



2016

Community Health Improvement Plan



Introduction

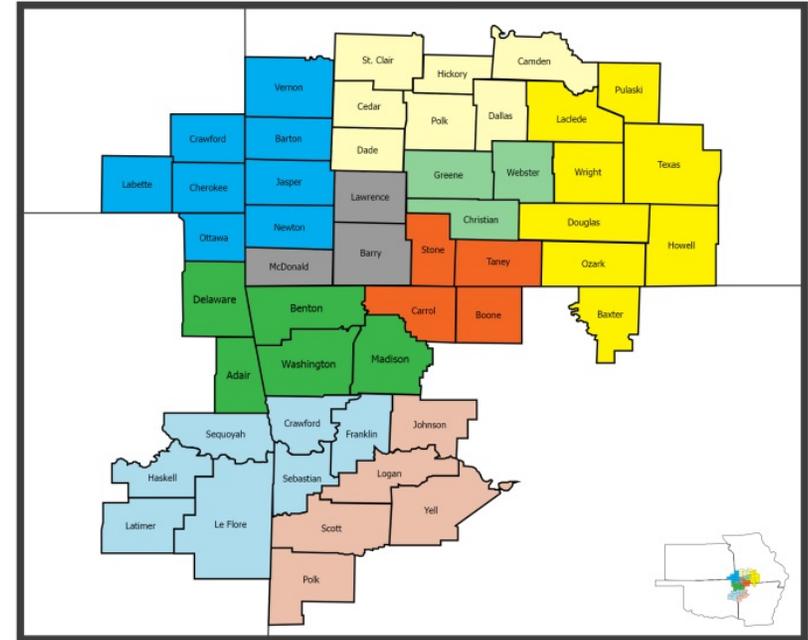
In early 2015, a variety of organizations across the Ozarks came together to better understand and improve the health status, behaviors and needs of the populations they serve. Under the umbrella of the local Ozarks Health Commission (OHC), this first-time collaboration is the largest in the region spanning four states—Missouri, Oklahoma, Arkansas and Kansas—51 counties and four hospital systems. The working group saw the value of using a systematic, data-driven assessment to inform decisions and guide efforts to improve community health and wellness on a regional level. This larger, concerted approach leverages common strengths and strategies to move in the same direction on significant health concerns. The Regional Health Assessment, as well as resulting action plans, will allow decision-makers to have a more holistic approach to strategically address community health concerns in their own jurisdictions.

Key participants in Ozarks Health Commission from the Springfield Community include: Burrell Behavioral Health, CoxHealth, Mercy, and the Springfield-Greene County Health Department.

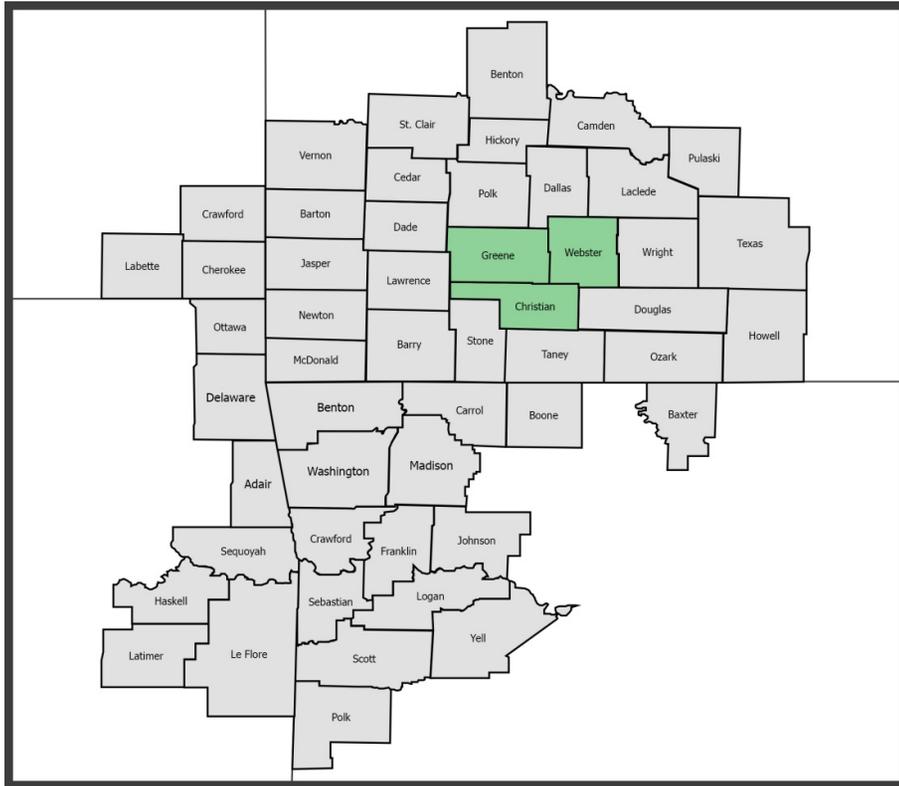
The priorities for each community emerged as a result of data and feedback collection from a variety of sources, including:

- a survey open to members of the public and partner agencies in all jurisdictions;
- secondary data collected from CommunityCommons.org and other sources;

Regional Communities Map



Community Name	Community Color	Population	Land Area Rank
Rogers Community	Green	532,979	4
Springfield Community	Light Green	401,235	8
Joplin Community	Blue	321,884	3
Fort Smith Community	Light Blue	321,835	2
Lebanon Community	Yellow	237,949	1
Bolivar Community	Light Yellow	150,662	5
Branson Community	Orange	150,076	7
Booneville Community	Light Orange	101,177	6
Monett Community	Grey	96,315	9



- focus groups targeting underserved, chronically ill and low-populations in each community; and
- emergency department (ED) data from hospital partners.

These sources were combined and compared to develop community priorities which weighed morbidity, mortality and a variety of other factors. More on the results of the survey, focus group, data analysis and priority ranking can be found in the Methodology section of the Regional Health Assessment report.

The Springfield Community includes Christian, Greene, and Webster Counties.

Findings

Health Priorities Identified

In the OHC Region, 34 indicators were examined and categorized into groupings of health issues referred to as the assessment's Assessed Health Issues (AHI). This process identified seven Assessed Health Issues (AHI) and several other groups of social determinants of health.

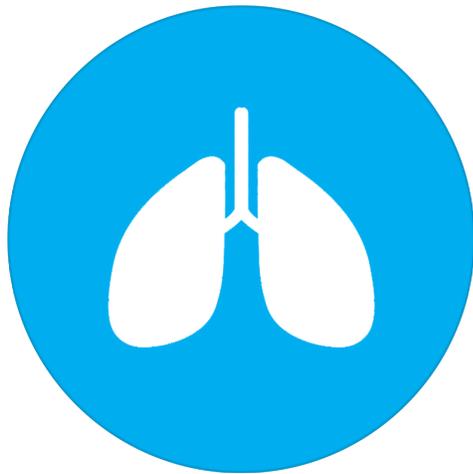
The committee then identified associated indicators and grouped them within the AHI.

For example, high blood pressure and cholesterol, as well as other health issues related to the cardiovascular system, were collapsed into "Cardiovascular Disease". If relevant, an indicator was used in multiple groupings. For instance, tobacco use was used in both

Lung Disease and Cancer. In addition, the list of poor-performing indicators for each Community was examined to identify other potential health issues. This process did not present any additional health issues. The AHI identified were:

- Cancer
- Cardiovascular Disease
- Lung Disease
- Oral Health
- Mental Health
- Maternal and Child Health
- Diabetes

The committee then developed an objective process for scoring the AHI. The scoring system included both key data points and community perspective, providing a more thorough examination of the AHI. The top three AHI that scored the highest, or are the most pressing issues for the Springfield Community, are:



Lung Disease



Cardiovascular Disease



Mental Health

In an effort to address health issues effectively, the top three ranked issues were selected as the health priorities. Although Cancer, Oral Health, Maternal and Child Health, and Diabetes were identified as health issues for the Springfield Community, resources would be diluted in an effort to address several health issues, thus minimizing the ability to create meaningful impact.

Common Threads



**Access to
Appropriate Care**



**Social
Determinants of
Health**



Tobacco Use



Mental Health



**Physical Activity
and Nutrition**

Throughout the assessment, common threads emerged that seemed to be factors affecting multiple health priority issues. These common threads were not explicitly included in the ranking process; however, strategies have been developed to address these issues with the understanding that by influencing these commonalities, multiple health priority issues will be addressed simultaneously. The Socioecological Model provides a framework justifying this approach. The Socioecological Model recognizes a wide range of factors work together to impact health. These factors exist at the individual, interpersonal, organizational, community, and policy levels.



Strategy to Improve Health Priority Issues

In order to address Cardiovascular Disease, Lung Disease and Mental Health, OHC partners sought to develop a comprehensive approach. The logic model outlined in the assessment provides guidance to the process and approach to improve the health priority issues.



The activities within the model is where there is a confluence of healthcare, public health and community partners to create both upstream and downstream strategies. Upstream strategies that are implemented by the community are more wide-reaching and focus on the common threads. These strategies will address the policy, community, and organizational levels of the Socioecological Model. These strategies will be coordinated by a community coalition, which includes both healthcare and public health. The downstream strategies, implemented by hospitals, focus on specific health issues in an effort to leverage and maximize existing hospital resources and programming. These strategies will address the organizational, interpersonal, and individual levels of the Socioecological Model. This structure provides a holistic approach to addressing the health priority issues and a more efficient means to improving the health priority issues.

This approach also recognizes that hospitals cannot address complex health issues independently of community support and resources. By collaborating with community agencies and coalitions to create systems and policy change focused on prevention, hospital-based population health strategies become more sustainable and health inequities are reduced. A strong, coordinated community response reduces inefficiencies and increases the likelihood of long-term success in improving health outcomes.

Strategy for Implementation Plan Development

Springfield Community Process for Determining Initiatives

In the Springfield Community, the Healthy Living Alliance (HLA) will coordinate the implementation of the upstream, community-wide strategies. HLA is a multisectoral collaborative focused on improving community health through systems and policy change. HLA includes an Advisory Council that provides overall direction and guidance to its committees and community partners. The Advisory Council has leadership representation from the following organizations: Greene County Commission, Jordan Valley Community Health Center, City of Springfield, Community Partnership of the Ozarks, People Centric Consulting, CoxHealth, Community Foundation of the Ozarks, Ozarks Regional YMCA, Springfield-Greene County Health Department, Mercy, Springfield Public Schools, United Way of the Ozarks, Bass Pro Shops, Springfield Area Chamber of Commerce, Ollis and Company, KY3, The Kitchen, Inc., Community Blood Center of the Ozarks, Fox Grape Family Dentistry, Missouri State University, Catholic Charities of Southern Missouri, Burrell Behavioral Health, and 835 Consulting. In addition, HLA has formed several committees when a specific need arises, and currently include: Business, Tobacco, Marketing and System Planning.

As the Springfield Community Health Assessment was concluding, leadership from the OHC and HLA capitalized on the opportunity to create improved coordination and priority alignment. HLA became the natural fit to lead the community process to improve community health to prevent and reduce Cardiovascular Disease, Lung Disease, and Mental Health.

Planning to develop strategies for the CHIP began in April 2016. Over two days, 16 community organizations assembled to complete an asset map and gap analysis of community health initiatives. To facilitate the completion of the exercise, a community coach from the Robert Wood Johnson Foundation and County Health Rankings and Roadmaps lead the group through the Intervention Planning Matrix, a community health tool. At the completion of the exercise, the HLA Advisory Council provided insight and direction regarding opportunities that may be most achievable, successful, and pertinent to community needs.

Armed with this feedback and the completed health assessment, the HLA Systems Planning Committee, along with community partners, developed the initiatives around the common threads. As the initiatives were developed the OHC and HLA also ensured that the approaches that were developed aligned with other state and national priorities. In particular, the Missouri

State Health Improvement Plan, National Prevention Strategy, Centers for Disease Control and Prevention, American Public Health Association, and Leading Health Indicators within Healthy People 2020 were examined and it was determined that there was a strong alignment. The result of this process is the initiatives outlined herein. The Healthy Living Alliance coordinated objectives were approved by the Healthy Living Alliance Advisory Council on August 16, 2016. While there are many initiatives in the outlined plan below, the Community Health Improvement Plan will continue to be a living process that will allow for new initiatives to be included, as they arise and meet the goals of the plan. Any changes or additions will be noted in future progress reports.

Evaluation

Evaluation includes both measuring progress in achieving the strategies outlined in the CHIP and tracking community progress towards improving the health priority issues. HLA and hospitals will maintain tracking of the CHIP strategies and report those regularly to the IRS and community partners. Metrics used in the prioritization process of the assessment will be used to track community progress towards improving cardiovascular disease, lung disease, and mental health. These metrics are listed below.

Metrics to assess Cardiovascular Disease include:

- Coronary heart disease prevalence
- Heart disease mortality
- Emergency Department visits due to cardiovascular disease

Metrics to assess Lung Disease include:

- Asthma prevalence
- Lung cancer mortality
- Emergency Department visits due to respiratory disease

Although specific metrics identified mental health as a health priority issue, OHC agreed more information is needed to understand root causes and factors contributing to and affecting mental health in the community. Therefore, instead of creating strategies to address mental health directly, OHC, with community partners, plans to complete a comprehensive community mental health assessment to shape the direction of future strategies.

Community Health Improvement Plan

The common threads addressed in the HLA-Coordinated CHIP are: Tobacco, Mental Health, Access to Appropriate Care, Social Determinants of Health, and Physical Activity and Nutrition through Active Living and Healthy Living initiatives.

Healthy Living Alliance-Coordinated Initiatives

Access to Appropriate Care	Social Determinants of Health	Tobacco Use	Mental Health	Active Living & Healthy Eating
				
<p>Advocate for Transformation of Missouri Medicaid</p> <p>Develop Referral System to Appropriate Care</p> <p>Improve Pathways for Healthcare Careers</p> <p>Increase GO CAPS Medicine and Health Care Track</p>	<p>Reduce Poverty and Improve Quality of Life in Council Zone 1</p> <p>Move Families Out of Poverty through the Northwest Project</p> <p>Create Comprehensive Case Management Program</p>	<p>Engage and Participate in Efforts to Create Smokefree Laws in Missouri</p> <p>Gain Local Control of Tobacco Taxing Authority</p> <p>Expand Communities with Smokefree Ordinances</p> <p>Expand Tobacco 21</p> <p>Understand the Feasibility of Smokefree Housing</p> <p>Expand Businesses with Improved Tobacco Control</p>	<p>Complete a Mental Health Assessment</p> <p>Implement Prescription Drug Monitoring Program</p>	<p>Adopt a Growth Management and Land Use Plan that Includes Health Considerations</p> <p>Adopt an Active Transportation Plan</p> <p>Create Healthy Workplaces through Wellness</p> <p>Increase Access to Playspaces</p> <p>Reduce Food Insecurity</p> <p>Improve Access to Healthy Food</p> <p>Strengthen Farm to School Initiative</p>

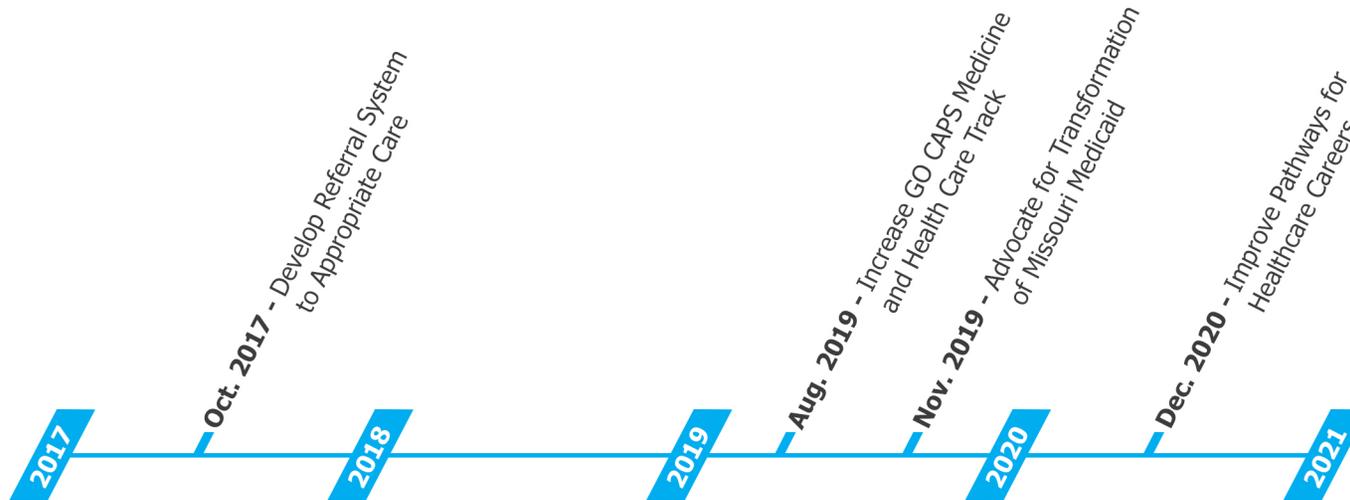


Access to Appropriate Care

Advocate for Transformation of Missouri Medicaid	Lead	Healthy Living Alliance Advisory Council
	Summary	Missouri Medicaid is a system with multiple inefficiencies and ineffective approaches. Reform within the existing system is needed to provide less costly and more efficient solutions to improve health. Additionally, The Patient Protection and Affordable Care Act created provisions for states to expand state-run Medicaid programs to provide comprehensive health coverage for individuals living up to 138% of the Federal Poverty Level (FPL). However, Missouri has chosen not to expand MO HealthNet although significant federal funding exists to support expansion, which would cover over 450,000 additional lives. Medicaid expansion is needed to reduce health inequities through increased healthcare access.
	Objective	Facilitate and support reformation and expansion of MO HealthNet services
	Best Practice	Saint Louis University School of Law: Medicaid Expansion FAQ HealthInsurance.org – Missouri Medicaid
Develop Referral System to Appropriate Care	Lead	Springfield-Greene County Health Department
	Summary	An array of social, economic, and environmental factors can create barriers to accessing an already complex health system. Therefore, patients may inappropriately utilize healthcare by visiting local emergency departments for health issues either that can be met in a primary care setting or that become increasingly worse because of overwhelming barriers to consistent and appropriate care. To better connect individuals to appropriate care, health care systems and public health partners have implemented efforts such as case management, community health workers, and community paramedics. This effort will create a clear and coordinated referral system among these existing programs to reduce duplication and gaps in coverage.
	Objective	Create a coordinated referral system among healthcare and community partners.
	Best Practice	RHIhub - Community Health Worker Case Coordinator/Manager Model
Improve Pathways for Healthcare Careers	Lead	City of Springfield Department of Workforce Development Missouri Job Center
	Summary	The Springfield Community has a shortage of both health care providers and support staff. In conducting research and through health care industry roundtable discussions, hosted by the Missouri Job Center and the Springfield Area Chamber of Commerce, recruitment of quality and qualified candidates throughout health care emerged as a theme. This initiative aims to improve and bring a more broad system of recruitment, education and career pathway to the community.
	Objective	Create and sustain a health care career pathway, which will initially impact 300 individuals.
	Best Practice	Quantitative data was gathered via MERIC and EMSI. Confirmation of the data was evidenced thru employer and industry feedback at Healthcare roundtable discussions.

Increase GO CAPS Medicine and Health Care Track	Lead	Springfield Public Schools, Springfield Area Chamber of Commerce
	Summary	As a community that is a designated Health Professional Shortage Area (HPSA) for medical, dental and mental health, Springfield needs to better develop the pipeline of students pursuing and entering the health care profession. To provide high school students with a project-based, immersive experience, the Springfield Area Chamber of Commerce, Springfield Public Schools, and twelve other regional school districts began GO CAPS. The health care track within GO CAPS allows students to spend half of their year working in areas of health care to gain a greater understanding of professions and the health care environment.
	Objective	Increase the number of high school students exposed to and immersed in health care through GO CAPS project-based learning by 30%.
	Best Practice	<u>U.S. Department of Education CAPS Network</u>

Access to Appropriate Care Timeline

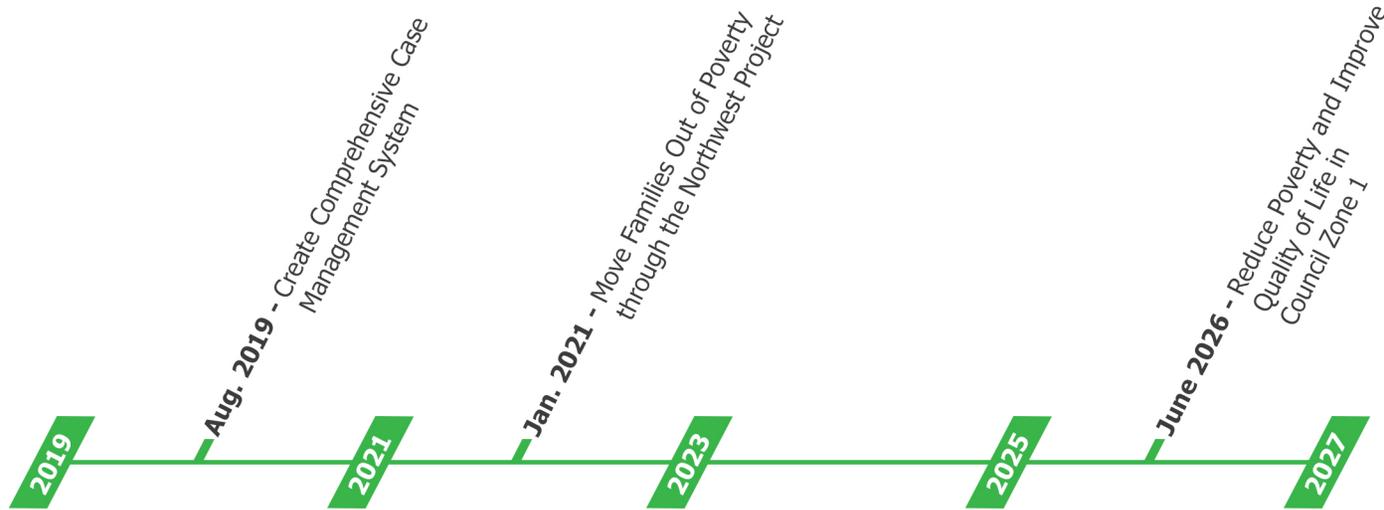




Social Determinants of Health

Reduce Poverty and Improve Quality of Life in Council Zone 1	Lead	City of Springfield
	Summary	In 2015 the City of Springfield and partners recognized Council Zone 1 within Springfield was performing more poorly than other sectors of the community in various factors (e.g. crime, fire service calls, foreclosures, income). In response, the Zone Blitz was created to address community improvement including: chronic nuisance properties, digital divide, food access, health care, housing, infrastructure & transportation, jobs & economic development, public safety, wellness, and neighborhood engagement.
	Objective	Reduce poverty by 5% in Council Zone 1 through Zone Blitz initiatives.
	Best Practice	Robert Woods Johnson Foundation: Culture of Health Change Lab Solutions
Move Families Out of Poverty through the Northwest	Lead	The Drew Lewis Foundation, Drury University, Missouri State University
	Summary	As the Zone Blitz effort recognized and planned to address poverty and associated factors throughout Council Zone 1, there was also a recognition of the need to work with families. The Northwest Project aims to partner with families from across four neighborhoods over the next five years to provide education and support to help families become more stable and financially secure.
	Objective	Assist 500 families to reach a household income at or greater than 200% of the Federal Poverty Level (FPL).
	Best Practice	1,000 in 1,000: Moving 1,000 people out of poverty every 1,000 days Circle USA
Create Comprehensive Case Management System	Lead	Community Partnership of the Ozarks, United Way of the Ozarks
	Summary	Many individuals and families face challenges to successfully making positive change and progress, both personally and in navigating health and human services within the community. Various organizations provide case management and support to individuals and families, but the care and communication with other agencies is often siloed and under-informed. This initiative will provide improved coordination of efforts and a unified tracking system for agencies that allows data sharing with all service organizations in the community (homeless shelters, food pantries, government, social services, faith based, workforce investment board, job placement services, etc.), enabling agencies to help those they serve make long-lasting improvements.
	Objective	Develop and implement a community-wide case management and common data software system to meet health and human service needs.
	Best Practice	

Social Determinants of Health Timeline



Tobacco

Engage and Participate in Efforts to Create Smokefree	Lead	Healthy Living Alliance Tobacco Committee
	Summary	Tobacco use is the number-one modifiable risk factor proven to have an array of negative health implications for the user and those breathing second-hand smoke. To protect the health of Missourians, stronger tobacco control policies are needed to reduce access to tobacco products, increase successful quits, prevent initiation, reduce health disparities, and create clean air for all.
	Objective	Engage with state-level advocacy groups and participate in efforts to move the state towards an indoor tobacco use law.
	Best Practice	American Lung Association CDC – Best Practices for Comprehensive Tobacco Control Programs

Gain Local Control of Tobacco Taxing Authority	Lead	Healthy Living Alliance Tobacco Committee
	Summary	Appropriate levels of taxing on tobacco products is a key element of a comprehensive tobacco control strategy. Increased taxation of tobacco products at a level that will deter tobacco use is an effective measure to decrease smoking among some of our most vulnerable populations. While efforts at the state level exist to increase the tobacco tax, compounding and competing interests convolute the process and decrease the likelihood of an appropriate tax increase. Therefore, local control to tax tobacco products is needed to support community-level tobacco control efforts.
	Objective	Local control of tobacco taxing authority authorized by local delegation.
	Best Practice	<u>CDC – Smokefree Policies Improve Health</u> <u>Effects of Tobacco Taxation and Pricing on Smoking Behavior in High Risk Populations: A Knowledge Synthesis</u>
Expand Communities with Smokefree Ordinances	Lead	Healthy Living Alliance Tobacco Committee
	Summary	Policy change within communities to eliminate indoor tobacco use is an effective measure a community can take to improve tobacco use rates and reduce exposure to secondhand smoke. Communities can implement a clean indoor air ordinance, eliminating tobacco use in workplaces, restaurants, and other public venues.
	Objective	Engage with 10 communities to move towards adoption of comprehensive smokefree ordinances.
	Best Practice	<u>CDC – Smokefree Policies Improve Health</u>
Expand Tobacco 21	Lead	Healthy Living Alliance Tobacco Committee
	Summary	Raising the minimum age of legal access (MLA) of all tobacco products from 18 to 21 years of age, will prevent nicotine dependence in teenagers and young adults and, according the Institute of Medicine, will decrease initiation of youth smoking, decrease overall smoking rates, and increase the number of on-time births and newborns with a healthy weight.
	Objective	Adoption of the initiative to raise the MLA from 18 – 21 years of age in Springfield and engage with 5 communities to move towards adoption of the initiative.
	Best Practice	<u>Institute of Medicine – Public Health Implications of Raising the Minimum Age of Legal Access to Tobacco Products</u>

Understand the Feasibility of Smokefree Housing	Lead	Healthy Living Alliance Tobacco Committee
	Summary	Exposure to second-hand smoke poses serious and costly health risks. Children and adults living in multi-unit residences where smoking is permitted are exposed to secondhand smoke as it can migrate across units through doorways, cracks in walls, plumbing, ventilation systems, and electrical lines. Smokefree multi-unit housing policies are not only beneficial to residents, but also to property owners as turnover is reduced and fire risks are lessened. In order to compile relevant and timely information for decision makers, it is recommended that the feasibility, costs, and health implications be studied of such a policy.
	Objective	Complete a feasibility study of smokefree multi-unit housing and its impact on health and economy.
	Best Practice	ALA – Smokefree Multi-Unit Housing
Expand Businesses with Improved Tobacco	Lead	Healthy Living Alliance Business Committee
	Summary	Policy and system change within business are effective measures to improve tobacco use rates and reduce exposure to secondhand smoke. Businesses can put into place various policies and changes to encourage clean air.
	Objective	15 businesses will improve tobacco control through policy and system change.
	Best Practice	CDC – Smokefree Policies Improve Health

Tobacco Timeline

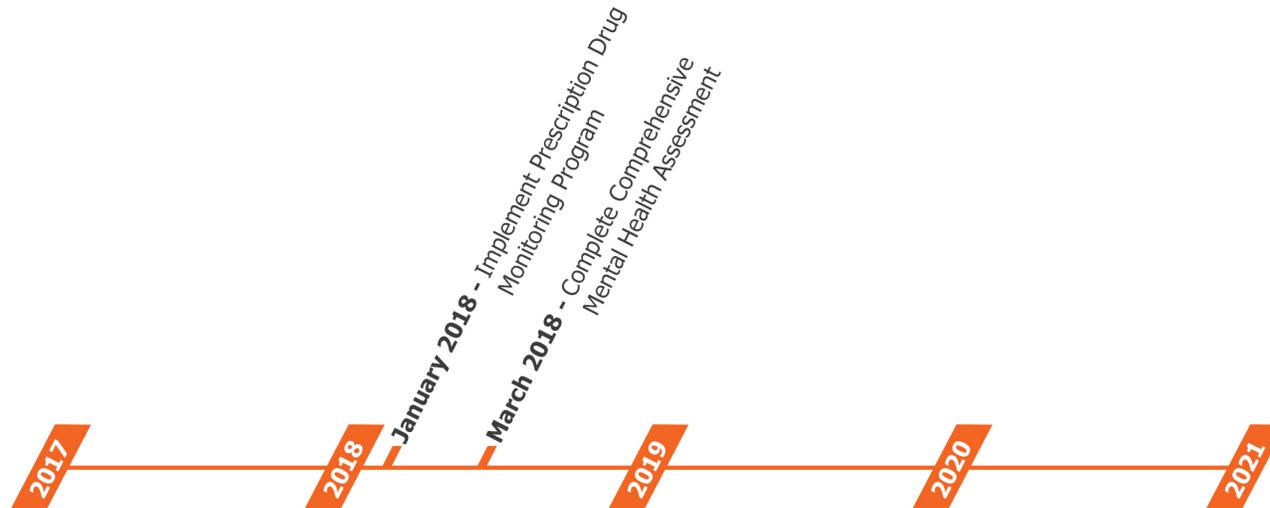




Mental Health

Complete Comprehensive Mental Health Assessment	Lead	Healthy Living Alliance Advisory Council
	Summary	In 2016, the Springfield Community Health Assessment identified mental health as both a priority health issue and a common thread among all health issues. Unfortunately, the report also highlighted the fact that there is a significant gap in understanding mental health. Before the community can take evidence-based action to improve mental health, a better understanding of the issue must first occur. This assessment and subsequent action plan will focus on increasing the understanding and opportunities to improve the treatment and prevention of mental health in the community.
	Objective	Complete a comprehensive mental health assessment that includes clinical outcomes, capacity and the preventive mental health system.
	Best Practice	
Implement Prescription Drug Monitoring Program	Lead	Springfield-Greene County Health Department, CoxHealth, Mercy
	Summary	Prescription Drug Monitoring Programs (PDMPs) are statewide databases used to track the filling and dispensing of prescription drugs, generally Schedule II through IV on the Drug Enforcement Administration's drug schedule. PDMPs are a preferred policy intervention in addressing opioid misuse and addiction across the country. Yet, Missouri is the only state that does not have a PDMP. The Comprehensive Addiction and Recovery Act (2016) allows local governments which operate in a state that does not have a PDMP to receive federal funding to establish, maintain, or improve local PDMPs. In order to receive funding, 1) local legislation needs to be enacted requiring the submission of controlled substance prescription data to an authorized city, county, or region and 2) the governing body needs to agree to transition the local PDMP system to an authorized state agency if and when the state enacts state PDMP legislation.
	Objective	1) Establish legislation requiring the submission of controlled substance prescription data to an authorized database 2) Apply for federal funds 3) Implement PDMP
	Best Practice	<u>Centers for Disease Control and Prevention - PDMPs</u> <u>Missouri Foundation for Health - PDMPs</u> <u>Comprehensive Addiction and Recovery Act</u>

Mental Health Timeline



Active Living & Healthy Eating

Adopt a Growth Management and Land Use Plan that Includes Health Considerations	Lead	City of Springfield- Planning Department, Springfield-Greene County Health Department
	Summary	As a community develops and implements a growth management and land use plan, as part of a comprehensive community plan, there are far-reaching and long-lasting implications. Ensuring health, equity and sustainability within the plan moves the community further in its development to build a culture of health. Development of this community plan is the first step in revising policies that integrate health into the built environment.
	Objective	Obtain approval for a revised growth management and land use plan with health as a consideration.
	Best Practice	An Introduction to Health in All Policies: A Guide for State and Local Governments

Adopt an Active Transportation Plan	Lead	City of Springfield Public Works, Ozark Greenways
	Summary	An Active Transportation Plan is a comprehensive plan that addresses bicycling and pedestrian transit throughout the community. The plan provides tools to assist the community with planning efforts to ensure efficient and safe access for pedestrians, bicyclist, and transit users. A complete network of on and off street pathways that connect the community and will build on the use of existing infrastructure such as trails, parks and public transit system.
	Objective	Adoption of the Active Transportation Plan by Springfield City Council.
	Best Practice	Smart Growth America- Safer Streets, Stronger Economies
Create Healthier Workplaces through Wellness	Lead	Healthy Living Alliance Business Committee
	Summary	Many companies have corporate wellness efforts, but there is still a perception that wellness is not common in the workplace. Additionally, many of the solutions that are implemented are programs with a limited reach, or practices that are not evidence-based. This project will provide the tools to local businesses to create stronger systems and policies. The project will initially focus on healthy eating, active living and tobacco use.
	Objective	Implement an online tool that provides policy and system approaches to improve workplace wellness and have at least 15 workplaces adopt initiatives.
	Best Practice	varied by initiative
Increase Access to Playspaces	Lead	Springfield-Greene County Health Department
	Summary	Play and recreation is an important aspect of community and especially for children. Children without access to play are 26% more likely to be obese, perform worse in school, and lack social skills. Springfield has more than 500 playspaces, but more than 300 are not available to the public. The Playspace Project aims to improve the availability and access to places for families to play.
	Objective	Increase access to playspaces in Springfield by 10%.
	Best Practice	<u>Let's Move- Get Active</u> <u>Kaboom!</u>

Reduce Food Insecurity	Lead	Ozarks Food Harvest, Springfield-Greene County Health Department
	Summary	Food insecurity is a major issue, both nationally and locally. Fourteen percent of U.S. households, and 16.9% of households in Greene County, approximately 46,940 people, are food insecure. Two of the primary efforts to improve consistent food access for individuals and families are the Supplemental Nutritional Assistance Program (SNAP), and Women Infants and Children (WIC). Unfortunately, our community leaves an estimated \$28 million on the table due to a lack of enrollment in these programs. By closing this gap through increased enrollment, SNAP and WIC can help improve food access and boost the local economy.
	Objective	Increase the number of enrollments in SNAP and WIC supplemental food programs by 2,500 through improved enrollment processes and referrals.
	Best Practice	United States Department of Agriculture- Effect of SNAP Participation United States Department of Agriculture- How WIC Helps
Improve Access to Healthy Food	Lead	Ozarks Food Harvest, Zone Blitz Food Access Team, Springfield Community Garden
	Summary	With 16.9% of households in Greene County identified as food insecure, our community must take measures to improve community access to food. Additionally, there are varying negative health effects that are being heavily influenced by poor diets, in particular cardiovascular disease and obesity. As the community access to food improves, the must also increase efforts to improve the quality of food that is available to promote good health.
	Objective	Improve the network and distribution of fresh produce within the community resulting in an increase of fresh produce available by 10%.
	Best Practice	Oklahoma City Food & Resource Centers County Health Rankings & Roadmaps- Healthy Food Initiatives in Food Banks County Health Rankings and Roadmaps- Community Gardens
Strengthen Farm to School Initiative	Lead	Springfield Public Schools
	Summary	This initiative will strengthen existing efforts begun within Springfield Public Schools' Farm to School initiative, building a sustained effort to provide more fresh produce to students and incorporate gardens into school learning. Activities within the initiative will take a variety of community partners to help solve issues of procurement of affordable produce, and strong garden support. This initiative will also support the integration of community garden grown food into food access points.
	Objective	Sustain efforts of the Farm to School initiative by increasing fresh produce available within schools through the cafeteria and within gardens.
	Best Practice	United States Department of Agriculture- Community Food Systems

Active Living & Healthy Eating Timeline

