walk with kids at least 1 time per week around the neighborhood, at a path, at a park, etc.
- How do you encourage active play? _____

Children over the age of 2 are allowed 1.5 hours or less screen time/week and children under the age of 2 are not exposed to screen time during childcare hours.

Childcare has achieved 3-4 stars in the VT State STARS program.

OPTIONAL ACTIVITIES: (complete 3/5)

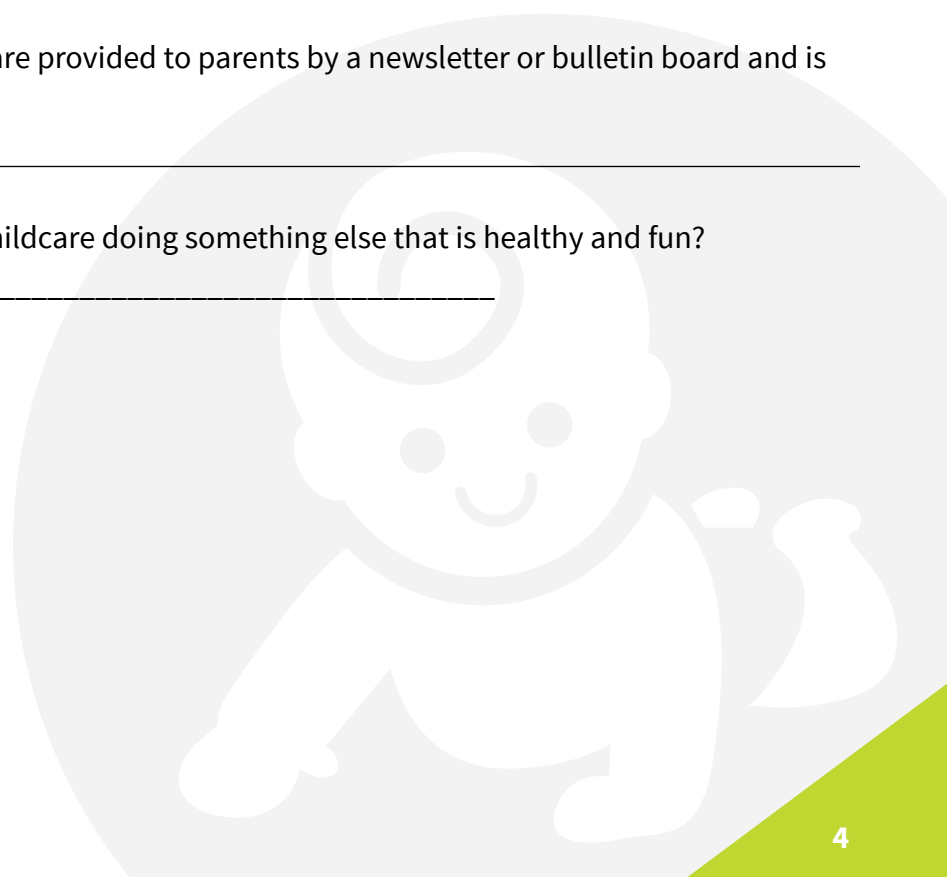
Healthy Taste Testing is offered at least 3 times per month to encourage children to try new food

Tooth brushing is made available to all children and staff and is supported and engaged after meals

50% of parents have signed the RiseVT pledge

Community resources and classes are provided to parents by a newsletter or bulletin board and is updated at least monthly

Did we miss something or is your childcare doing something else that is healthy and fun?
Tell us more : _____



GOLD

Childcare must complete all 5 Core Activities and 3 optional activities to qualify for a Gold Certified Organization (in addition to bronze and silver requirements)

CORE REQUIREMENTS:

- Childcare facility values high quality and healthy nutrition and follows all of the following guidelines and activities.
 - Childcare has a garden-onsite to encourage healthy eating and education of healthy food. Garden produce is used in childcare for taste testing, lunches, snacks, etc.
 - Drinking water is available inside and outside for self-serve
 - Whole fruit is served in place of 100% fruit juice at mealtimes
 - Menus are provided and posted for families on a weekly, daily, or monthly basis, if applicable.

- Breastfeeding is supported in the childcare by including:
 - Comfortable space in a private room is made available for nursing mothers other than a bathroom that includes a comfortable seat such as a rocking chair as needed.

- Encouragement of Physical Activity or walking is promoted through the following but is not limited to:
 - Dancing to age appropriate music every day of the week to encourage fun, safe, physical activity for all
 - Family fun days are offered at trails, parks or bike paths at least once per year
 - How do you encourage active play? _____

- Screens are not available in childcare setting and children of all ages are not exposed to screens during childcare day

- Childcare has achieved 5 stars in the VT State STARS program.

OPTIONAL ACTIVITIES: *(Complete 3/5)*

Healthy Taste Testing is offered at least 4 times per month to encourage children to try new food

RiseVT Individual Scorecards are handed out and encouraged with a return rate of at least 50%

Tooth brushing and flossing is supported and engaged after meals

Onsite parent trainings are offered to parents at childcare such as car seat safety.

Did we miss something or is your childcare doing something else that is healthy and fun?
Tell us more : _____

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Municipality Name: _____

Contact Name: _____

Phone Number: _____

Address: _____

Number of Residents: _____

To Achieve Bronze Status: Must have 6/7 Bronze level activities

To Achieve Silver Status: Must have 6/7 Bronze Level activities, and 9/11 Silver activities

To Achieve Gold Status: Must have 6/7 Bronze Level activities, 9/11 Silver activities and 6/7 Gold Activities

BRONZE

Media reports promote physical activity resources and events and provide participation incentives.

Access to safe sidewalks and trails.

Fresh drinking water is easily accessible.

Increase support for nursing mothers.

Limit advertisements of less healthy foods and beverages in your jurisdiction.

Access to safe sidewalks and trails.

Mentoring Programs.

SILVER

Smoke Free gathering places or events with adequate signage.

Strategies to enhance infrastructure to support walking and biking.
(Examples: sidewalks, benches, shade, bike lanes, road signs)

Hold Health Fairs and “Know your Numbers” campaigns.

Calendar of Recreational activities.

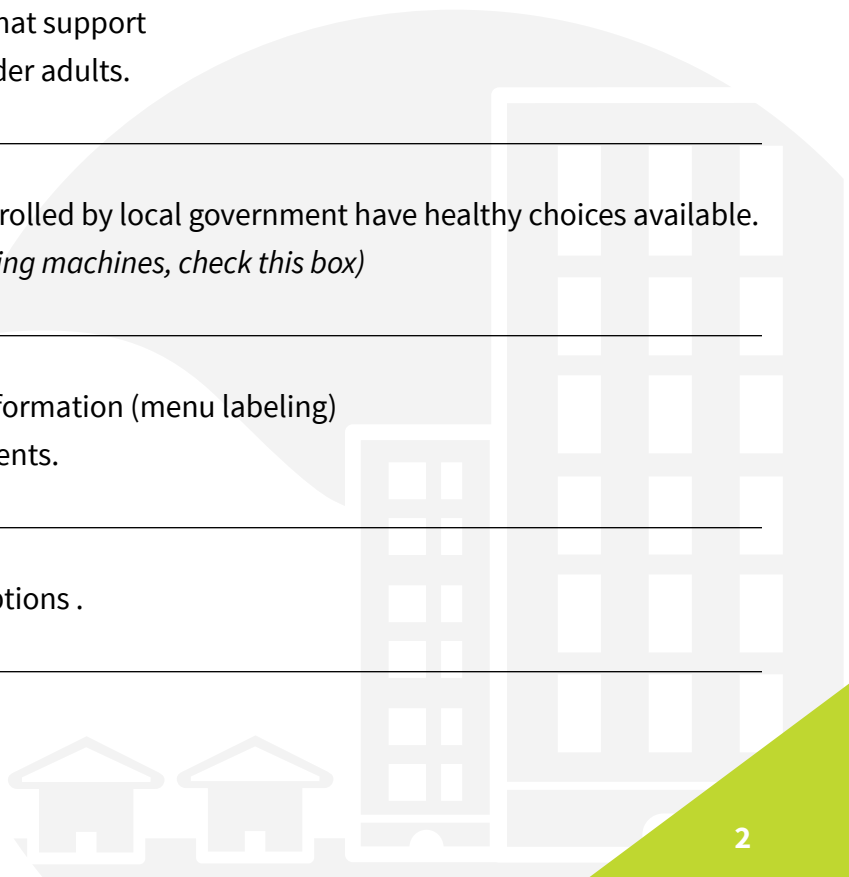
Recreation Department that holds classes that support the wellness of the community including older adults.

Vending Machines in locations that are controlled by local government have healthy choices available.
(If only healthy choices are there are no vending machines, check this box)

Promotion of point of purchase nutrition information (menu labeling) in local restaurants and or retail establishments.

Major events have access to healthy food options .

Active Farmers Market.



Vending machines that are in locations controlled by local government only offer healthy choices.
(If there are no vending machines, check this box)

Community Gardens that are open to the public to grow .

GOLD

Bi-laws in place for limiting the advertisements of tobacco and less health food and beverages within your jurisdiction. *(Especially near schools)*

No Vending machines in locations controlled by local government.

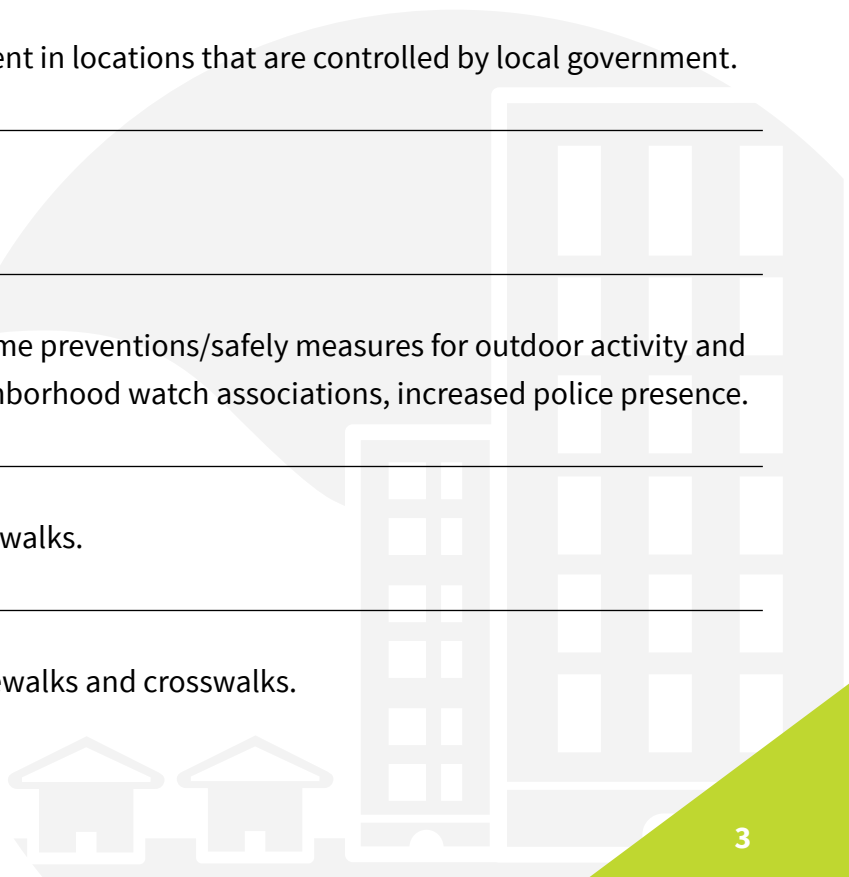
Create and enforce tobacco free environment in locations that are controlled by local government.

Implements Wellness into Municipal plan.

Strategies for creating and maintaining crime preventions/safely measures for outdoor activity and recreation such as adequate lighting, neighborhood watch associations, increased police presence.

Network of bike lanes, sidewalks and crosswalks.

Maintenance guidelines for bike lanes, sidewalks and crosswalks.



Did we miss something, or is your municipality doing something else that is healthy and fun?

That's Great! Tell us more here:

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School Name: _____

Contact Name: _____

Phone Number: _____

School Address: _____

Number of Students: _____

Number of Faculty/Staff Members: _____

BRONZE

Required Activities

Bronze level breast feeding friendly employer

25% of students have completed the RiseVT Individual Scorecard

Health Education is provided to all students

15% of staff participate in PATH/VEHI

RiseVT does at least one Table Talk/semester of School Choice:

- RiseVT Smoothie Bikes
- Tobacco Cessation
- Diabetes Education
- Farm to School

Optional Activities (2/4)

- Drinking water is easily accessible by water fountain, refillable water station and water is promoted as the drink of choice throughout the school.

 - Before and after school fitness opportunities that are easily accessible to all students. This could include but is not limited to intramural sports, Girls on the Run, open gym, and/or pick-up sports.

 - Personal Stress management is embedded within the school which could include but is not limited to daily mindfulness, daily stretching and yoga.

 - Did we miss something or is your school doing something else that is healthy and fun?
Tell us more : _____
-

Completed all your Bronze Level School Activities?

Keep Rising and go for Silver!

SILVER

Required Activities

- Launch a RiseVT Challenge of your choice with at least 25% of students and staff populations participating.
 - Walking Challenge
 - Fruit and Veggie Challenge
 - Water Consumption

30% of staff is participating in PATH/VEHI

50% of students have completed the RiseVT Individual Scorecard

Promotion of tobacco free education to staff and students (included but not limited to 802 Quits, handouts readily available, school counseling and support services referrals to local and state wide tobacco cessation opportunities.

Established school wellness committee that meets at least quarterly and is named.

Optional Activities

Vending machines, concession stands and/or ala carte offer healthy options

Fundraising only includes healthy food options or non-related food/beverage items.

School community participates in at least 1 community engagement activity/year above and beyond student requirement for community service.

What did you do: _____

Did we miss something or is your school doing something else that is healthy and fun?

Tell us more : _____

Completed all your Silver Level School Activities?

Submit your Scorecard to RiseVT to receive your \$500 Wellness Reward!

GOLD

Required Activities

RiseVT Challenge of your choice completed with 50% participation of students and staff.

50% of staff participate in PATH/VEHI

Wellness committee has a vision, mission and plan to develop and expand school wellness and at least 25% of members are current students.

Farm to School is active within school and may include but is not limited to:

- Garden on Site
 - Purchasing from local farmers/growers
 - Produce from garden utilized in School Lunch Program
 - Harvest of the Month
-

There are no vending machines on site or they ONLY offer healthy options.

Optional Activities

No advertising of unhealthy food and drinks within the schools jurisdiction

Fitness Room Onsite

Wellness committee has completed the Coordinated School Health Index within the last five years

Did we miss something or is your school doing something else that is healthy and fun?
Tell us more : _____

Completed all your Gold Level School Activities?

Submit your Scorecard to RiseVT to receive your \$1,000 Wellness Reward!

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School Name: _____

Contact Name: _____

Phone Number: _____

School Address: _____

Number of Students: _____

Number of Faculty/Staff Members: _____

BRONZE

Required Activities

Bronze level breast feeding friendly employer

A member of SRTS and at least Bronze level Safe Routes to School Partner

25% of classrooms achieve at least bronze certification in RiseVT Classroom Scorecard

Health Education is provided to all students

15% of staff participate in PATH/VEHI

Optional Activities (2/4)

Drinking water is easily accessible by water fountain, refillable water station and water is promoted as the drink of choice throughout the school.

Before and after school fitness opportunities that are easily accessible to all students. This could include but is not limited to intramural sports, Girls on the Run, open gym, and/or pick-up sports.

Daily recess of 20 minutes or more is offered to ALL students K-6.

Did we miss something or is your school doing something else that is healthy and fun?
Tell us more : _____

Completed all your Bronze Level School Activities?

Keep Rising and go for Silver!

SILVER

Required Activities

Achieve Silver Level in the Safe Routes to School Program

50% of classrooms are at least bronze certified in the RiseVT Classroom Scorecard

30% of staff is participating in PATH/VEHI

School lunch program offers a healthy breakfast daily

Established school wellness committee that meets at least quarterly and is named.

Optional Activities

Vending machines, concession stands and/or ala carte offer healthy options

Fundraising only includes healthy food options or non-related food/beverage items.

School community participates in at least 1 community engagement activity/year above and beyond student requirement for community service.
What did you do: _____

Did we miss something or is your school doing something else that is healthy and fun?
Tell us more : _____

Completed all your Silver Level School Activities?
Submit your Scorecard to RiseVT to receive your \$500 Wellness Reward!

GOLD

Required Activities

50% of classrooms are silver certified or above

50% of staff participate in PATH/VEHI

Wellness committee has a vision, mission and plan to develop and expand school wellness and at least 25% of members are current students.

Farm to School is active within school and may include but is not limited to:

- Garden on Site
- Purchasing from local farmers/growers
- Produce from garden utilized in School Lunch Program
- Harvest of the Month

There are no vending machines on site or they ONLY offer healthy options.

Optional Activities

No advertising of unhealthy food and drinks within the schools jurisdiction

Fitness Room Onsite

Wellness committee has completed the Coordinated School Health Index within the last five years

Did we miss something or is your school doing something else that is healthy and fun?
Tell us more : _____

Completed all your Gold Level School Activities?

Submit your Scorecard to RiseVT to receive your \$1,000 Wellness Reward!

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Business Name: _____

Contact Name: _____

Phone Number: _____

Business Address: _____

Number of Employees: _____

BRONZE

Employer must complete all 5 Core Activities and 2 optional activities to qualify for Bronze Certified Organization

Core Requirements:

Promotion of Tobacco Free Education (Included, but not limited to 802 Quits, handouts readily available, Human Resource referrals to local and statewide tobacco cessation opportunities)

Bronze Level Breastfeeding Friendly Employer

Daily encouragement of physical activity or walking (This may include stair point-of-decision prompts for increasing stair use where elevators exist, allowing employees to utilize scheduled breaks for physical activity, timer built into worksite email prompting movement)

Celebrations, events and meeting include at least one healthy food option.
Please see Vermont Department of Health Healthy Eating Guidelines for Worksites

At least one representative identified for the RiseVT Umbrella Committee and commitment to attend at least 50% of the quarterly meetings.

Optional Activities:

- Food/beverage is not used as reward (Employer pledges to use alternatives to rewards such as Wellness Day, massages, etc.)

- Personal Stress Management is embedded within the organization. (This could include but is not limited to mindfulness, daily stretching, and yoga.)

- Drinking water is readily available onsite

- Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____

SILVER

Employer must complete all 5 Core Activities and 2 optional activities to qualify for Silver Certified Organization (in addition to bronze requirements)

Core Requirements:

- Employer participates in at least 1 community engagement activity per year. This could include but is not limited to mentoring, volunteering, donations or food drives. What have they done

- Identified area in the worksite for breaks, which includes a microwave and refrigerator.

- 50% of employees have completed the Individual Scorecard

50% of employees have completed the Employee Interest Survey

A representative from this business has attended at least 50% of the Umbrella Committees quarterly meetings.

Optional Activities:

Counseling services and EAP services are offered at the worksite. (This could include offering conflict resolution at the worksite.)

Promotion of special events and incentives to motivate employees to participate in worksite wellness activities (*Examples: Contests, health challenges, team based competitions, publicity of success stories*)

Providing education and awareness to employees around one of these activities:

- Identifying a local food champion on staff who would promote the use of Vermont's Harvest of the Month Program
 - Establish/revise a food policy to include healthy local food at all business events
 - Creation of a procedure for donating food to local food shelf or charitable organization after business events that provide food
 - CSA information is posted and dispersed
-

Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____

GOLD

Employer must complete all 5 Core Activities and 3 optional activities to qualify for a Gold Certified Organization (in addition to bronze and silver requirements)

Core Requirements:

50% of staff participation in at least one of the following wellness opportunities offered through the Umbrella Wellness Committee or at the worksite, such as but not limited to, biometric screenings, immunization clinics, health coaching, incentive programs, etc.

Worksite is tobacco free with appropriate signage and website advertisement if applicable.

Wellness activities are built into in-service meetings, retreats and/or staff meetings.
(This could include but is not limited to – Brain breaks, staff led stretching exercise, walk and talk meetings, standing meetings)

Participation in at least 50% of the workshops offered through the RiseVT Wellness umbrella organization.

Business has adopted and implemented the RiseVT Wellness Committee's worksite wellness policy.

Optional Activities:

Connection with Vermont Department of Health Lactation Consultant to improve support to breastfeeding women in the workplace

Flexible hours are offered for fitness opportunities to be taken during the day.

50% of staff attended one of the quarterly RiseVT Wellness Committee's workshops.

A workshop topic was fully implemented into the workplace.

Did we miss something or is your business doing something else that is healthy and fun?
Tell us more : _____

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A framework for considering the impact of RiseVT, an
evidence-based initiative to bring about healthy behavior
change



Jane Kolodinsky, Ph.D., Director
Erin Roche, M.S. Research Specialist
Joy Grossman, Graduate Research Assistant

A report provided to the Northwest Medical Center and the Vermont Department of Health, St.
Albans District Office

October, 2016

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Executive Summary

- **Background and RiseVT**

The partnership between the Vermont Department of Health and the Northwestern Medical Center has created the Community Committee for Healthy Lifestyle. This Community committee, which brought together a diverse group of stakeholders, both public and private, further created and executed an innovative initiative, RiseVT. The initiative is a community collaborative effort to lower healthcare costs and embrace healthier lifestyle choices in Franklin and Grand Isle County funded by Northwestern Medical Center and a healthcare reform grant from the State of Vermont. In 2016 NMC completed a Community Health Needs Assessment. The top six priorities were mental health and substance abuse, obesity, smoking, cancer, suicide, domestic and sexual assault. RiseVT has prioritized Obesity and Tobacco.

- **Accomplishments, Challenges, Opportunities**

RiseVT has accomplished its goals in terms of the numbers of schools, employers, municipalities that it has worked with. It has also been successful in amplifying the existing healthy behavior programming in the Franklin and Grand Isle counties that it serves. It has achieved policy change in targeted communities. And it has become a brand associated with healthy behaviors.

The challenges of RiseVT are to build on the awareness that it has created to get the people in these communities interested in making healthy behavior changes, and also to systematically collect evidence of the changes in healthy behavior in these targeted communities.

The biggest opportunities for RiseVT in the coming year are to sustain the energy and efforts that led to such strong community awareness, and build deeper relationships within the organizations, employers and municipalities that it has partnered with.

- **Approach to Evaluation**

The logic model provides a visual representation of the outputs, outcomes and impacts that should be considered in evaluating RiseVT. Continuing to track attendance, participants, and outreach efforts will provide the backbone of evaluation efforts and answer the questions what did we do and how well did we do it.

But the bigger question is if anyone is better off requires more than just counts of activities and participants. One way to address this question is to compare completed score cards over time. Another way is to use the outputs described above to estimate RiseVT

“dosage,” i.e., how many times RiseVT engages with individuals, employers and organizations in its targeted communities.

- **Baseline and Recommendations**

With obesity rates remaining steady and tobacco use just slightly declining, communities in Franklin and Grand Isle counties are ready for an innovative approach to healthy behavior change.

RiseVT has built broad awareness of itself as a healthy behavior brand. In order to achieve healthy behavior change throughout the community, RiseVT must enlist its early adopters to tell their stories, to model their behavior change, to support others in their community. Further, it should continue to engage these early adopters so that they move beyond just aware, but become truly interested in adopting healthy behavior. At the same time, RiseVT should target subgroups in the population that may be most ready to become aware of RiseVT and interested in healthy behavior adoption. These targets could include people who have recently been diagnosed with a related chronic disease, or people who have recently made some effort at a healthy behavior change, such as diet, exercise regimen or tobacco cessation.

Background

Public private partnerships offer a strategic way to address community health (Borys et al., 2012; Kraak and Story, 2010). Further, there is evidence to suggest that a coordinated partnership is needed to effect environmental change to promote healthy behaviors (Huang & Yaroch 2009). Most often public-private partnerships are made up of a government agency and a for profit corporation, but a partnership between public and private entities which seek the same goal (healthy behavior) can provide a foundation for future, more traditional partnerships.

In this case the long time partnership between the Vermont Department of Health (VDH) and the Northwestern Medical Center (NMC) has fostered the trust to create the Community Committee for Healthy Lifestyle, which has brought together a more diverse group of stakeholders, both public and private. This Committee developed the innovative initiative to support healthy behavior change in Franklin and Grand Isle County. Health care costs have been increasing, in part due to obesity and related chronic diseases, and the hospital, area employers, municipalities are all concerned with containing the costs of healthcare.

The Vermont Department of Health has twelve district offices in Vermont. The St. Albans Office directed by Judy Ashley, services Franklin and Grand Isle County hence the ideal partner for the RiseVT Initiative. The health department supports and runs a myriad of programs that help pregnant women, new mothers and young children to eat well and form healthy habits. They provide immunizations and make referrals to health care professionals. They facilitate and provide programming to help with smoking cessation and if need be, alcohol and drug abuse treatment for those in need.

NMC, a seventy-bed hospital, serves as an anchor institution in the community. Anchor institutions are physical entities of considerable size that are rooted in community and tend to be mission-driven, non-profit organizations who can be counted on to stay in the community. An anchor institution should also have a mission that is driven by a social purpose, such as NMC's mission to provide exceptional healthcare for their community. While anchor institutions are powerful parts of the community's economy and play a significant role in shaping a community's culture, change initiatives such as RiseVT also require a champion like Jill Berry-Bowen who is a dedicated NMC administrator whose advocacy for the initiative's contagious success was instrumental.

The hospital and the Northwestern Occupational Health subsidiary employ approximately 600 people and provide benefits of 38 million into the regional economy. Annually the hospital cares for approximately 1,900 patients and additionally the Emergency Department and the Urgent Care Center in Georgia combined see upwards of 35,000 patients. On an annual calendar NMC provides more than \$129 million dollars of patient care, which the hospital is reimbursed fifty-seven cents on the dollar.

In 2016 NMC completed a Community Health Needs Assessment (CHNA), by an outside consultant, Quorum Healthcare Resources, which defined health, and medical needs within the community and a response plan. Additionally the assessment suggests ways in which other community agencies can work in partnership with the hospital to improve as community wellness collaboratively. The top six priorities were mental health and substance abuse, obesity, smoking, cancer, suicide, domestic and sexual assault. The differences between Franklin & Grand Isle Counties (FGI) and Vermont statewide on these indicators are not statistically significant. NMC continues to prioritize Obesity and Tobacco, they were priorities 3 and 4 in

2012, and have risen to 2 and 3 in the 2015 CHNA. Only Mental Health and Substance Abuse continues to be a higher priority for the community (rated #1 in both years).

Both counties are serviced by the same Agency of Human Service District Office and are often served by many of the same programs and services. Despite the investment in the community needs, both counties are challenged and struggle with healthy behavior changes as indicated in the BRFSS and YRBS.

The RiseVT initiative attempts to address two of the top community health needs in the NMC's service area. At the end of its first year, this project seeks to accomplish four main objectives in regard to the RiseVT initiative.

1. Describe the RiseVT initiative,
2. Assess the current state of the RiseVT initiative in terms of accomplishments, challenges and opportunities,
3. Develop a systematic approach to evaluation and data collection, using existing data to inform the approach where possible, and
4. Establish a baseline of health factors and outcomes in the population; describe the evidence-based best practices being implemented by RiseVT and make recommendations for changes needed to meet long-term goals.

In order to accomplish these objectives, Center for Rural Studies (CRS) conducted qualitative interviews with the RiseVT leadership, as well as other stakeholders in the initiative. CRS also used county-level health data to describe the baseline health status of the population served by RiseVT. A logic model was refined in order to provide the framework for the systematic approach to evaluation of RiseVT efforts.

Describe the RiseVT Initiative

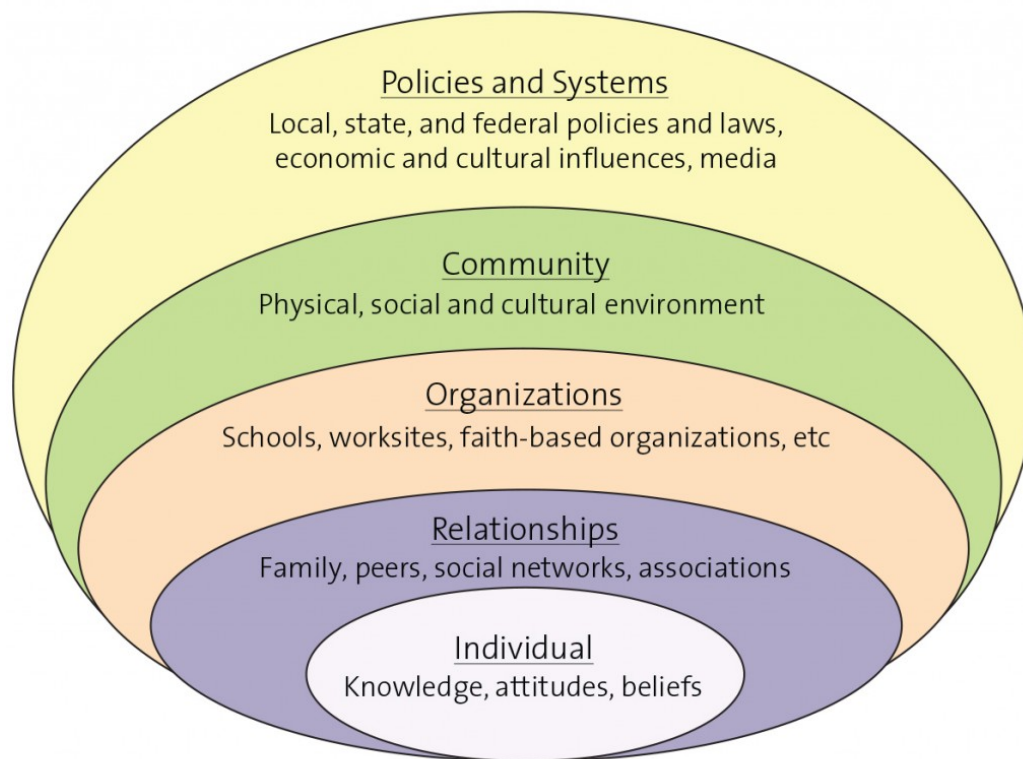
RiseVT was established as a community collaborative effort to lower healthcare costs and embrace healthier lifestyle choices in Franklin and Grand Isle Counties and funded by Northwestern Medical Center (NMC) and a healthcare reform grant from the State of Vermont. Specific programming included: enhancement of the walkability of communities through safe pedestrian paths for adults and children, decreasing tobacco use, increased physical activity and increasing the consumption of fresh fruits and vegetables. The “Community Committee on Healthy Lifestyles” recognized the need for addressing change on a cultural level by enacting and utilizing a campaign to change knowledge, increase awareness, overcome barriers and increase participation on a community wide level, which in turn can stimulate individual activity change. The focus on lowering healthcare costs and embracing healthier lifestyle choices appears to be a logical next step exhibited by both counties reporting greater incidences of chronic diseases and higher risk behaviors than the statewide average. As demonstrated by years of work on tobacco prevention and cessation efforts to decrease the percentage of smokers in Grand Isle and Franklin Counties to 17%, which is similar to the statewide average.

The initiative grew from the “Community Committee on Healthy Lifestyles” co-chaired by Jill Berry-Bowen the Chief Executive Officer of NMC in St. Albans, Vermont and Judy Ashley, District Director of the Vermont Department of Health St. Albans Office, along with local representation from businesses, schools, municipalities, media and government leaders who also saw a need for community change.

The Vermont Prevention Model, Figure 1 shown below, provides the basis for the multi-level approach used by RiseVT. RiseVT uses a variety of strategies and activities at each level of the prevention model, so that each level can reinforce the others.

At an individual level, RiseVT communicates through traditional and social media to keep healthy eating, physical activity and tobacco prevention in the forefront. RiseVT also promotes and encourages events sponsored by partners to help individuals engage in healthy behavior.

Vermont Prevention Model



Adapted from: McElroy KR, Bibeau D, StecklerA, Glanz K. An ecological perspective on health promotion programs. Health Education Quarterly 15:351377, 1988.

Figure 1. Vermont Prevention Model

RiseVT influences the relationship level of the model through its active presence on social media. Publicly promoting activities and events in this interactive forum engages existing social networks to accept healthy activities as fun, normal activities.

RiseVT’s strategy of “wrapping around” each employer that has subscribed to the initiative by an “in-person” meeting, identifying desired community needs, and helping the community

facilitate the desired programming. This strategy while not unique appears to be successful in supporting the necessary changes the stakeholder identified. Schools have also been engaged as organizations to reach children in the community, as well as their teachers. Scorecards have been used extensively at worksites and schools to help these organizations set goals and stay accountable. Health coaches have provided individual support at participating organizations.

RISE VT puts Vermont Prevention Model into practice

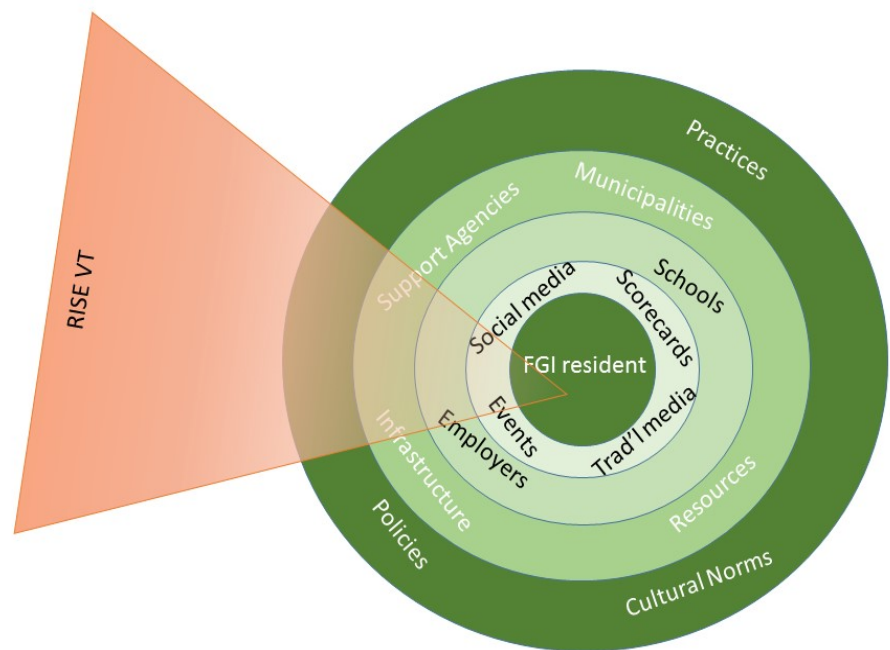


Figure 2. RiseVT Prevention Model

At the community and policy level, RiseVT works with municipalities to encourage healthy infrastructure and built environment resources, and promote these resources, as well as working with the policymakers to enact new policies that support and encourage the health behavior at all the other levels of the model. Health advocates have played an important role in helping communities find and prioritize resources and determine needs for policies.

Results Based Accountability

The initiative was grounded in Results Based Accountability (RBA), which asks three questions: What are you doing? How well are you doing it? Is anyone better off? This process requires the identification of the problem, formulation of possible solutions, and establishment of indicators to track progress. Viewed through the lens of RBA, prescribed health indicators support the perpetuation of the initiative, along with wellness programming targeted towards individuals through employers and educational settings with the focus of decreasing chronic disease and the resulting higher healthcare costs.

Demographics

Franklin and Grand Isle Counties are in the Northwest corner of Vermont and boarder on Lake Champlain and Quebec with populations of 47,746 and 6,970 respectively. These 54,716 residents include the following segments:

Table 1. Franklin and Grand Isle County Demographics, US Census

	Franklin County Percent of Population	Grand Isle County Percent of Population
Children (under 18)	23	18
Older adults (65+)	14	19
Racial/ethnic minorities (about equally split between Black, Hispanic, Native American, Multi-racial)	6	7
Veterans	4	8
Adults without HS graduation	11	7

Physical disability (under 65)	10	8
No health insurance (under 65)	6	7

Occupations in Franklin County are varied: management, business, science, arts, services industries, natural resources, production and transportation. The median income of households in Franklin County, Vermont was \$53,910. While 11% percent of the households were in poverty with an income below \$15,000 a year and 6 % had income \$150,000 or more.

Occupations in Grand Isle County are varied: management, business, science, arts, services industries, natural resources, production and transportation. The median income of households in Grand Isle County, Vermont was \$61,338. While 8.8% of the households were in poverty with an income below \$15,000 a year and 11.8% percent had income \$150,000 or more (ACS 2010 -20145 year estimate). Overall there are nearly 1500 employers in Franklin and Grand Isle combined and these firms employ over 18,000 employees.

Table 2. Employers, employees in Franklin & Grand Isle Counties, 2015, Vermont Dept. of Labor

Employer establishments	1,430
Jobs	18,547

By using the Vermont Prevention Model, RiseVT attempts to engage the widest audience in the community. In addition, RiseVT uses multiple evidence-based strategies to engage at each level of the model. In order to gauge how well RiseVT is meeting the expectations of its stakeholders and better understand the experience of the stakeholders, including employers,

municipalities, media providers, schools, and health providers, interviews were conducted with twelve stakeholders during the month of July 2016. The results of these interviews are summarized below in terms of accomplishments, challenges and opportunities for RiseVT.

RiseVT Accomplishments, Challenges, Opportunities

Table 3. RiseVT Stakeholder Interviews Performed, July 2016

Stakeholder Group	Local Business	Schools	Media	Municipality
Number of Interviews	5	2	1	4

Initiative expectations:

Initial stakeholder engagement with the RiseVT initiative was varied; ranging from low expectations with some skepticism on the part of a few stakeholders to invest time and energy to others who were excited to be involved from the beginning. Four stakeholder's reported very low expectations of the initiative; however, their sentiment morphed with ease of execution and support as a result of consistent and direct contact from a RiseVT employee. To further illustrate this point one participant was adamant, *"Small grant funds are often not worth the effort they entail. There are often too many concluding reports that need to be written and there's not time. However with Rise's commitment to support and nurture program enhancement that skeptical perception was transformed into a positive outlook, which was illustrated in a community that wanted a "water bottle" filling station that they previously had been financially challenged to install the potentially donated "water station". Yet, with Rise, the stakeholder explained, "Now there's a healthy alternative, water. The station is in a public recreation area and it's used 4 seasons of the year. Rise made it simple. The station's usage has been tremendous and the users are able to observe the counter to see how much has been consumed."*

Five stakeholders shared that they received instrumental support from a RiseVT employee who enhanced their initial experience. One participant became involved by “*happstance*” when helping with a business certification, while another as a result of writing the grant for Rise and later continued to provide staff support. Two stakeholders were very enthusiastic; one explained they were approached at the “ground level” of the initiative and passionately remarked, “*we’re spearheading the initiative at the municipality level.*”

Overall the response from all twelve interviewed stakeholders was positive. Each stakeholder reported initial success with at least one aspect of the initiative:

- employee engagement with scorecards
- composters at their community garden
- a smoothly executed dance video contest
- the Olympics
- scorecards
- professional help at community meetings for expansion and enhancement of sidewalks

All stakeholders’ defined future success similarly, “*when Rise VT becomes more of a common name in the community.*” Two others shared that when students view RiseVT as commonplace, “*then success will be achieved.*” One stakeholder furthered that statement with, “*A healthy community is vibrant and prosperous with a drive to create and foster education where youth do not experiment with drugs and alcohol. Rise has this potential.*” Yet another stakeholder said, “*When RISE is successful, the community will look like it has had a cultural transformation at all levels – individual, family, etc.*”

Eight of the twelve stakeholders talked about the RiseVT initiative as different from other programs or initiatives, and easy to work with. All shared a consistent feeling of support and attention. They were not told what to do; conversely each group was supported in programming they were previously engaged in. For example one stakeholder said, *“Nothing like this- it’s the first program to focus on wellness and its practices. It’s very unique and has made a great impact.”* Another stakeholder talked about the level of flexibility and support *“they don’t just dump money. They are helpful. She further explained with the example of RiseVT writing a press release with them to inform and ‘show off’ their new bike racks.”* While yet another described *“RiseVt is well targeted and supportive without having to run a marathon to get something done.”* One stakeholder appreciated *“the monthly biometric screenings and emphasized how they have needed to add more time for them which is good.”*

Meeting the Goals of the Initiative

Every stakeholder interviewed expressed that RiseVT was helping communities make positive changes. While all were pleased, schools experienced exponential and quick behavior changes while others, with more entrenched behavior patterns noted incremental change. One stakeholder summed it up well, *“It takes 10 years to change culture.”*

The sustainability of RiseVT was a question asked by numerous stakeholders; the potential for excitement to slow, dwindle or stop was a concern for several stakeholders mixed with questions about where was funding coming from? All twelve interviewed wanted to see RiseVT continue and one proclaimed, *“I could not imagine a world without RiseVT”* while

another hoped RiseVT would “*expand to be in every Vermont community*” and “*the CDC should see and fund this outstanding accomplishment.*”

Physical Activity

All interviewed reported some level of increase in their group’s physical activity level. While six of the twelve reported a specific activity their community was invested in:

- safe bicycling on recreation paths
- the Olympics
- a dance contest
- 6:00am exercise in the park
- “safe routes to school”

Others expressed an awareness that RiseVT contributed to the increased awareness for physical activity as a healthy lifestyle choice and “*could be a good model for statewide and/or city replication.*” Another shared thoughts about the importance of the website and the content which includes a personal health assessment, activity logs and the opportunity for health coaching through email.

There was some question about what would “*an ongoing relationship with RiseVT [be] and what it would look like?*” One stakeholder specifically said, “*I have no idea, I don’t know how you can gauge. Rise sits on the Town Recreation Committee and we see more people using trails. But how do you define it?*”

RiseVt has been instrumental in helping people develop awareness and desire to be more active. Their employees have a unique way of listening and supporting through amplifying the existing programming while being sensitive to “*meeting people where they are.*” One stakeholder said it well, “*we’ve got to embed it; it’s a movement and we are infusing it into existing programs.*”

The largest and most evident (at present) increase in opportunities for physical activity was reported in the schools. The goal established for “safe routes to schools” was exceeded and the Alburg School decided to add 15 minutes to the school day to ensure physical activity. One school now has “*a smoothie bike in the cafeteria*” and another has removed vending machine from the school cafeteria.

In order to promote healthy habits and physical activity many communities in the Franklin and Grand Isle Counties are focused on creating more walkable and bikeable infrastructure, and RiseVT supported by providing funds for bicycle racks and shelters for bicycle storage. Five stakeholders reported the smoothie bicycle as a positive experience in developing healthy choices in eating and physical activity, “*Smoothie bikes are brilliant at getting people to try new things.*” These are all positive changes in the community however two people noted, “*that change does not occur immediately specifically*” and, “*change does not happen overnight and sustained change really makes a difference.*”

Healthy Eating

One stakeholder reported an increase in healthy eating as they witnessed the enhanced consumption of fruits and vegetables. Another mentioned the importance of getting adults to model healthy eating habits for children; however there’s the challenge of getting children to try new foods. Two stakeholders talked about bringing awareness to farmers markets for people to purchase fresh vegetables and learn more about local food. One stakeholder shared “*a school now has a salad bar and a smoothie bike in the cafeteria.*” There was a suggestion that RiseVT and the stakeholders could begin to target “*healthy retailing.*”

Tobacco

As noted, there’s been a reduction in tobacco usage from 20 % to 17% in the two counties. Nine of twelve stakeholders reported RiseVt has been instrumental in supporting smoking cessation. One reported “*it’s a natural fit to stop smoking when you’re focusing on healthy lifestyle activities, they go hand-in-hand*”. Four

groups reported they received funding for “No Smoking” signs while another talked about “butt cleanup” activities. Two stakeholders reported they have “*no smokers in their workplace at this time*”. Overall RiseVT has helped create and collaboratively foster environments where “*smoking is not alright*” and “*a smoke free campus can exist*”. There were two stakeholders who expressed initial reluctance introducing a smoke free work environment; however, they made that leap and another group who worked with a younger population reported, “*I don’t think we’re there yet.*”

Initiative Participants

The stakeholder participants in the initiative reported RiseVT been a fantastic partner to work with on new and existing projects, endeavors, and community culture change. One stakeholder described the initiative and its accomplishments as “*the freshness and good feeling of climbing into your bed with clean sheets on it.*” They furthered shared “*they’re a bonus!*” The prevailing sentiment was RiseVT does not need to improve their work; however they need be “*cautious of growing too quickly*” as three stakeholders said, “*they did not want to be forgotten if Rise plans to grow.*” One stakeholder commented, “*As they are not apt to grow as fast, they might consider looking at new measures of success in year two*” and another commented, “*they could intensify their existing relationships and get deeper*” however they were not able to quantify that statement.

As an innovative and trustworthy partner, RiseVT has helped many local businesses change policies and practices for the long term, which is essential as another stakeholder said, “*culture change takes 10 years.*” While wrapping themselves around communities in unique ways, RiseVT has been able to adopt a “*practical multi-pronged approach to meeting the town’s needs. [It] has been remarkable*” showing people that “*health is for everyone.*” The initiative has collaborated and certified “*46 businesses, which exceeded the expectation, but there are many more to go.*” RiseVt has tailored the initiative to the needs of the organizations, which is potentially the ingredient for success and another reason “*not to grow too fast and*

continue to work with an intentional plan". People have learned that a healthier workforce is a more productive workforce and RiseVT's ability to be nimble and responsive has supported that vital need.

Communication

RiseVT communication with different communities has been excellent. The staff was "*genius*" at what they did. RiseVT was "*everywhere and they are getting into schools through apps and prizes.*" They gave away lots of "*stuff*" which appealed to many kids. They have utilized a varied palate of communication: newspapers, television, social media, direct mailing, posters and word-of-mouth. The only avenue they did not exhaust joked two stakeholders was "*Skywriting*". While said jokingly, it's important to note the multi-pronged communication, and the reception of the exhaustive list they've utilized.

Seven of the stakeholders shared that RiseVT's utilization of social media was excellent; specifically, several called out Facebook for videos and recipes. Three stakeholders commented the website was not "*the most effective tool*" for marketing. In one interview the suggestion was moving towards a "*real time app-like map-my-run.*" It was noted that RiseVT intends to hire a fulltime social media person by October 1, 2016.

Four stakeholders said RiseVT used the St Albans Messenger effectively while the Courier was underutilized (or not utilized). The use of public access television has been maximized with every minute of advertising used. Despite a positive marketing effort, RiseVt missed several hard-to-reach populations: void of Internet, computer illiterate, lacking traditional media, and homebound. These populations RiseVt hopes to connect with in the next year and beyond. However, there's question and concern about them as "*they are the most needy*".

Conclusion

Three stakeholders questioned the financial sustainability of RiseVT , yet one said "*the work is sustained even if the initiative is not.*" While two others stakeholders talked about the idea of public private

partnerships, and conceptual sponsorship models for the initiative's financial success "*since they have demonstrated an excellent job at community health where they have included a culture of wellness at all levels*". One also said, "*the need is vital*" and the path to success can only be accomplished by keeping "*partners engaged and at the table.*"

RiseVT has supported their partners in telling stories of their large and small victories. These stories are compelling fodder for additional potential partners such as the Green Mountain Care Board, Accountable Care Organization and UVM Medical Center. They have "*demonstrated advocacy work that municipalities can't do and they are professional in their work and follow through.*"

On two occasions, stakeholders reminded, "*that cultural changes takes time*" and one said "*As there is success in the process not just the outcome; look closely at the process and not solely at the outcomes.*" When speaking with stakeholders about the first year of RiseVT and all the accomplishments, they recognized with excitement that "*Rise is changing the community norms*" which are essential to healthy lifestyles. When looking at where the communities started and where they are now, one stakeholder summed it up well, "*RiseVt has made a difference in a seemingly intractable problem through enthusiasm, visibility and ability to provide good information and support.*"

Systematic Approach for Evaluation

Based on the logic model shown in Figure X, evaluation can be approached in four phases. More details about evaluation of short and medium term outcomes can be found in the Recommendations section

1. **Outputs.** Outputs are most closely connected with the first two questions in the RBA framework “what did we do?” and “how well did we do it?”. Outputs are generally collected at the time of programming delivery and are often expressed as raw counts (e.g., number of people who attended an event, number of policies adopted, dollars spent) or as percents based on a count (e.g., percent of students who rode the bike, percent of eligible employers completing a scorecard). The shortest term of measures, outputs are a measure of activity and fidelity to programming, but alone, not a useful measure of behavior change. Outputs should be measured continually, as programming and activities occur. For a partial list of suggested output measures, see the Appendix.
2. **Short-term outcomes.** Short-term outcomes are also linked to programming and activities delivered, but go beyond simple counts of activity and fidelity. Short-term outcomes for RiseVT should include degree of **penetration** in the community (how much of the community (and targeted segments) have been reached by programming (and how many times), **enthusiasm/excitement** in the community and how the community is talking about RiseVT (as measured by the content of media coverage, posts, comments, etc.), defined **metrics/indicators** of medium and long term

outcomes and impacts. Other short-term outcomes might include identifying several **sustainable funding** sources and defining **targeted segments** of the population based on needs and participation rates. Short-term outcome measures may be qualitative and subjective.

3. Medium-term outcomes. Medium-term outcomes may be more difficult to directly attribute to a specific program or activity, but more often represent the evidence of starting to “turn the curve” and answer the question “is anyone better off?”. Specifically for RiseVT, changes in **cultural norms**, especially as evidenced by population health surveillance and hospital records (such as fruit/vegetable consumption, physical activity, tobacco use). Another medium-term outcome will be having secured a **sustainable source of funding** for RiseVT. Lastly, based on the interviews, it seems that there is interest in **replicating** RiseVT for other regions of Vermont, or beyond; a medium-term outcome could be a plan for replication or dissemination of the initiative.
4. Long-term impacts. The long-term impacts align with the Vermont goals of lower prevalence of **obesity and tobacco use**, as well as the sub-goals of increased fruit/vegetable consumption, increased physical activity, decreased smoking.

Overarching Goal: Decrease percent of overweight/obese individuals and percent who smoke in FGI

Priorities	Inputs	Outputs		Outcomes		Impacts
		Activities	Participants	Short term (1-2 years)	Medium term (3-6 years)	
<p>The rationale for doing this</p>	<p>What are our resources?</p>					
<p>A healthier community will result from:</p> <ul style="list-style-type: none"> Expanded resources for bike/walk Increased fruit/veg consumption Fewer people with no leisure time physical activity More students walk/bike to school Wellness @work, @school, @home, @community 	<ul style="list-style-type: none"> Community Committee on Healthy Lifestyles RISE VT Team: <ul style="list-style-type: none"> Coordinator Coaches, Advocates Community resources and programs VDH CDC Community Best Practice Guide Vermont Prevention Model Northwestern Medical Center Early adopter support 	<ul style="list-style-type: none"> Score cards Certifications Social media Traditional media Individual health coaches Community health advocates Event presence Grants Presentations Online resources Small business health/wellness coaching 	<ul style="list-style-type: none"> Schools and childcare <ul style="list-style-type: none"> Students Birth-18 Teachers Staff Parents, Caregivers Employers <ul style="list-style-type: none"> Employees Owners Customers Municipalities <ul style="list-style-type: none"> Municipal officials Residents Visitors 	<ul style="list-style-type: none"> Penetration Excitement Initial success Metrics/indicators defined 	<ul style="list-style-type: none"> Culture change Sustainable funding Broader geography defined 	<ul style="list-style-type: none"> Lower percent of FGI residents are obese Higher percent of FGI residents meet PA recommendations Lower percent of FGI residents are smokers

Figure 3. RiseVT Logic Model

Baseline and recommendations

Baseline data

The US Census Bureau-American Community Survey 5-Year estimates looked at chronic disease indicators, poverty, and education levels within the counties. Along with the Behavioral Risk Factor Surveillance System (BRFSS) and Youth Risk Behavior Survey (YRBS). The BRFSS a volunteer survey conducted by cell and landline telephone to plan, support, and evaluate health promotion and disease prevention programs for adults. The YRBS a self-administered anonymous questionnaire for high school students to measure the prevalence of behaviors that are linked to the leading causes of death, disease and injury among youth. The survey results for the St. Albans District Office show that FGI has rates of obesity and tobacco comparable to those of the state, and lower percentages who get physical activity.

Table 4. 2014 BRFSS results, St Albans District Office

	FGI percent of population
Obese	28%
Met Physical Activity recommendations	51%
No leisure Physical Activity	21%
Smoked tobacco	19%

The state of Vermont has set targets for healthy behaviors, including the following indicators:

- Tobacco use
 - Decrease percent of adults who smoke cigarettes from 18 to 12
 - Decrease percent of teens who smoke cigarettes from 11 to 10
 - Increase the percent of adult smokers who try to quit from 59 to 80

- Increase the number of laws supporting smokefree environments from 10 to 12
- Obesity
 - Decrease percent of adults who are obese from 25 to 20
 - Decrease percent of children (from 13 to 10) and teens (from 12 to 8) who are obese
 - Increase percent of adults and adolescents eating recommended fruits/vegetables
- Physical activity
 - Decrease percent of adults with no leisure physical activity from 21 to 15
 - Increase the percent of adults who meet physical activity recommendations from 59 to 65
 - Increase percent of adolescents meeting physical activity guidelines from 23 to 30
 - Increase percent of adolescents with no more than 2 hours of screen time from 51 to 70

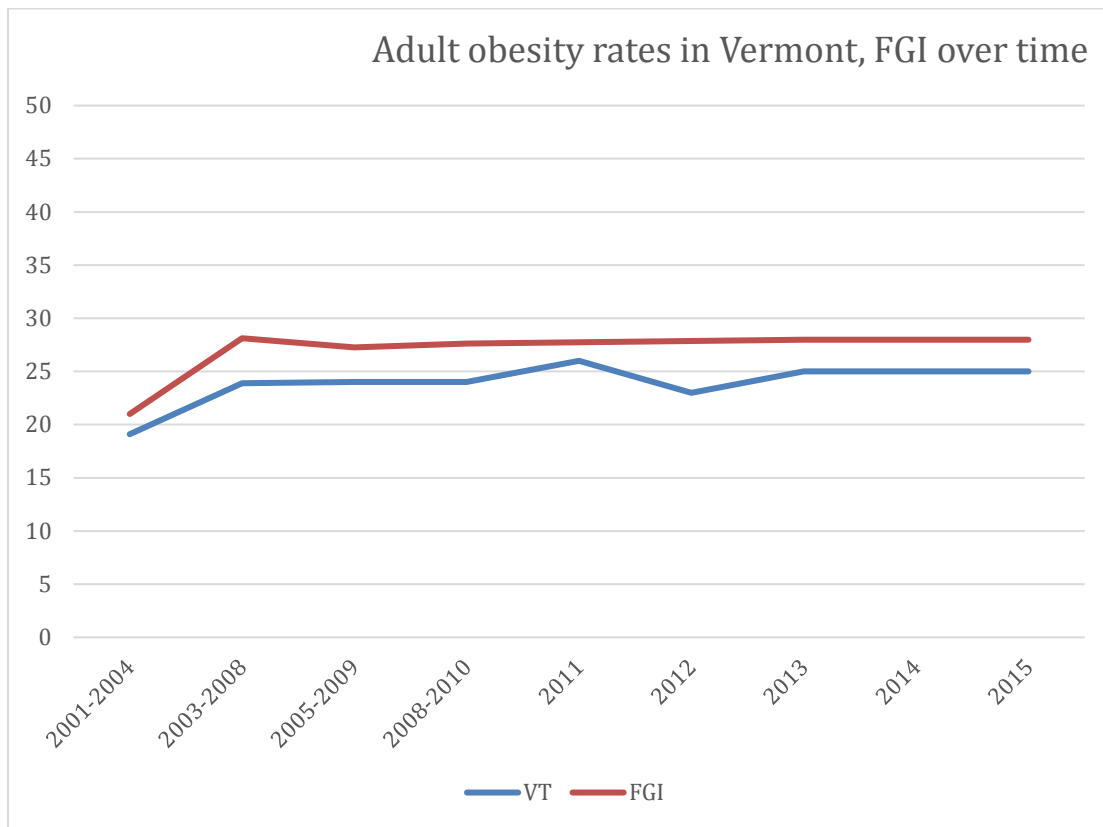


Figure 4. Adult Obesity Rates in Vermont, Franklin and Grand Isle Counties 2001 - 2015

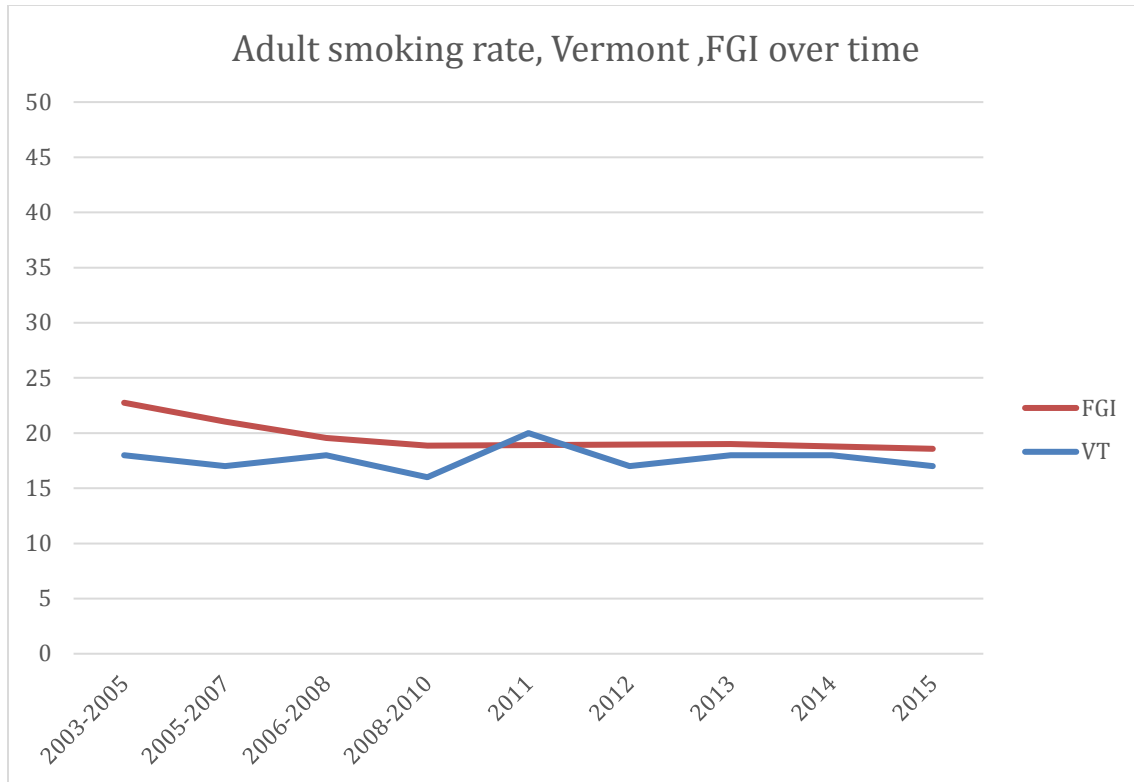


Figure 5. Adult smoking rate in Vermont, Franklin and Grand Isle Counties 2003 - 2015

In the most recent year available (2013-2014) for the St. Albans district, 21% of adults reported that they get no leisure time physical activity, somewhat higher 18% in the state of Vermont. Including all physical activity, 51% of St. Albans district adults report meeting recommended levels of physical activity, significantly lower than the statewide rate of 58% (VDH, 2016).

At the same time, just 18% of St. Albans residents report getting 5 servings of fruits and vegetables each day, compared to 21% statewide.

Recommendations for evaluation

In an RBA framework, getting from the “what did we do and how well did we do it?” output measures to “is anyone better off?” impact measures can require a leap of faith that these long term impacts will change as a result of the short term strategies. Short and medium term outcomes provide the link between the output measures and the impact measures. Measurement of short and medium term outcomes can be best accomplished in one or more of several methods.

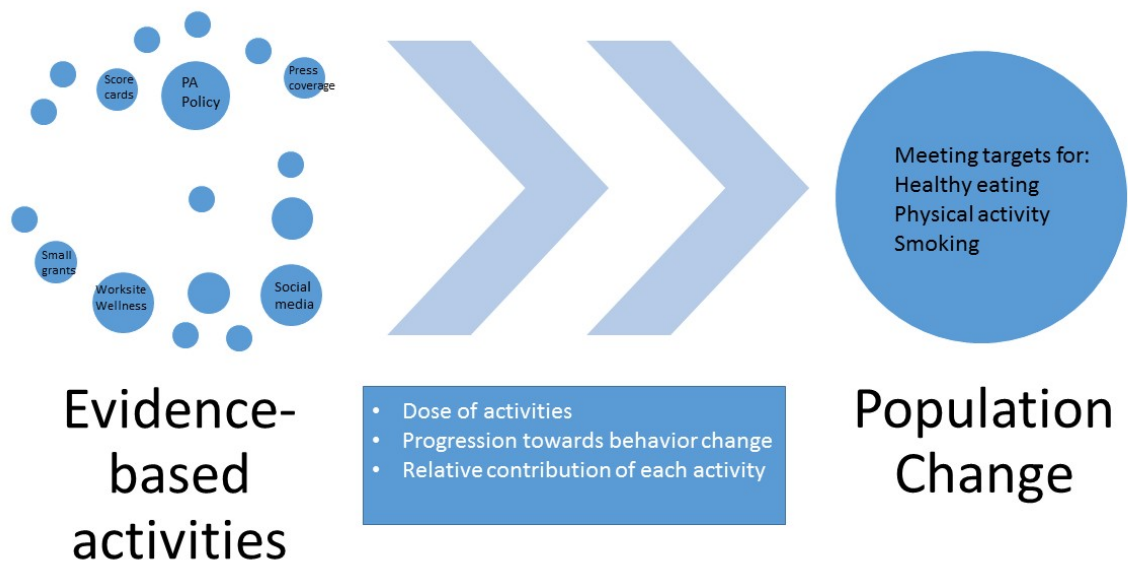


Figure 6. Depth of Penetration of RiseVT Initiative

1. Measure Dose (Depth of Penetration)

The effect of RiseVT activities will be greatest when the population is exposed to a combination of the activities. As individuals, organizations, communities participate in multiple activities, the RiseVT effect will be greater. As shown in the literature, a single exposure to any of these activities is unlikely to produce the desired behavior change, but that 7-10 exposures is considered ideal for even small changes in behavior. Rather, this integrated campaign is designed to provide multiple, reinforcing activities at every level of the community.

Several possibilities exist that may be possible given the data collected as part of RiseVT ongoing activities.

- a. How many RiseVT contacts for each individual? How much participation for each individual?

- b. How extensive within each organization? Number of activities, number of touches, number participating within participating organizations (municipalities, schools, employers)
 - i. Percentage of 5 town (Swanton, Alburg, Enosburgh, St Albans Town, St Albans City) population reached (depth of population getting at least 1 dose)

2. Progression/Improvement

A second way to measure the effect of RiseVT activities is to track how individuals and organizations progress along a predetermined continuum. The first way that progression might be measured is to compare scorecards over time. The score cards provide a basis not only for individuals to track personal progress, but taken in the aggregate, can provide a glimpse at how/whether behavior change is occurring.

This would be best accomplished by matching scorecards from the same individuals or organizations, but could also be accomplished by comparing group results (such as scorecards of all employers in year 1 compared to the group of all employers in year 2). This assessment of progress could likely be achieved with little or no additional data collection.

As an alternative, and more theoretically grounded method for assessing progression, two frameworks are shown below. Both frameworks are commonly accepted models in the field of consumer marketing. The consumer behavior change framework might be the more commonly used framework for health behavior change, but since RiseVT has focused on building awareness of the initiative, it has positioned itself more like a “product” than as a program, thus the production adoption framework might be more appropriate in this case. In either case, determining the effect of

RiseVT could be accomplished by assessing whether those who participate in RiseVT activities are progressing along the stages.

- a. Scorecard comparison over time – have they improved? Reached new attainment?
 - b. Consumer behavior change framework
 - i. Need
 - ii. Information search
 - iii. Consider alternatives
 - iv. Decision/behavior change
 - v. Post-behavior change – continue behavior?
 - c. New product adoption framework
 - i. Awareness
 - ii. Interest
 - iii. Evaluate options
 - iv. Trial of behavior change
 - v. Adoption of new behavior
3. Relative contribution/weighted scores

A third way to measure the effect of RiseVT activities is to consider how likely each activity is to result in the desired population change (and the relative contribution of each activity toward that outcome). The most robust way to estimate the contribution of each activity is to develop a double hurdle regression model. This model would first estimate the effect of participating once in each activity and then the effect participating in the activity(ies). Put more simply, it first asks, did an individual participate in any activity? And

then if they participated in something what did they participate in? This model can also be adapted to consider the effects of dose, as described in #1, above.

- a. One way to bridge from the short term to long term measures is to develop a model of relative contribution of each of the strategies to the main impact.
 - b. This model should also account for any items outside of the strategies that could contribute to the main impact. The figure above shows a sample visual representation of how each activity might contribute relatively more or less to the ultimate outcome. It should be noted that with community behavior change, the evidence suggests that the combination of activities contributes to the outcome, and just each individual activity. So that taken apart, each activity might have a small effect, but in combination, the effect is larger than even if all the individual activities' effects were added together.
 - c. The most scientifically rigorous way to determine relative contribution would be to use a regression model to predict the contribution of each strategy or activity to the desired outcome. This is likely not feasible at this time, as it would require primary data collection as well as development of a robust model. However, to have evidence to support the activity mix of RiseVT, funding to develop this evidence may be a priority.
4. Focus on individual change in a targeted, subpopulation
- a. Patients/Hospital records
 - b. School children/School nurse records

This model can be used to set expectations for the likely change in the impact measure as well as identify additional strategies that would effect the impact measure. As described above, other

ways to measure the short/medium term outcomes that are the bridges between “what did we do” and “is anyone better off” is to rely on non-population based measures.

These non-population based measures could come from two types of sources. First, data that is already collected. NMC collects patient data that could be suggestive of changes in the broader population. For example, proportion of patients who are obese could be tracked over time, quarterly or semi-annually, to suggest the direction of the population impact.

In addition, target segments of the population might be identified to track more closely. For example, those with an existing chronic illness might be tracked for self-reported physical activity or healthy eating. These could be from healthcare provider records or an aggregation of the score card data (more about the role of score card data below).

Recommendations for Year 2 programming and beyond

RiseVT has been successful in generating initial enthusiasm and participation in healthy behavior and healthy behavior awareness activities. It has capitalized on the community’s latent interest in engaging in healthier behaviors and policymaking by making healthier choices the easier choices.

By considering RiseVT as an innovation in healthy behavior change, the Diffusion of Innovation literature provides a helpful lens to consider the likely future trajectory for RiseVT.

Diffusion of Innovation

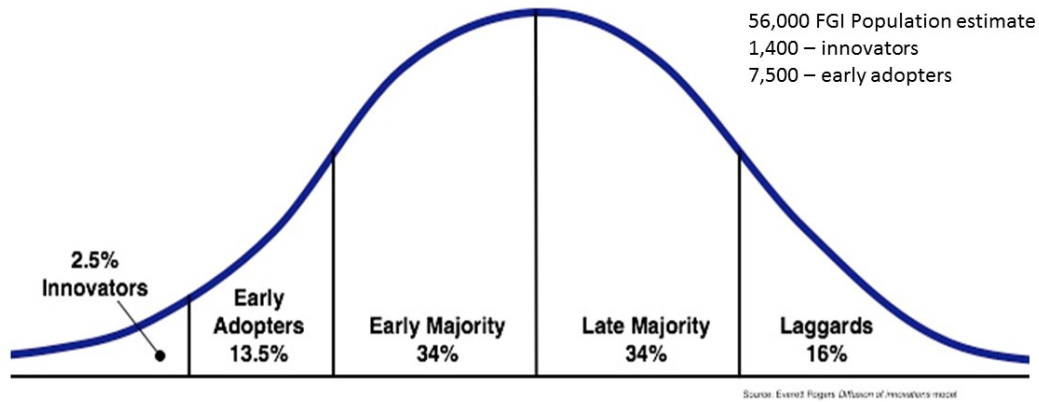


Figure 7. Diffusion of Innovation of RiseVT Initiative

As an innovative approach to healthy behavior change, those who were already interested or motivated to make a healthy change to their behavior are likely the first to engage in sponsored activities. According to diffusion of innovations, the innovators are already looking for a solution and are willing to figure out how the new offering can address their needs. They generally like to take risks to find solutions. The early adopters are also willing to take risks, especially to address a perceived challenge that they wish to solve.

Successful innovations capitalize on the energy of the innovators and early adopters, and rely on the testimony that innovators and early adopters provide to the majorities, in order to springboard up the steep curve into the majority. For a new innovative offering, the steep curve into the majority is the biggest challenge in adoption. For the majorities, it is not enough for something to be new or exciting, but it must be tried and accepted for them to embrace something new.

Getting those who have actively participated in RiseVT to share their experiences with their peers and help identify new partners and prospects for RiseVT will increase the reach of the

activities and events, as well as lend credibility to those who need more assurance before participating. This can apply to organizations or individuals. In addition to testimonials and other active communications, having active participants take on leadership roles will help RiseVT maintain and increase momentum. Role models play an important part in spreading behavior change, and the act of modeling can provide positive reinforcement for the person or organization acting as the model.

RiseVT health advocates and health coaches have been successful because they work deeply within their sphere, but as a result, their reach cannot extend as broadly as the demand will likely be. Enlisting, even training, these innovators and early adopters to play a role in advocating and coaching others in healthier behaviors provides additional capacity to the initiative at the same time that it continues to build momentum within the initiative.

These strategies of having others speak and act for the initiative will be especially effective at reaching some of the population segments that are most at risk of obesity and tobacco use. The rates of obesity, physical activity and tobacco use in the general population do not tell the whole story. Some segments of the population have higher rates of one or all of these risky behaviors and in future, RiseVT may wish to design activities or campaigns to specifically engage these population segments. Further, a segment like those with the lowest incomes may be most receptive to the Rise VT messages and strategies when they are endorsed by their peers, rather than an expert.

Table 5. Rates of obesity, tobacco use and meeting physical activity requirements by age and income category in St. Albans District of Vermont.

	Percent Obese	Percent Smokers	Percent Meeting Physical Activity Recommendations
Age			

18-44	23	20	50
45-64	32	21	53
65+	32	8	51
Income			
<25k	29	48	35
25-50k	32	21	50
50+	27	8	58

Other factors that may affect participation in RiseVT activities include proximity to activities, mobility issues, mental health challenges and physical disabilities. These segments of the population are at high risk for the chronic illnesses affected by these risk factors, and yet may be the least able (or willing) to participate. RiseVT has actively reached out to these vulnerable segments, and has been successful at meeting them where they are. These segments also could benefit from peer role models and/or spokespeople.

Now that the community, particularly the five municipalities, has awareness of RiseVT and what it stands for, the next goal should be in creating interest among the communities in achieving the RiseVT healthy behavior outcomes. RiseVT has been successful in establishing awareness within the communities of Franklin and Grand Isle counties by using wide reaching media and communication strategies. Now to establish interest will require a more focused approach as it requires a deeper connection with the consumers. Choosing targets within the communities that are generally ready for change can lead to some early successes that will continue to help move into the majorities of the population.

One target population to consider is people who are recently diagnosed with a chronic disease associated with obesity or tobacco use. These people may have heightened interest in making

a change, but may not have resources or support to make the change long lasting. RiseVT can take advantage of its connection with NMC to identify targets, or work with physicians to connect with patients. NMC patient records will be useful to track behavior change and progress toward outcomes.

Another potential target segment for RiseVT could be people who have recently attempted a behavior change – either through a diet program (e.g. Weight Watchers), an exercise regimen (e.g., joined a gym) or smoking cessation program (e.g., purchased a nicotine patch). An effort at behavior change demonstrates an interest in healthy behavior. RiseVT can amplify these efforts by providing additional support in the same way it has amplified existing programming to build awareness.

RiseVT has demonstrated the potential to successfully implement awareness building strategies in the public health arena in a rural community. These communities now seem ready for change at individual, organizational and community levels. The next challenges for RiseVT are to:

1. Build upon its awareness to create sustained interest in healthy behavior, not just among those who are already looking to adopt healthier behaviors, but among the majority of the communities.
2. Adopt a measurement system to provide more than just anecdotal evidence of the effect that RiseVT strategies have in the community. This may include measuring dose, measuring progress or measuring the contribution of each activity.

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