Community Partnerships for Healthy Mothers and Children (CPHMC) Project Community Action Plan (CAP) Template

BACKGROUND

COMMUNITY ACTION PLANS

Community Action Plans (CAPs) are a required component of this CDC-funded project. The CAP is the work plan that you will use for the intervention implementation phase of the project. The CAP is organized into objectives (primary and secondary) and activities. Objectives are the specific, measurable results that you would like to see occur within a particular timeframe. For the purposes of this project, the timeframe will be the project period. Activities are tasks that are completed throughout the project to achieve the objectives. The activity descriptions are the series of more detailed steps that need to occur to complete an activity.

PRIMARY OBJECTIVES

Primary objectives A and B describe the projected reach of the two main strategies for this project: 1) improving access to environments with healthy food and beverage options; 2) improving opportunities for chronic disease prevention, risk reduction or management through community and clinical linkages. Reach is an estimate of the number of unique individuals you impact in a certain geographic region. Additionally, primary objective C describes the communications efforts showcasing CPHMC project achievements related to the first two strategies.

<u>Primary Objective A:</u> Increase the **number of people** with improved access to environments with healthy food and beverage options from 0 to target by the end of the project period.

<u>Primary Objective B:</u> Increase the **number of people** with improved access to opportunities for chronic disease prevention, risk reduction or management through community and clinical linkages from 0 to target by the end of the project period.

<u>Primary Objective C:</u> Increase the **number of public and partner messages** showcasing CPHMC project efforts and achievements from 0 to 24 by the end of the project period.

Each agency must select Primary Objective A, Primary Objective B, or both of these objectives to include in their CAPs. Please keep in mind that all agencies are required to reach a total of at least 50% of their geographic population with one or both of these Primary Objectives.

Additionally, each agency must include Primary Objective C in their CAPs. This objective's measurement is messages.

SECONDARY OBJECTIVES

The **secondary objectives** are directly related to the interventions that fall under each primary objective. Your coalition will select the secondary objectives that your project will focus on related to primary objectives A and B. These objectives may or may not be written in the form of reach. Regardless, all secondary objectives related to primary objectives A and B need to describe how to arrive at a reach calculation. For example, in the below objective, the unit of measurement is the number of stores. From here, reach of the intervention can be calculated.

Secondary Objective A.8: Increase the number of new K-12 schools that implement healthy vending and concession practices in the target					
community from 0 to 1.	community from 0 to 1.				
Estimated number of people reached	1,000				
by the intervention					
Description of reach calculation	Number of students attending the school.				

It is important to calculate reach for all secondary objectives related to primary objectives A and B regardless of the main unit of measurement for the secondary objectives because reach is the unit of measurement for the primary objectives. The sum of the reach for the related secondary objectives, accounting for overlap, should equal the total projected reach of the corresponding primary objective. You will regularly keep track of progress towards your secondary objectives to calculate your progress towards the primary objectives. For example:

Secondary Objective A.1 Reach+ Secondary Objective A.2 Reach + Secondary Objective A.3 Reach + Secondary Objective A.4 - Overlap = Primary Objective A Reach

Additionally, you are required to include 2 secondary objectives related to primary objective C in your CAPs. Both secondary objectives related to primary objective C are measured in **messages**. Messages are unique stories or perspectives showcasing your project. Please note that each unique message may result in several activities. In fact, you are encouraged to share your unique messages through a variety of channels. For example, one story may result in 3 separate activities—being shared as a blog post, a Facebook post, and a Tweet.

All words that appear green and bold are ones that you will need to fill in with numbers or words.

Please see Appendix A for a list of relevant secondary objectives. Please see the "Defining Reach" power point for more guidance on how to calculate reach.

GLOSSARY

Please see Appendix B for a glossary of terms. Any word that appears red and bold in this document can be found in the glossary.

<u>Coalition Name</u> Community Action Plan (CAP)

Geographic Details:	
Target Community:	_
Population of target community:	

Primary Objective A: Increase the number of people in < target community > with improved access to environments with healthy food and beverage options from 0 to target by the end of the project period.

Secondary Objective A.1: Increase the r	number of:
€ Grocery stores that sell healthy	foods and/or expand their inventory of healthy foods in the target community from 0 to target.
€ Convenience stores that sell he	althy foods and/or expand their inventory of healthy foods in the target community from 0 to target.
€ Food banks that sell healthy foo	ods and/or expand their inventory of healthy foods in the target community from 0 to target.
€ Mobile grocers that sell healthy	foods and/or expand their inventory of healthy foods in the target community from 0 to target.
Estimated number of people reached	€ Grocery stores estimated reach:
by the intervention	€ Convenience stores estimated reach:
	€ Food banks estimated reach:
	€ Mobile grocers estimated reach:
Description of reach calculation	€ Grocery stores reach calculation:
	€ Convenience stores reach calculation:
	€ Food banks reach calculation:
	€ Mobile grocers reach calculation:

Secondary	Secondary Objective A.1					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		

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A.1.1				
A.1.2				
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A.1.8				
A.1.9				
A.1.10				

Secondary Objective A.2: Increase the number of:

- € Grocery stores with new on-site and in-store placement and promotion strategies for healthy foods in the target community from 0 to target.
- € Convenience stores with new on-site and in-store placement and promotion strategies for healthy foods in the target community from 0 to target.
- € Food banks with new on-site and in-store placement and promotion strategies for healthy foods in the target community from 0 to target.

Estimated number of people reached	€	Grocery stores estimated reach:	
by the intervention	€	Convenience stores estimated reach:	
	€	Food banks estimated reach:	
Description of reach calculation	€	€ Grocery stores reach calculation:	
	€	Convenience stores reach calculation:	
	€	Food banks reach calculation:	

Secondar	Secondary Objective A.2						
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures		
Number	Title			Date			
A.2.1							
A.2.2							
A.2.3							
A.2.4							
A.2.5							
A.2.6							
A.2.7							
A.2.8							
A.2.9							

A.2.10			

Secondary Objective A.3: Increase the r	econdary Objective A.3: Increase the number of new:			
€ Grocery stores that accept WIC	in the target community from 0 to target.			
€ Convenience stores that accept	: WIC in the target community from 0 to target.			
€ Farmers' markets that accept V	VIC in the target community from 0 to target.			
€ Mobile grocers that accept WIC	C in the target community from 0 to target.			
Estimated number of people reached	stimated number of people reached			
by the intervention	€ Convenience stores estimated reach:			
	€ Farmers' markets estimated reach:			
	€ Mobile grocers estimated reach:			
Description of reach calculation	€ Grocery stores reach calculation:			
	€ Convenience stores reach calculation:			
	€ Farmers' markets reach calculation:			
	€ Mobile grocers reach calculation:			

Secondary	Secondary Objective A.3						
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures		
Number	Title			Date			
A.3.1							
A.3.2							
A.3.3							
A.3.4							
A.3.5							

A.3.6			
A.3.7			
A.3.8			
A.3.9			
A.3.10			

Secondary Objective A.4: Increase the r	condary Objective A.4: Increase the number of new:				
€ Grocery stores that accept SNA	in the target co	ommunity from 0 to target.			
€ Convenience stores that accept	SNAP in the targ	get community from 0 to target.			
€ Farmers' markets that accept S	IAP in the target	t community from 0 to target.			
€ Mobile grocers that accept SNA	in the target co	ommunity from 0 to target.			
Estimated number of people reached	reached € Grocery stores estimated reach:				
by the intervention	€ Conven	ience stores estimated reach:			
	€ Farmer	s' markets estimated reach:			
	€ Mobile	grocers estimated reach:			
Description of reach calculation	€ Grocery	y stores reach calculation:			
	€ Conven	ience stores reach calculation:			
	€ Farmer	s' markets reach calculation:			
	€ Mobile	grocers reach calculation:			

Secondary	Secondary Objective A.4								
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures				
Number	Title			Date					

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A.4.1			
A.4.2			
A.4.3			
A.4.4			
7.4.4			
A.4.5			
A.4.6			
A.4.7			
A.4.8			
A.4.9			
A.4.10			
7.4.10			
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Second	Secondary Objective A.5: Increase the number of new:				
€	Grocery stores that offer cash of	or coupon incentives for purchase of healthy foods in the target community from 0 to target.			
€	Convenience stores that offer of	cash or coupon incentives for purchase of healthy foods in the target community from 0 to target.			
€	Farmers' markets that offer cas	sh or coupon incentives for purchase of healthy foods in the target community from 0 to target.			
€	€ Mobile grocers that offer cash or coupon incentives for purchase of healthy foods in the target community from 0 to target.				
Estima	Estimated number of people reached				
by the	by the intervention				

	€	Farmers' markets estimated reach:
	€	Mobile grocers estimated reach:
Description of reach calculation	€	Grocery stores reach calculation:
	€	Convenience stores reach calculation:
	€	Farmers' markets reach calculation:
	€	Mobile grocers reach calculation:

Secondary	Secondary Objective A.5								
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures				
Number	Title			Date					
A.5.1									
A.5.2									
A.5.3									
A.5.4									
A.5.5									
A.5.6									
A.5.7									
A.5.8									
A.5.9									

A.5.10			

Secondary Objective A.6: Increase the r	number of new:
€ Food banks in the target comm	unity from 0 to target.
€ Farmers' markets in the target	community from 0 to target.
€ Mobile grocers in the target co	mmunity from 0 to target.
Estimated number of people reached	€ Food banks estimated reach:
by the intervention	€ Farmers' markets estimated reach:
	€ Mobile grocers estimated reach:
Description of reach calculation	€ Food banks reach calculation:
	€ Farmers' markets reach calculation:
	€ Mobile grocers reach calculation:

Secondary	Secondary Objective A.6								
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures				
Number	Title			Date					
A.6.1									
A.6.2									
A.6.3									
A.6.4									
A.6.5									
A.6.6									

A.6.7			
A.6.8			
A.6.9			
A.6.10			

- € Restaurants/bars with new healthy menu options and/or using nutrition labeling to identify healthy menu options in the target community from 0 to target.
- € Hospitals with new healthy menu options and/or using nutrition labeling to identify healthy menu options in the target community from 0 to target.
- € Other—<please specify> with new healthy menu options and/or using nutrition labeling to identify healthy menu options in the target community from 0 to target.

Estimated number of people reached	€	Restaurants/bars estimated reach:
by the intervention	€	Hospitals estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	Restaurants/bars reach calculation:
	€	Hospitals reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary	Secondary Objective A.7								
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures				
Number	Title			Date					
A.7.1									
A.7.2									
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A.7.3			
A.7.4			
A.7.5			
A.7.6			
A.7.7			
A.7.8			
A.7.9			
A.7.10			

Secondary Objective A.8: Increase the r	Secondary Objective A.8: Increase the number of new K-12 schools that implement healthy vending and concession practices in the target			
community from 0 to target.				
Estimated number of people reached				
by the intervention				
Description of reach calculation				

Secondary	Secondary Objective A.8						
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures		
Number	Title			Date			
A.8.1							

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A.8.2				
A.8.3				
A.8.4				
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A.8.5				
A.8.6				
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A.8.7				
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A.8.9				
A.8.10				
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Secondary Objective A.9: Increase the r	Secondary Objective A.9: Increase the number of new K-12 schools that that make plain drinking water available throughout the day at no cost			
to students in the target community fro	to students in the target community from 0 to target.			
Estimated number of people reached				
by the intervention				
Description of reach calculation				

Secondary	Secondary Objective A.9						
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures		
Number	Title			Date			

A.9.1			
A.9.2			
A.9.3			
A.9.4			
A.9.5			
A.9.6			
A.9.7			
A.9.8			
A.9.9			
A.9.10			

Secondary Objective A.10: Increase the number of new:

- € Hotels/motels that publicly promote/welcome breastfeeding in the target community from 0 to target.
- € Entertainment venues that publicly promote/welcome breastfeeding in the target community from 0 to target.
- € Grocery stores that publicly promote/welcome breastfeeding in the target community from 0 to target.
- € Restaurants/bars that publicly promote/welcome breastfeeding in the target community from 0 to target.
- € Other—<please specify> that publicly promote/welcome breastfeeding in the target community from 0 to target.

by the intervention	€	Entertainment venues estimated reach:
	€	Grocery stores estimated reach:
	€	Restaurants/bars estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	Hotels/motels reach calculation:
	€	Entertainment venues reach calculation:
	€	Grocery stores reach calculation:
	€	Restaurants/bars reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary	Secondary Objective A.10					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		
A.10.1						
A.10.2						
A.10.3						
A.10.4						
A.10.5						
A.10.6						
A.10.7						
A.10.8						

A.10.9			
A.10.10			

Secondary Objective A.11: Increase the number of new:

- € K-12 schools that develop and/or implement policies to support breastfeeding in the target community from 0 to target.
- € Outside of school care providers that develop and/or implement policies to support breastfeeding in the target community from 0 to target.
- € Hospitals that develop and/or implement policies to support breastfeeding in the target community from 0 to target.
- € Mental illness providers that develop and/or implement policies to support breastfeeding in the target community from 0 to target.

€

€ Other—<please specify> that develop and/or implement policies to support breastfeeding in the target community from 0 to target.

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Estimated number of people reached	€	K-12 schools estimated reach:
by the intervention	€	Outside of school care providers estimated reach:
	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	Faith based organizations estimated reach:
	€	Worksites estimated reach:
	€	Prisons estimated reach:
	€	Group homes estimated reach:
	€	Government agencies estimated reach:
	€	Military facilities estimated reach:
	€	Veteran facilities estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	K-12 schools reach calculation:
	€	Outside of school care providers reach calculation:
	€	Hospitals reach calculation:
	€	Mental illness providers reach calculation:

€	Pharmacies reach calculation:
€	Primary care providers reach calculation:
€	Faith based organizations reach calculation:
€	Worksites reach calculation:
€	Prisons reach calculation:
€	Group homes reach calculation:
€	Government agencies reach calculation:
€	Military facilities reach calculation:
€	Veteran facilities reach calculation:
€	Other— <please specify=""> reach calculation:</please>

Secondary	y Objective A.1	1			
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures
Number	Title			Date	
A.11.1					
A.11.2					
A.11.3					
A.11.4					
A.11.5					
A.11.6					
A.11.7					
A.11.8					

A.11.9			
A.11.10			

Secondary Objective A.12: Increase the	Secondary Objective A.12: Increase the number of new community gardens and/or increase the number of existing community gardens that are					
strengthened in the target community	strengthened in the target community from 0 to target.					
Estimated number of people reached						
by the intervention						
Description of reach calculation						

Secondary	y Objective A.1	2			
Activity Number	Activity Title	Description of Activity	Start Date	Completion Date	Outputs/Measures
A.12.1					
A.12.2					
A.12.3					
A.12.4					
A.12.5					
A.12.6					
A.12.7					

A.12.8			
A.12.9			
A.12.10			

Secondary Objective A.13: Increase the	number of:				
€ Cities with improved public transportation options for accessing healthy food and beverage environments in the target community from 0 to target.					
_	transportation options for accessing healthy food and beverage environments in the target community				
Estimated number of people reached	€ Cities estimated reach:				
by the intervention	€ Counties estimated reach:				
Description of reach calculation	€ Cities reach calculation:				
	€ Counties reach calculation:				

Secondary	Secondary Objective A.13					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		
A.13.1						
A.13.2						
A.13.3						
A.13.4						
7.13.4						

A.13.5			
A.13.6			
A.13.7			
A.13.8			
A.13.9			
A.13.10			

Secondary Objective A.14: Increase the	Secondary Objective A.14: Increase the number of:			
€ Outside of school care provider	s that offer healthy food and beverage options in the target community from 0 to target.			
€ Group homes that offer healthy	food and beverage options in the target community from 0 to target.			
€ Other— <please specify=""> that o</please>	ffer healthy food and beverage options in the target community from 0 to target.			
Estimated number of people reached	€ Outside of school care providers estimated reach:			
by the intervention	€ Group homes estimated reach:			
	€ Other <ple>please specify> estimated reach:</ple>			
Description of reach calculation	€ Outside of school care providers reach calculation:			
€ Group homes reach calculation:				
	€ Other <ple>please specify> reach calculation:</ple>			

Secondary	Secondary Objective A.14					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		
A.14.1						

A.14.2			
A.14.3			
A.14.4			
A.14.5			
A.14.6			
A.14.7			
A.14.8			
A.14.9			
A.14.10			

Secondary Objective A.15: Increase the	Secondary Objective A.15: Increase the number of:				
€ K-12 schools that increase SNA	€ K-12 schools that increase SNAP enrollment from 0 to target.				
€ Other— <please specify=""> that of</please>	offer healthy food and beverage options in the target community from 0 to target.				
Estimated number of people reached	€ K-12 schools estimated reach:				
by the intervention	€ Other <please specify=""> estimated reach:</please>				
Description of reach calculation	€ K-12 schools reach calculation:				
	€ Other <please specify=""> reach calculation:</please>				

Secondary Objective A.15

Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures
Number	Title			Date	
A.15.1					
A.15.2					
A.15.3					
A.15.4					
A.15.5					
A.15.6					
A.15.7					
A.15.8					
A.15.9					
A.15.10					

Secondary Objective A.16: Increase the number of:

- \in K-12 schools that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Outside of school care providers that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Substance abuse facilities that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Faith based organizations that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.

- € Worksites that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Prisons that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Group homes that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Government agencies that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Military facilities that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Veteran facilities that develop and implement a healthy cooking and/or nutrition curriculum from 0 to target.
- € Other—<please specify>

Estimated number of people reached	€	K-12 schools estimated reach:
by the intervention	€	Outside of school care providers estimated reach:
	€	Substance abuse facilities estimated reach:
	€	Faith based organizations estimated reach:
	€	Worksites estimated reach:
	€	Prisons estimated reach:
	€	Group homes estimated reach:
	€	Government agencies estimated reach:
	€	Military facilities estimated reach:
	€	Veteran facilities estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	K-12 schools reach calculation:
	€	Outside of school care providers reach calculation:
	€	Substance abuse facilities reach calculation:
	€	Faith based organizations reach calculation:
	€	Worksites reach calculation:
	€	Prisons reach calculation:
	€	Group homes reach calculation:
	€	Government agencies reach calculation:
	€	Military facilities reach calculation:
	€	Veteran facilities reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary	Secondary Objective A.16							
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures			
Number	Title			Date				

A.16.1			
A.16.2			
A.16.3			
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A.16.9			
A.16.10			

Primary Objective B: Increase the number of people in <target community> with improved access to opportunities for chronic disease prevention, risk reduction or management through community and clinical linkages from <u>0</u> to <u>target</u> by the end of the project period.

Secondary Objective B.1: Increase the number of new:

- € Dental offices referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Hospitals referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.

- € Mental illness providers referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Pharmacies referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Primary care providers referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € K-12 schools referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Outside of school care providers referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Group homes referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Government agencies referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Military facilities referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Veteran facilities referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Faith based organizations referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Cities referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Counties referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Non-profit organizations referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Worksites referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Farmers' markets referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Grocery stores referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.
- € Other—<please specify> referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.

Estimated number of people reached	€	Dental offices estimated reach:
by the intervention	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	K-12 schools estimated reach:
	€	Outside of school care providers estimated reach:
	€	Group homes estimated reach:
	€	Government agencies estimated reach:

	€	Military facilities estimated reach:
	€	Veteran facilities estimated reach:
	€	Faith based organizations estimated reach:
	€	Cities estimated reach:
	€	Counties estimated reach:
	€	Non-profit organizations estimated reach:
	€	Worksites estimated reach:
	€	Farmers' markets estimated reach:
	€	Grocery stores estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	Dental offices reach calculation:
	€	Hospitals reach calculation:
	€	Mental illness providers reach calculation:
	€	Pharmacies reach calculation:
	€	Primary care providers reach calculation:
	€	K-12 schools reach calculation:
	€	Outside of school care providers reach calculation:
	€	Group homes reach calculation:
	€	Government agencies reach calculation:
	€	Military facilities reach calculation:
	€	Veteran facilities reach calculation:
	€	Faith based organizations reach calculation:
	€	Cities reach calculation:
	€	Counties reach calculation:
	€	Non-profit organizations reach calculation:
	€	Worksites reach calculation:
	€	Farmers' markets reach calculation:
	€	Grocery stores reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary	Secondary Objective B.1							
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures			
Number	Title			Date				

B.1.1			
B.1.2			
B.1.3			
B.1.4			
B.1.5			
B.1.6			
B.1.7			
B.1.8			
B.1.9			
B.1.10			

Secondary Objective B.2: Increase the number of WIC agencies reimbursed by Medicaid and/or private insurance for (a) nutrition services				
provided by nutrition staff (including we	eight management, diabetes management, etc.), (b) breastfeeding services provided by WIC staff, and/or			
(c) new chronic disease prevention and	management services that already have existing billing codes in the target community from 0 to target.			
Estimated number of people reached				
by the intervention				
Description of reach calculation				

Secondar	Secondary Objective B.2						
Activity Number	Activity Title	Description of Activity	Start Date	Completion Date	Outputs/Measures		
B.2.1							
B.2.2							
B.2.3							
B.2.4							
B.2.5							
B.2.6							
B.2.7							
B.2.8							
B.2.9							
B.2.10							

Secondary Objective B.3: Increase the number of new:

- € Dental offices that are integrated into a strong referral network* in the target community from 0 to target.
- € Hospitals that are integrated into a strong referral network* in the target community from 0 to target.

- € Mental illness providers that are integrated into a strong referral network* in the target community from 0 to target.
- € Pharmacies that are integrated into a strong referral network* in the target community from 0 to target.
- € Primary care providers that are integrated into a strong referral network* in the target community from 0 to target.
- € K-12 schools that are integrated into a strong referral network* in the target community from 0 to target.
- € Outside of school care providers that are integrated into a strong referral network* in the target community from 0 to target.
- € Group homes that are integrated into a strong referral network* in the target community from 0 to target.
- € Government agencies that are integrated into a strong referral network* in the target community from 0 to target.
- € Military facilities that are integrated into a strong referral network* in the target community from 0 to target.
- € Veteran facilities that are integrated into a strong referral network* in the target community from 0 to target.
- € Faith based organizations that are integrated into a strong referral network* in the target community from 0 to target.
- € Cities that are integrated into a strong referral network* in the target community from 0 to target.
- € Counties that are integrated into a strong referral network* in the target community from 0 to target.
- € Non-profit organizations that are integrated into a strong referral network* in the target community from 0 to target.
- € Worksites that are integrated into a strong referral network* in the target community from 0 to target.
- € Farmers' markets that are integrated into a strong referral network* in the target community from 0 to target.
- € Grocery stores that are integrated into a strong referral network* in the target community from 0 to target.
- € WIC agencies that are integrated into a strong referral network* in the target community from 0 to target.
- € Other—<please specify> that are integrated into a strong referral network* in the target community from 0 to target.

*Integrating into a strong referral network can include the following activities: Developing and disseminating new tools or resources designed to improve awareness of available chronic disease prevention and management services in the community; enhancing the WIC referral list with new community-based chronic disease prevention and management services; increasing the number of community partners that sign clients up for WIC; increasing the number of community partners (including WIC) that refer and/or sign families up for healthcare; increasing the number of community partners that refer families to other chronic disease prevention and management services in the community; and increasing the number of community partners (including WIC) that offer new chronic disease prevention and management services.

Estimated number of people reached	€	Dental offices estimated reach:
by the intervention	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	K-12 schools estimated reach:
	€	Outside of school care providers estimated reach:

€	Group homes estimated reach:
€	Government agencies estimated reach:
€	Military facilities estimated reach:
€	Veteran facilities estimated reach:
€	Faith based organizations estimated reach:
€	Cities estimated reach:
€	Counties estimated reach:
€	Non-profit organizations estimated reach:
€	Worksites estimated reach:
€	Farmers' markets estimated reach:
€	Grocery stores estimated reach:
€	WIC agencies estimated reach:
€	Other— <please specify=""> estimated reach:</please>
€	Dental offices reach calculation:
€	Hospitals reach calculation:
€	Mental illness providers reach calculation:
€	Pharmacies reach calculation:
€	Primary care providers reach calculation:
€	K-12 schools reach calculation:
€	Outside of school care providers reach calculation:
€	Group homes reach calculation:
€	Government agencies reach calculation:
€	Military facilities reach calculation:
€	Veteran facilities reach calculation:
€	Faith based organizations reach calculation:
€	Cities reach calculation:
€	Counties reach calculation:
€	Non-profit organizations reach calculation:
€	Worksites reach calculation:
€	Farmers' markets reach calculation:
€	Grocery stores reach calculation:
€	WIC agencies reach calculation:
€	Other— <please specify=""> reach calculation:</please>

Secondary Objective B.3						
Activity Number	Activity Title	Description of Activity	Start Date	Completion Date	Outputs/Measures	
B.3.1						
B.3.2						
B.3.3						
B.3.4						
B.3.5						
B.3.6						
B.3.7						
B.3.8						
B.3.9						
B.3.10						

Secondary Objective B.4: Increase the number of new:

- € Dental offices that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.
- € Hospitals that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to

target.

- € Mental illness providers that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.
- € Pharmacies that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.
- € Primary care providers that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.
- € Other—<please specify> that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.

11 11 11 011				
Estimated number of people reached	€	Dental offices estimated reach:		
by the intervention	€	Hospitals estimated reach:		
	€	Mental illness providers estimated reach:		
	€	Pharmacies estimated reach:		
	€	Primary care providers estimated reach:		
	€	Other— <please specify=""> estimated reach:</please>		
Description of reach calculation	€	Dental offices reach calculation:		
	€	Hospitals reach calculation:		
	€	Mental illness providers reach calculation:		
	€	Pharmacies reach calculation:		
	€	Primary care providers reach calculation:		
	€	Other— <please specify=""> reach calculation:</please>		

Secondary Objective B.4						
Activity	Description of Activity	Start Date	Completion	Outputs/Measures		
Title			Date			
	·					
		Activity Description of Activity	Activity Description of Activity Start Date	Activity Description of Activity Start Date Completion		

B.4.4			
B.4.5			
B.4.6			
B.4.7			
B.4.8			
B.4.9			
B.4.10			

Secondary Objective B.5: Increase the number of:

- € Dental offices with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Hospitals with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Mental illness providers with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Pharmacies with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Primary care providers with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € K-12 schools with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Outside of school care providers with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community

chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.

- € Group homes with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Government agencies with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Military facilities with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Veteran facilities with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Faith based organizations with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Non-profit organizations with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Worksites with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.
- € Other—<please specify> with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.

Estimated number of people reached	€	Dental offices estimated reach:
by the intervention	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	K-12 schools estimated reach:
	€	Outside of school care providers estimated reach:
	€	Group homes estimated reach:
	€	Government agencies estimated reach:
	€	Military facilities estimated reach:
	€	Veteran facilities estimated reach:
	€	Faith based organizations estimated reach:
	€	Non-profit organizations estimated reach:
	€	Worksites estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation		Dental offices reach calculation:

€	Hospitals reach calculation:
	•
€	Mental illness providers reach calculation:
€	Pharmacies reach calculation:
€	Primary care providers reach calculation:
€	K-12 schools reach calculation:
€	Outside of school care providers reach calculation:
€	Group homes reach calculation:
€	Government agencies reach calculation:
€	Military facilities reach calculation:
€	Veteran facilities reach calculation:
€	Faith based organizations reach calculation:
€	Non-profit organizations reach calculation:
€	Worksites reach calculation:
€	Other— <please specify=""> reach calculation:</please>

Secondary Objective B.5						
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		
B.5.1						
B.5.2						
B.5.3						
B.5.4						
B.5.5						
B.5.6						

B.5.7			
B.5.8			
B.5.9			
B.5.10			

Secondary Objective B.6: Increase the number of:

- € Dental offices with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Hospitals with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Mental illness providers with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Pharmacies with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Primary care providers with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € K-12 schools with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Outside of school care providers with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- \in Group homes with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Government agencies with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Military facilities with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Veteran facilities with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Faith based organizations with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Non-profit organizations with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Worksites with providers and/or staff that receive cultural competency training in the target community from 0 to target.
- € Other—<please specify> with providers and/or staff that receive cultural competency training in the target community from 0 to target.

Estimated number of people reached	€	Dental offices estimated reach:
by the intervention	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	K-12 schools estimated reach:
	€	Outside of school care providers estimated reach:
	€	Group homes estimated reach:
	€	Government agencies estimated reach:
	€	Military facilities estimated reach:
	€	Veteran facilities estimated reach:
	€	Faith based organizations estimated reach:
	€	Non-profit organizations estimated reach:
	€	Worksites estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	Dental offices reach calculation:
	€	Hospitals reach calculation:
	€	Mental illness providers reach calculation:
	€	Pharmacies reach calculation:
	€	Primary care providers reach calculation:
	€	K-12 schools reach calculation:
	€	Outside of school care providers reach calculation:
	€	Group homes reach calculation:
	€	Government agencies reach calculation:
	€	Military facilities reach calculation:
	€	Veteran facilities reach calculation:
	€	Faith based organizations reach calculation:
	€	Non-profit organizations reach calculation:
	€	Worksites reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary Objective B.6					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures

Number	Title		Date	
B.6.1				
B.6.2				
B.6.3				
B.6.4				
B.6.5				
B.6.6				
B.6.7				
B.6.8				
B.6.9				
B.6.10				

Secondary Objective B.7: Increase the number of new:

- € Dental offices that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.
- € Health insurance companies that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.
- € Hospitals that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and

neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.

- € Mental illness providers that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.
- € Pharmacies that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.
- € Primary care providers that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.
- € Other—<please specify> that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.

and heighborhood wandsmey)	4411116	the medical mistory intake with patients, in the target community from 6 to target.
Estimated number of people reached	€	Dental offices estimated reach:
by the intervention	€	Health insurance companies estimated reach:
	€	Hospitals estimated reach:
	€	Mental illness providers estimated reach:
	€	Pharmacies estimated reach:
	€	Primary care providers estimated reach:
	€	Other— <please specify=""> estimated reach:</please>
Description of reach calculation	€	Dental offices reach calculation:
	€	Health insurance companies reach calculation:
	€	Hospitals reach calculation:
	€	Mental illness providers reach calculation:
	€	Pharmacies reach calculation:
	€	Primary care providers reach calculation:
	€	Other— <please specify=""> reach calculation:</please>

Secondary	Secondary Objective B.7					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures	
Number	Title			Date		
B.7.1						
B.7.2						
317.12						

B.7.3			
B.7.4			
B.7.5			
B.7.6			
B.7.7			
B.7.8			
B.7.9			
B.7.10			

Secondary Objective B.8: Increase the r	number of:	
€ Cities with improved public tra	nsportation options for accessing chronic disease prevention and management services in the target	
community from 0 to target.		
€ Counties with improved public	transportation options for accessing chronic disease prevention and management services in the target	
community from 0 to target.		
Estimated number of people reached	€ Cities estimated reach:	
by the intervention		
Description of reach calculation	€ Cities reach calculation:	
€ Counties reach calculation:		

Secondary Objective B.8					
Activity	Activity	Description of Activity	Start Date	Completion	Outputs/Measures
Number	Title			Date	

B.8.1			
B.8.2			
B.8.3			
B.8.4			
B.8.5			
B.8.6			
B.8.7			
B.8.8			
B.8.9			
B.8.10			

Primary Objective C: Increase the number of **public** and **partner messages** showcasing CPHMC project efforts and achievements from $\underline{0}$ to $\underline{24}$ by the end of the project period.

Secondary Objective C.1: Increase the r	Secondary Objective C.1: Increase the number of public messages on CPHMC efforts and achievements from 0 to 12 by the end of the project			
period.				
Write a short narrative about how				
the activities will result in achieving				

this secondary objective.	

Secondary Objective C.1						
Activity Number	Communication Activity Title	Description of Activity	Start Date	Completion Date	Media Type (Television, Radio, Print, Social Media, Outdoor, Other)	Circulation/ Viewers/ Listeners/ Followers/ Subscribers
C.1.1						
C.1.2						
C.1.3						
C.1.4						
C.1.5						
C.1.6						
C.1.7						
C.1.8						
C.1.9						
C.1.10						

Secondary Objective C.2: Increase the number of partner messages on CPHMC efforts and achievements from 0 to 12 by the end of the project				
period.				
Write a short narrative about how				
the activities will result in achieving				
this secondary objective.				

Secondary Objective C.2						
Activity Number	Communication Activity Title	Description of Activity	Start Date	Completion Date	Partner Media Type (Email listserv/ newsletter, Blog, Social Media)	Circulation/ Followers/ Subscribers
C.2.1						
C.2.2						
C.2.3						
C.2.4						
C.2.5						
C.2.6						
C.2.7						
C.2.8						

C.2.9		
C.2.10		

Appendix A: Secondary Objectives List

Secondary Objectives Related to Primary Objective A:

Secondary Objective A.1: Increase the number of [grocery stores; convenience stores; food banks; mobile grocers] that sell healthy foods and/or expand their inventory of healthy foods in the target community from 0 to target.

Secondary Objective A.2: Increase the number of [grocery stores; convenience stores; food banks] with new on-site and in-store placement and promotion strategies for healthy foods in the target community from 0 to target.

Secondary Objective A.3: Increase the number of new [grocery stores; convenience stores; farmers' markets; other—mobile grocers] that accept WIC in the target community from 0 to target.

Secondary Objective A.4: Increase the number of new [grocery stores; convenience stores; farmers' markets; other—mobile grocers] that accept SNAP in the target community from 0 to target.

Secondary Objective A.5: Increase the number of new [grocery stores; convenience stores; farmers' markets; other—mobile grocers] that offer cash or coupon incentives for purchase of healthy foods in the target community from 0 to target.

Secondary Objective A.6: Increase the number of new [farmers' markets; food banks; other—mobile grocers] in the target community from 0 to target.

Secondary Objective A.7: Increase the number of [restaurants/bars; hospitals; other—please specify] with new healthy menu options and/or using nutrition labeling to identify healthy menu options in the target community from 0 to target.

Secondary Objective A.8: Increase the number of new K-12 schools that implement healthy vending and concession practices in the target community from 0 to target.

Secondary Objective A.9: Increase the number of new K-12 schools that make plain drinking water available throughout the day at no cost to students in the target community from 0 to target.

Secondary Objective A.10: Increase the number of new [hotels/motels; entertainment venues; grocery stores; restaurants/bars; other—please specify] that publicly promote/welcome breastfeeding in the target community from 0 to target.

Secondary Objective A.11: Increase the number of new [K-12 schools; outside of school care providers; dental offices; hospitals; mental illness providers; pharmacies; primary care providers; substance abuse facilities; faith based organizations; worksites; prisons; group homes; government agencies; military facilities; veteran facilities; other—please specify] that develop and/or implement policies to support breastfeeding in the target community from 0 to target.

Secondary Objective A.12: Increase the number of new community gardens and/or increase the number of existing community gardens that are strengthened in the target community from 0 to target.

Secondary Objective A.13: Increase the number of [cities; counties] with improved public transportation options for accessing healthy food and beverage environments in the target community from 0 to target.

Secondary Objective A.14: Increase the number of [outside of school care providers; group homes; other—please specify] that offer healthy food and beverage options in the target community from 0 to target.

Secondary Objective A.15: Increase the number of [K-12 schools; other—please specify] that increase SNAP enrollment from 0 to target.

Secondary Objectives Related to Primary Objective B:

Secondary Objective B.1: Increase the number of new [dental offices; hospitals; mental illness providers; pharmacies; primary care providers; K-12 schools; outside of school care providers; group homes; government agencies; military facilities; veteran facilities; faith based organizations; cities; counties; non-profit organizations; worksites; farmer's markets; grocery stores; other—please specify] referring and/or signing patients up for Medicaid and/or private insurance in the target community from 0 to target.

Secondary Objective B.2: Increase the number of new [other—WIC agencies] reimbursed by Medicaid and/or private insurance for (a) nutrition services provided by nutrition staff (including weight management, diabetes management, etc.), (b) breastfeeding services provided by WIC staff, and/or (c) new chronic disease prevention and management services that already have existing billing codes in the target community from 0 to target.

Secondary Objective B.3: Increase the number of new [dental offices; hospitals; mental illness providers; pharmacies; primary care providers; K-12 schools; outside of school care providers; group homes; government agencies; military facilities; veteran facilities; faith based organizations; cities; counties; non-profit organizations; worksites; farmer's markets; grocery stores; WIC agencies; other—please specify] that are integrated into a strong referral network* in the target community from 0 to target.

*Integrating into a strong referral network can include the following activities: Developing and disseminating new tools or resources designed to improve awareness of available chronic disease prevention and management services in the community; enhancing the WIC referral list with new community-based chronic disease prevention and management services; increasing the number of community partners that sign clients up for WIC; increasing the number of community partners that refer clients to WIC; increasing the number of community partners (including WIC) that refer and/or sign families up for healthcare; increasing the number of community partners that refer families to other chronic disease prevention and management services in the community; and increasing the number of community partners (including WIC) that offer new chronic disease prevention and management services.

Secondary Objective B.4: Increase the number of new [dental offices; hospitals; mental illness providers; pharmacies; primary care providers; other—please specify] that make "prescriptions" for non-pharmaceutical interventions like exercise and WIC in the target community from 0 to target.

Secondary Objective B.5: Increase the number of [dental offices; hospitals; mental illness providers; pharmacies; primary care providers; K-12 schools; outside of school care providers; group homes; government agencies; military facilities; veteran facilities; faith based organizations; non-profit organizations; worksites; other—please specify] with providers and/or staff that receive basic training in (a) WIC services and benefits, (b) community chronic disease prevention and management services referrals, and/or (c) breastfeeding in the target community from 0 to target.

Secondary Objective B.6: Increase the number of [dental offices; hospitals; mental illness providers; pharmacies; primary care providers; substance abuse facilities; K-12 schools; outside of school care providers; group homes; government agencies; military facilities; veteran facilities; faith based organizations; non-profit organizations; worksites; other—please specify] with providers and/or staff that receive cultural competency training in the target community from 0 to target.

Secondary Objective B.7: Increase the number of new [dental offices; health insurance companies; hospitals; mental illness providers; pharmacies; primary care providers; other—please specify] that create and implement policies to assess for healthy behaviors, including access to fruits and vegetables and neighborhood walkability, during the medical history intake with patients, in the target community from 0 to target.

Secondary Objective B.8: Increase the number of [cities; counties] with improved public transportation options for accessing chronic disease prevention and management services in the target community from 0 to target.

Secondary Objectives Related to Primary Objective C:

Secondary Objective C.1: Increase the number of public messages on CPHMC efforts and achievements from 0 to 12 by the end of the project period.

Secondary Objective C.2: Increase the number of partner messages on CPHMC efforts and achievements from 0 to 12 by the end of the project period.

Appendix B: CAP Terms and Definitions

Activities allow you to break your secondary objectives down into achievable, measurable tasks with specific deadlines throughout the project period.

Activity Titles are the names of the measureable tasks to be completed to reach your secondary objectives.

Activity Descriptions are the more detailed steps for completing the activities.

Baseline is the starting point for your measurement of change. If you're introducing a new intervention, the baseline will be zero. If you are continuing work, you may need to spend time thinking about how to capture a starting point that will help you articulate what you are adding through this project.

Circulation/ Viewers/ Listeners/ Followers/ Subscribers describes the number of people who are likely to view the TV PSA, hear the radio piece, read the newspaper article or PSA, open the social media post, view the billboard, etc.

Interventions are the actual actions you will be taking in your community to meet your Primary Objectives.

Media Type describes the type of media you will use to reach your local community (i.e. television, radio, print media, social media, outdoor communications, etc.).

Messages are unique stories and or perspectives showcasing your project. Please note that each unique message may include several activities. For example, one story may result in 3 separate activities—being shared as a blog post, on Facebook, and on Twitter.

Output/Measures are the products of all your work. Each task will lead to something—and that something is what we will count and evaluate. In some cases, task outputs are clear numbers or a definitive product. But, in many cases, you will produce a range of output types and spend time building systems and relationships that aren't easy to quantify—and that's okay. We want to understand your work; a more complete picture is a more realistic picture, even if it involves lots of different parts.

Partner is an audience type describing people who can be reached via partner communications networks such as email listservs.

Partner Media Type describes the type of media you will use to reach partners (this will almost always be a newsletter or email).

Primary Objectives describe the projected results of your three main strategies: Improving access to environments with healthy food and beverage options; improving opportunities for chronic disease prevention, risk reduction or management through community and clinical linkages; and increasing the number of public and partner messages showcasing CPHMC project efforts and achievements related to the first two strategies. Primary objectives will determine total reach of project activities. Please keep in mind that each local agency should plan to reach at least 50% of their geographic population.

Public is an audience type describing your local community, which can be reached via television, radio, print media, social media (Facebook, Twitter, etc.), outdoor communications (such as billboards), and other media mechanisms.

Secondary Objectives describe the interventions that fall into these three categories of primary objectives; these interventions will help you achieve your primary objectives. The sum of the reach of the secondary objectives, accounting for overlap, should equal the total projected reach of each corresponding primary objective. You will regularly keep track of progress towards your secondary objectives to calculate your progress towards the primary objectives.

Reach is an estimate of the number of unique individuals you impact in a certain geographic region, in your case the "target community." All local agencies are working in the community setting and are defining reach by jurisdiction (county, city, municipality or neighborhood). Reach only counts one person one time. Reach will never be more than the total population of your settings. For this project, you are required to reach 50% of the target community.

Settings are where the work takes place. All projects have a designated geographic area and are working in the community at a jurisdiction level (county, city, municipality or neighborhoods). Settings could include more specific places (schools, worksites, hospitals, or childcare centers), depending on your particular project goals.

Start Date/Completion Date should be reported in terms of Quarter/Year. In other words: Q3/2016: April-June 2016; Q4/2016: July-Sept 2016; Q1/2017: Oct-Dec 2016; Q2/2017: Jan-Mar 2017; Q3/2017: Apr-June 2017.

Target is the ending point for your measurement of change and is meant to capture a realistic estimate of growth during the project period.

Target Community is the overall defined geographic area for the project.