

# DNPAO State Program Highlights

## Applying Nutrition Policies in Child Care, School, and Worksite Settings



### State-Based Programs

The Nutrition, Physical Activity, and Obesity Program (NPAO) is a cooperative agreement between the CDC's Division of Nutrition, Physical Activity and Obesity (DNPAO) and 25 state health departments. The program goal is to prevent and control obesity and other chronic diseases through healthful eating and physical activity.

### DNPAO Target Areas

The state programs develop strategies to leverage resources and coordinate statewide efforts with multiple partners to address all of the following DNPAO principal target areas:

- Increase physical activity
- Increase the consumption of fruits and vegetables
- Decrease the consumption of sugar sweetened beverages
- Increase breastfeeding initiation, duration, and exclusivity
- **Reduce the consumption of high-energy-dense foods**
- Decrease television viewing

### Strategies Related to Energy Density

DNPAO developed six guidance documents to provide assistance and direction regarding each of the principal target areas. The guidance document developed to reduce the consumption of high-energy-dense foods includes the following strategies:

- Promote menu labeling in restaurants
- Support restaurant programs that offer and promote healthier food choices
- Improve supermarket access in underserved areas
- Improve existing small stores in underserved areas
- **Ensure that students have only appealing, healthy choices in foods and beverages offered outside of the school meals program**
- Expand curriculum-based strategies that support nutrition standards
- **Ensure that regulations, policies, and legislation at all levels promote healthier foods in child care settings**
- **Promote healthier foods at workplace cafeterias, in workplace vending machines, and at meetings and conferences**

### Applying Nutrition Policies in Child Care, School, and Worksite Settings

Strategies on applying nutrition policies for the reduced consumption of high-energy-dense foods have been identified for specific settings for obesity prevention. These settings include child care, school, and worksite settings. These types of strategies include establishing policies and practices to improve food and beverages offerings in all licensed child care providers; limiting competitive foods offered at schools; and increasing the availability and promotion of healthier foods in worksite cafeterias and vending machines.

### State Activities Applying Nutrition Policies in Child Care, School, and Worksite Settings

#### Child Care Settings

#### Colorado

##### Child Care Champions Best Practices

The Colorado Early Childhood Task Force, a coalition of community and state partners facilitated by the Colorado Department of Public Health and Environment, created *The Child Care Champions Best Practices* guidebook to encourage the best possible environment for the health and well-being of children in child care or family day care settings. The guidebook is accompanied by an online self-assessment that delivers reports and suggested resources tailored to the assessment results.

The guidebook addresses nutrition, physical activity, and breastfeeding and includes the following best practices: (1) model healthy eating behaviors; (2) integrate nutrition and physical activity into the teaching and child care environment; (3) practice the "division of responsibility" in feeding, a method which allows children to stay in touch with their internal hunger cues; (4) provide the best start for infant feeding, including breastfeeding, developmentally appropriate first foods, and recognition of hunger and satiety; (5) engage caregivers and parents through involvement, education, and guidance; (6) use the environment

effectively to promote physical activity and free play; and (7) plan menus and meals with the child's nutritional needs in mind; therefore, promoting physical, social, emotional, and cognitive development. The online assessment includes specific questions to evaluate the status of the center or home and provides guidance on program development and training needs. Partners of the task force also provide technical assistance and training on the best practices to various communities, local public health agencies, child care centers, and homes.

Since the development of these resources, more than 5,000 guidebooks and self-assessments were distributed in 3 states to monitor program and policy change related to child care. In addition, the principles of the guidebook were used to facilitate the changes in the Colorado licensing standards for child care homes in 2009.

#### Colorado Contact

Shana Patterson, RD  
Nutrition Coordinator  
Colorado Physical Activity and Nutrition Program  
(303) 692-2572  
[shana.patterson@state.co.us](mailto:shana.patterson@state.co.us)

#### Michigan

##### Nutrition and Physical Activity Self-Assessment for Child Care in Head Start

The Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) program is a national intervention designed to enhance policies, practices, and environments in child care by improving the nutritional quality of food served; the amount of quality physical activity; staff-child interactions; and facility nutrition and physical activity policies, practices, and related environmental characteristics. The program includes a self-assessment where child care centers identify their strengths and needs for improvement, goal setting and action planning, continuing education for child care providers, technical assistance and consultation, and follow-up and reinforcement.



Created August 2010



The Nutrition, Physical Activity, and Obesity Program at the Michigan Department of Community Health partnered with the National Kidney Foundation of Michigan and the Head Start Agency of Detroit to assess the nutrition and physical activity policies, practices, and overall environment of Head Start child care centers and create an action plan for each center. Using the NAP SACC action plans, every participating Head Start center established policy and environmental changes and demonstrated success in fulfilling all seven goals within the plan. As a result of the program, Head Start centers now only offer sweets and salty snacks less than once a week in comparison to 3–4 times a week previously. In addition, drinking water is now more visible and available for children to serve themselves both inside and outside of the child care center.

In the 2008–2009 school year, 12 Head Start centers in Detroit piloted the NAP SACC program and impacted about 1,000 children aged 2 to 5 years, 98% of whom were African-American. More recently in the 2009–2010 school year, NAP SAC was offered in 45 child care centers across Oakland and Wayne counties as well as the city of Detroit, impacting more than 5,000 children.

#### Michigan Contact

Sia Matturi  
Physical Activity Coordinator  
Michigan Department of Community Health  
(517) 335-9670  
[matturis@michigan.gov](mailto:matturis@michigan.gov)  
<http://www.michigan.gov/preventobesity>

## New York

### Improvements to the New York Child and Adult Care Food Program in Child Care Centers

The New York Child and Adult Care Food Program (CACFP) revised the federally-regulated meal patterns to reflect evidence-based data on food practices associated with a reduced risk of obesity. As a result, required and recommended changes were established to improve menus in CACFP participating child care centers and family day care settings.

The mandated changes that were established include the following:

- Fat-free or low-fat milk for children older than 2 years of age.
- Flavored milk no longer allowed for preschool children.
- Child care menus must specify the type of milk being served.
- No more than one serving of fruit or vegetable juice permitted per day, which must be served in a cup for children older than 8 months of age.

- Yogurt must be fat-free or low-fat and prepared without artificial sweeteners.
- Sweet grain products may not be served more than twice per week and may not be served at lunch or supper.

Additional recommended changes that were created include the following:

- Unflavored milk for all children.
- Breads and cereals should be whole grain.
- Limited servings of high-fat and processed meats and cheeses.

As a result of these efforts, many of these mandates and recommendations have been implemented and participating child care and family day care centers have been trained on healthy meal patterns. Enforcing these policies among all child care and family day care centers has been delayed to allow participating programs ample time to incorporate the required changes into their menu planning.

#### New York Contact

Lynne Oudekerk  
Acting State CACFP Director  
New York State Department of Health  
(518) 402-7287  
[lmo01@health.state.ny.us](mailto:lmo01@health.state.ny.us)  
<http://www.health.state.ny.us/prevention/nutrition/cacfp>

## South Carolina

### Nutrition and Physical Activity Self-Assessment for Child Care Pilot Project

The South Carolina Department of Health & Environmental Control in conjunction with the South Carolina Department of Social Services ABC Child Care Program, implemented a pilot demonstration of the NAP SACC program in five child care centers located in the northwest region of the state. The ABC Child Care Voucher Program is a statewide initiative that delivers child care services and makes payments to child care providers so parents can work or attend school.

The NAP SACC program is a self-assessment that allows child care centers to assess how well their current nutrition and physical activity policies and practices compare to best practices for nutrition and physical activity in child care settings. Using regional health department staff as NAP SACC consultants, the pilot child care center directors and their staff were asked to complete the initial self-assessment addressing 56 nutrition and physical activity best practices; develop goals and action planning documents; implement goals; and complete a final reassessment. Through this process, the 5 child care centers identified at least one nutrition and one physical activity-related policy or environmental change to implement in their center.

Some changes made include the following:

- Replacing 2% milk with skim or 1% milk.
- Replacing sweets with fruits and vegetables for celebrations.
- Replacing ground beef with ground turkey.
- Replacing juice with water or limiting juice servings to less than 4 times per week.

This project established and strengthened partnerships between the Department of Health & Environmental Control, the South Carolina Department of Social Services, and the ABC Child Care Program. Future plans include evaluating the feasibility of incorporating the NAP SACC best practices into the ABC Child Care Program standards, which would have statewide reach.

#### South Carolina Contact

Misty Pearson  
Early Childhood Program Coordinator  
South Carolina Department of Health & Environmental Control  
(803) 545-4479  
[pearsonmh@dhec.sc.gov](mailto:pearsonmh@dhec.sc.gov)

## School Settings

### Utah

#### Gold Medal School Program

The Utah Department of Health developed the Gold Medal Schools Program in 2001 to provide healthy nutrition options and improved physical activity in schools. The program used the Utah State Office of Education's core curriculum and the Center for Disease Control and Prevention's guidelines to address overweight and obesity in elementary schools as a framework for developing the program. The program encourages schools to make policy and environmental changes that support good nutrition, physical activity, and staying tobacco-free.

The Utah Department of Health administers the program; provides resources, webinars, and technical assistance to schools on policy development and implementation; and provides financial incentives to participating schools. Schools have the opportunity to work toward achieving bronze, silver, gold, platinum, or platinum focus awards, which differ according to the level of success at policy development. Some examples of recommended school policies include the following:

- Write a policy that requires healthy food and beverage choices to be available whenever food is available outside of school meal services.
- Write a policy for all teachers, faculty, and staff that food is not to be used as a reward or as a punishment.
- Require all organizations to raise funds by selling only non-food items.

Schools are awarded a cash prize for each level achieved. Bronze schools receive \$200, silver schools receive \$300, gold schools receive \$500, platinum schools receive \$300, and platinum focus schools receive \$200, for a total of \$1,500 if a school completes all of the levels. This money can be used to purchase nutrition resources, physical education equipment, or tobacco prevention materials.

In order for schools to participate in the program, they must have a representative serve as a school coordinator who is trained to help their school reach their desired award level. The principal must also demonstrate support of the program and work with the school coordinator to facilitate program efforts.

As a result of these efforts, the gold medal schools program has reached more than 200,015 students and more than 8,123 teachers in 374 schools—representing 63% of public elementary schools and 65% of Title 1 schools in the state. In addition, since the program began, about 300 schools have implemented a non-food reward policy and 132 schools have completed a non-food fundraising criterion.

#### **Utah Contact**

Sarah Rigby  
Gold Medal Schools Program Coordinator  
Utah Department of Health  
(801) 538-9454  
[sirgby@utah.gov](mailto:sirgby@utah.gov)  
<http://www.health.utah.gov/obesity/qms>

## **Worksite Settings**

### **Iowa**

#### **Nutrition Environment Measures Survey: Vending**

In 2009, the Iowa Department of Public Health, the Iowa State University Extension, and Iowans Fit for Life, worked collaboratively to develop the Nutrition Environment Measurement Survey-Vending (NEMS-V) to evaluate the worksite vending machine environment. The survey builds upon the nationally recognized Nutrition Environment Measurement Survey (NEMS) developed at Emory University, which assesses the availability of healthy food and beverage options in grocery stores, convenience stores, and restaurants.

The NEMS-V assessment is intended to provide a visual depiction of an individual vending machine in schools or worksites showing green-, yellow-, or red-coded foods and beverages based on the Institute of Medicine Nutrition Standards for Foods in Schools with modifications from Iowa's Healthy Kids Act and for adult consumers. The assessment also provides an award certificate for each machine and the location

as a whole (bronze award if at least 30% of the food or beverage choice are yellow or green; silver award if at least 40% are yellow or green; gold award if at least 50% are yellow or green and without unhealthy advertising); and generates a report card for each machine and location as a whole. The report card indicates how many food and beverage items need to be changed to green or yellow choices to earn a bronze, silver, or gold award and provides a checklist of action steps for making healthier choices available in vending machines. A Web site was also developed to showcase the NEMS-V tools, directions, supplemental materials, and a healthy choices calculator for determining color coding for foods and beverages.

The development of the NEMS-V has resulted in several accomplishments. The Iowa Department of Public Health has used the NEMS-V tools to assess vending machines in five buildings on the State Capitol. In addition, 5 NEMS trainings were conducted in April 2010 resulting in 55 additional raters in Iowa for all NEMS tools, including grocery stores, convenience stores, restaurants, and vending. In 2010, 24 mini-grants have been distributed to 18 Iowa counties to encourage the immediate utilization of the NEMS and NEMS-V tools.

Future plans for these efforts include the addition of sample vending machine policies to the NEMS-V Web site and the development of an online training webinar to inform vendors about the NEMS-V.

#### **Iowa Contact**

Carol Voss  
Nutrition Coordinator and Fruit and Vegetable Coordinator  
Iowa Department of Public Health  
(515) 242-5566  
[cvoss@idph.state.ia.us](mailto:cvoss@idph.state.ia.us)  
<http://www.nems-v.com>  
<http://www.idph.state.ia.us/iowansfitforlife>

## **Massachusetts**

### **Working on Wellness**

The Massachusetts Department of Public Health developed and implemented the "Working on Wellness" program that includes a "Working on Wellness Toolkit" to help employers develop a workplace infrastructure to support a wellness program. The Toolkit recommends that companies and worksites get buy-in from the company CEO, identify a wellness champion, establish a worksite wellness team, assess workplace policies and environments, and consider the health status and needs of employees.

The Toolkit dedicates one section to nutrition programs, resources, sample policies related to accessing healthy foods, and recommendations for food program guidelines. Some of these recommendations

include establishing healthy food and beverage purchase guidelines for the organization's funded meetings, trainings, and events; requiring the purchase of locally produced food including fruits and vegetables; implementing a policy that promotes healthy snacks in vending machines and company concession stands; transitioning to using only non-saturated and trans fat-free cooking oils in foods; and purchasing low-fat and non-fat dairy and meat products. This section also provides programmatic ideas for companies and organizations to consider, including arranging for onsite brown bag "Lunch and Learn" seminars with dietitians and health educators; arranging an onsite Weight Watchers program for employees interested in losing or maintaining weight; and implementing a program that helps employees identify low-cost healthier food options through point-of-purchase nutrition information on menu items in cafeterias or vending machines.

To date, 29 employers have been recruited to participate in the "Working on Wellness" Program and use the Toolkit in developing their wellness initiatives; the program has reached more than 30,000 employees. To implement the Toolkit, employers are required to participate in a year-long training and technical assistance program which includes 4 in-person trainings, bi-monthly teleconferences with experts in the field, regular technical assistance sessions, and participation in an evaluation. The evaluation includes a baseline environmental scan, where employers are asked to implement at least one new policy and one environmental change that supports healthy living among their employees, as well as a baseline survey of all participating employees.

Since the development of the Toolkit, several accomplishments to date have been reported:

- One worksite adopted a healthy catering policy for all events that serve refreshments.
- One worksite modified their vending machine selections to increase the number of low-fat and low-calorie options.
- Overall, participating employees reduced their cholesterol from 23% to 16%, reduced their stress level, and lost weight.
- Fifty-percent of participating employees believed that their employer was committed to the health and safety of the workforce, in comparison to 41% from the previous year.

Future plans for the program include continued recruitment of employers to participate in the "Working on Wellness" program. In addition, the Massachusetts Department of Public Health plans to support employers that participated in the year-long training by encouraging ongoing networking, facilitating the exchange of information and resources, and supporting the sustainability of the program.

**Massachusetts Contact**

Maria Bettencourt  
Wellness Director  
Division of Prevention and Wellness  
Massachusetts Department of Public Health  
(617) 624-5470  
[maria.bettencourt@state.ma.us](mailto:maria.bettencourt@state.ma.us)  
<http://www.mass.gov/massinmotion>

**Need more information?**

Visit the CDC DNPAO website to learn more information about our funded state programs:

<http://www.cdc.gov/obesity/stateprograms/index.html>