

Partnership for a Healthier Alexandria
Healthy Lifestyles Work Group
Draft Meeting Minutes
November 8, 2006

Work Group Members Present:

- Lisa Baker – Director, Alexandria Office on Women; Co-Chair, Healthy Lifestyle Work Group
- Leslie Clark – Center Director, Chinquapin Park Recreation Center; Representative, Department of Recreation, Parks and Cultural Activities
- Angela Crawford – Epidemiologist, Alexandria Health Department
- Bhavna Vaswani – Human Resources Consultant, Lumenos, Inc.
- Linda Cotton – Certified Information & Referral Specialist (CIRS), Department of Human Services
- Kristin Langlykke – Executive Director, ANHSI
- Rose Berler – Chair, ACPS School Health Advisory Board
- Dick Merritt – Member, Alexandria Public Health Advisory Commission
- Heather Jones – Unit Coordinator Extension Agent, 4-H Youth Development, Alexandria Cooperative Extension
- Arlene Hewitt – Member, Alexandria Public Health Advisory Commission
- Raynard Owens – Communications Officer, Alexandria City Manager’s Office
- Andres Gaviria – Hispanic/Latino Partnership Manager, American Cancer Society, National Capital Region
- Bob Custard – Environmental Health Manager, Alexandria Health Department
- Cara Pennel – Health Planner, Alexandria Health Department

Overview & Update Programs / Activities:

- Linda Cotton – Alexandria provides a free weatherization program that helps City residents with disabilities or low-income residents increase home comfort and lower heating fuel bills for the winter. If you know of someone that is in need of this service, call Linda and she will connect you with the appropriate individual (703-838-0900).
- Cara Pennel – The Health Department submitted an application to serve as a practicum site for George Washington University School of Public Health and Health Services graduate students. The goal of the internship is to provide an opportunity for students and community sites to synthesize, integrate, and apply practical skills, knowledge, and training learned through courses, and to gain professional experience in a professional public health work environment. Each student is required to get 120 hours of practical field experience. Cara met with Craig Fifer, City’s IT Services, and they are working on developing a *Partnership* website over the next month or two.

Steering Committee Meeting – Overview: Funding / Resourcing Discussion:

At the October 30 *Partnership for a Healthier Alexandria* Steering Committee meeting, the group discussed possible funding for / resourcing of some of the initiatives that have been identified by the two work groups. Below is an overview of the discussion:

The Partnership for a Healthier Alexandria, as an entity under the Alexandria Health Department, would not be eligible for funding from private foundations. The question arose as to whether the Partnership should apply for 501(c)3 non-profit status. Concerns arose about the establishment of a 501(c)3 due to the lack infrastructure and that the Partnership would be competing with other local non-profits for funds.

Two solutions that were suggested were: 1) the Public Health Advisory Commission could establish a donations account to accept private contributions and 2) the Partnership could collaborate with other local non-profits for the submission of proposals and receipt of funds. The non-profit partner could serve as the fiscal agent, but the Partnership, through the health department, would staff and carry out the projects. The 501(c)3 “partner” might fluctuate depending on the specific grant. The group agreed that this is the best avenue for private foundation funding at this time.

Because of the length of time to become a 501(c)3 (~6 months), it was recommended that the steering committee revisit this issue periodically.

Healthy Lifestyles Work Group discussion:

- Concerns arose about using this approach long-term and continually relying on others for private foundation funding (beholden to 501(c)3s as the fiscal agents). There might be a time in the future that the Partnership would want to become a stand-alone entity and this idea should be revisited. Think about carrying out short-term initiatives using this approach, but don't give up on a long-range plan to become a 501(c)3.
- Other concerns arose about the Partnership becoming a 501(c) 3 because of the need to get the money to the people, cut-down on the overhead – look for opportunities to partner with non-profits that already exist so there aren't additional administrative costs.
- The groups would need to find specific private foundation grants/funding opportunities and approach suitable non-profits about collaborating. It is essential that the non-profit, serving as fiscal agent, be very involved in the process.

Strategic Approach/Direction:

- The group discussed the strategic direction for the planning and implementation of the three strategies selected at the last meeting. These strategies include: A1. Provide "point-of-decision" prompts to encourage stair use at worksites or in public places with stairs; A2. Implement social support interventions by creating or working within existing networks in a social setting outside the family (e.g., workplace); and A7. Continue *Proud To Be Smoke Free* Program with Alexandria restaurants, to promote adoption of smoke-free restaurant policies.

- There are positives and negatives to the different approaches. If the group only takes on one strategy right now, work group members could get bored because there are only so many tasks/activities per project for members to contribute to. However, if the work group works together to take on one, they could learn from that experience and apply it to the other two.
- One comment was made that a lot is involved in planning and implementing even one strategy (see Next Steps below).
- Another work group member hoped that we might take on two strategies, perhaps A1 and A7, with the potential of A1 setting the groundwork to accomplish A2. We need to know what steps are involved in each strategy to know how many we take on.
- It was decided that the group would divide into two subcommittees to break down and explore next steps, explore potential funding (particularly for strategy A7), and plan and implement strategies (see below “Next Steps”).
- Strategy A1 (A2) subcommittee will include: Linda Cotton, Rose Berler, Heather Jones, Leslie Clark, Angela Crawford, Bhavna Vaswani, and Brian Hannigan (?).
- Strategy A7 subcommittee will include: Dick Merritt, Bob Custard, Arlene Hewitt, Kristin Langlykke, Andres Gaviria and Tom Fairchild (?).

Next Steps Discussion:

- A1 – Next steps for the point-of-decision prompts to encourage stair use might include a pre/post-assessment of stairs use, deciding which Alexandria buildings to include, getting approval and buy-in from building/business managers, exploring opportunities to receive funding to print posters, involving the media, etc.
- A2 – Strategy A1 could lay the foundation by establishing relationships and implementing a smaller scale healthy lifestyles initiative with local business. American Cancer Society has an online worksite program in place, Active for Life, to encourage physical activity by combining individual and group support strategies that allows tracking of minutes exercised. For more information, go to www.fightcancer.org and use the login: cancer (click on “Workplace Programs” at the top). Lumenos implemented at 12-week workplace fitness challenge, where participating employees found a partner and tracked their steps on an internal website (pedometers were issued to participating employees). Prizes were provided at the end for the winners.
- A7 – The Health Department will provide food service managers with new food code training in early spring – this would provide a forum for a roundtable/discussion between restaurants that have adopted the smoke-free policy and those that have not, to discuss the implementation of/process for policy change, how policy change has impacted business, etc. The work group thought the initial task for this subcommittee would be to locate potential funding opportunities to hire staff or an intern to continue the Proud To Be Smoke Free Program. One option might be raising funds locally to pay for an intern. The Health Department or the Public Health Advisory Commission would simply need to establish a donations account through OMB to accept private contributions. Another alternative might be to approach the Restaurant Association of Metropolitan Washington (RAMW). RAMW is opposed to mandatory restaurant smoke-free policies but are in favor of voluntary adoption. However, because of potential conflicts of interest and other

current initiatives, this proposal or request would need to come from outside the health department.

- Other comments on funding: American Cancer Society has Community Investment Grants but funding will not cover staffing or interns. Cooperative Extension receives funding from the state to hire summer interns, but localities must match funds (\$2,000). Philip Morris provides funding to communities – the work group members would need to decide if they would have a dilemma with receiving funding from a tobacco company. The group could also submit a proposal to local universities for students to utilize these opportunities for research projects.

Next meeting:

- Because we are approaching the holidays and schedules may be particularly hectic, we propose that the two subcommittees meet at the previously scheduled day and time (Wednesday, December 13 from 12:30-2:00) in separate rooms. Gold Room 1 and Gold Room 2 are both available.