

**NACDD/CDC State Engagement Model  
Physical Activity and Nutrition (PAN)  
*Overview and Design Document*  
*Effective 10/1/19*  
*Version 4 (Dec 2019)***

The purpose of this document is to describe the process by which NACDD will implement the 2020 Physical Activity and Nutrition (PAN) State Engagement Model. It describes background of on the model, the PAN topics, a description of each phase of the model, roles for NACDD team members, and a timeline for implementation.

**Background**

CDC and NACDD collaborated to develop the State Engagement Model to enhance stakeholder engagement and catalyze commitment for collective action to prevent type 2 diabetes. Since 2012, the model has been refined by NACDD, CDC and 42 states to advance the National Diabetes Prevention Program. NACDD launched a new pilot in 2019, using the State Engagement Model framework, to address PAN priorities. Support includes tailored technical assistance from NACDD's Innovation, Leadership and Practice Team, NACDD Subject Matter Experts in physical activity and nutrition, and peer-to-peer learning with invited states.

**Purpose of PAN State Engagement Model**

To assist invited State Health Departments (SHD) in engaging and expanding a network of key multi-sector partners to improve the risk factors of physical inactivity and poor nutrition at the policy, systems, and environmental change level using the NACDD/CDC State Engagement Model framework.

The **State Engagement Meeting (StEM)** is a central aspect of the State Engagement Model. NACDD works with State Health Departments to host a tailored StEM that brings together key stakeholders to develop strategic priorities and PAN action plan. The PAN action plan is a short-term (18-24 month) plan, an expected output of the StEM, to guide State Health Departments and their partners on the implementation of a state-specific collective action that advances state identified PAN priorities.

**Objectives:** At the conclusion of this process, SHD staff and partners will have:

- Increased understanding of and support in implementing aspects of the collective impact approach to advance PAN priorities, including:
  - A common agenda
  - Shared measurement
  - Mutually reinforcing activities
  - Continuous communications
  - A backbone organization

- Increased capacity to develop a short-term action plan for advancing state activities that align with the CDC's DNPAO national priorities for [Active People Healthy Nation](#), specifically [Strategies to Increase Physical Activity](#)

## **Recruitment of States**

### **Year 1**

The following criteria were used to determine invited states:

- States not currently receiving CDC funding for SPAN, but that do have CDC High Obesity Funding indicating a high need and a potential opportunity to strengthen partnerships with academia and local counties with a high need. States that also participated in NACDD's STAR program were given additional consideration.
- States that participated in the StEM model for the National DPP or Colorectal Cancer Screening in 2019 were not approached to participate in year 1, except for WV because their colorectal cancer STEM was led by the University rather than the state health office.

Status of Year 1 states based on above criteria:

- *Tier 1:*
  - West Virginia – StEM Meeting completed in Oct 2019; support calls continuing through March 2020.
  - Virginia – StEM Meeting completed in Oct 2019; support calls continuing through March 2020.
  - Tennessee – interested in a subsequent year
- *Tier 2:*
  - Alabama – interested in a subsequent year
  - North Dakota – invitation sent and follow-up emails; no response
  - Wisconsin – not invited
  - Mississippi – not invited
  - Georgia – not invited
- *Tier 3:*
  - Oklahoma - not invited
  - South Carolina – not invited
  - South Dakota – not invited
  - Louisiana – not invited

### **Year 2**

NACDD will issue a Request for Applications (RFA) (see Appendix A) and select up to four states to receive technical assistance in 2020 based upon a successful review and scoring of the submitted application. The RFA will include the following criteria:

- NACDD will invite SHDs not funded for the State Physical Activity and Nutrition (SPAN) Program by the CDC to apply for technical assistance to implement PAN StEM in their state.
- *Virginia and West Virginia are not eligible to apply due to their participation in 2019.*

- Questions about SHD readiness and commitment to implement and sustain efforts that emerge through the PAN State Engagement Model will be incorporated into the RFA.

### **Approach**

Using the NACDD/CDC State Engagement Model which incorporates a collective impact approach, a team of NACDD facilitators and subject matter experts will work collaboratively with State Health Departments (SHDs) to identify strengths, gaps, and opportunities to engage existing and new internal and/or external partners to coordinate actions to advance state identified PAN priorities. NACDD may engage national partner organizations to provide subject matter expertise.

**Primary Role of NACDD:** NACDD provides oversight, technical assistance, and leadership to SHDs throughout the following phases of the model: Planning, State Engagement Meeting (StEM), and Post-Meeting Technical Assistance and Support. NACDD will provide guidance on logistics for the StEM meeting.

**Phases of PAN State Engagement Model:** The three phases of the model include:

1. Planning Phase (3-4 months): Support to states to assess strengths, gaps, and opportunities with technical assistance from NACDD and other states in the 2020 cohort. This process follows the guidance and thought prompts included in the written "PAN StEM Participant Guide".
  - a. The NACDD Team will meet virtually with states to individually identify strengths, gaps, and opportunities to engage existing and new internal and/or external partners.
    - i. An overarching goal will be established for this collaboration along with up to three priority "action areas" for achieving that goal.
  - b. The NACDD Team will facilitate state peer-to-peer calls (up to three calls) to review and discuss the collective impact components and the model as a framework for advancing PAN priorities.
  - c. The NACDD Team will work with identified state points of contact to plan a StEM, planning includes:
    - i. identifying relevant internal and/or external partner groups and speakers,
    - ii. developing a tailored agenda, including three priority "action areas" for planning purposes,
    - iii. assigning organizational tasks relating to meeting logistics, and
    - iv. developing an Implementation and Sustainability Plan to clarify how the SHD will facilitate action plan implementation post StEM.
2. StEM: A one day in-person educational and action planning session in each state to activate internal/external stakeholders with a "call to action" and to develop the first draft of a stakeholder driven, state-specific action plan around the selected PAN goal. The StEM has two distinct sessions:

**Educational Session:** Background information presented on the PAN strategies to improve population and community health.

- a. The “national landscape” presented by national experts (to be identified)
- b. The “state landscape” presented by the SHD
- c. Spotlight on Success features stakeholders identified by the SHD to highlight current state-specific PAN successes and opportunities
- d. Other speakers as identified by state-specific need (optional)

The output of this session is that current and new key stakeholders are activated by a “call to action” and understand the urgency of joining with national, state, and local efforts underway to promote physical activity and nutrition as upstream factors in preventing chronic disease and promoting a healthy state/community.

**Action Planning Session:** NACDD consultants and subject matter experts facilitate up to three small group sessions with a subset of meeting participants. The goal of this session is to identify physical activity and nutrition priorities, key action steps, resources available/needed, and stakeholder commitments that lay the foundation for leading a collective impact approach to promoting PAN priorities. The Action Planning Session has three parts:

- a. What Does Success Look Like? – identifying priority objectives
- b. How Do We Achieve Success? – key action items, resources, barriers
- c. Who Will Lead Key Actions? – stakeholder commitments

The output of this session is a first draft of a stakeholder-driven, state-specific action plan that defines the agreed upon action steps and responsible persons in each of the prioritized “action areas” for achieving a collective impact approach to improving physical activity and nutrition.

3. Post-Meeting Support (4-6 months following StEM): NACDD will provide support to PAN StEM states for 4-6 months including assistance in advancing their action plan, group peer-to-peer calls, and linkage to national resources.
  - a. **Post STEM Report:** Within thirty (30) days of the StEM, NACDD will:
    - i. Provide notes from each small group action planning session
    - ii. Assist the state in compiling a draft state action plan to advance SPAN priorities, and
    - iii. Provide an electronic meeting evaluation and provide a summary to the state.
  - b. **State Support Calls:** An NACDD Subject Matter Expert (SME) will be available to support the SHD in advancing the action plan as defined in their Implementation and Sustainability Plan.
  - c. **Group Peer-to-Peer Calls:** NACDD will conduct two group peer-to-peer post-meeting calls and up to 4 individual state calls with SHD staff to address additional technical assistance needs, help finalize the action plan, and to monitor implementation.

4. **Wrap Up and Evaluation Phase:** NACDD will conduct individual one-hour interviews with each state to evaluate progress (outcomes) and collaboratively develop a state specific summary detailing lessons learned and plans for continuous improvement. After the wrap up interview, NACDD may periodically reach out to SHDs to check on progress and to learn of technical assistance needs. States are encouraged to participate in ongoing NACDD training and technical assistance offerings.

### **Roles**

- **NACDD State Lead:** Ensures calls are scheduled, develops agendas, ensures notes are taken and distributed to individuals who need access to them, coordinates with speakers, facilitates all planning meetings, coordinates with the meeting logistics team for registration & location selection, prepares all StEM meeting materials, defines and coordinates with the NACDD StEM facilitation team, and ensures planning tasks are completed on time.
- **NACDD State SME:** Participates on planning calls, provides guidance and support to the state in all aspects of pre-planning and implementation as well as post meeting support.
- **NACDD State Support:** Schedules all meetings, distributes agendas, takes notes and ensures knowledge is shared as needed with states and the NACDD team.
- **NACDD Logistics Lead:** Manages logistics including registration, identifying location, food, printing, registration, set up and take down.
- **NACDD StEM Meeting Team:** The individuals designated to attend each state StEM will share responsibilities for set up and take down, facilitation of tabletop discussions, facilitation and scribe within breakout sessions, organizing AV, meeting and microphone management, and participant comfort.

### **NACDD Competencies**

PAN StEM relates to one or more of the following NACDD Competencies and at least one of their sub competencies. These competencies will be listed on the agendas for the peer-to-peer sessions and shared in the participant guide and recruitment materials.

1. **Build Support:** Chronic disease practitioners establish strong working relationships with stakeholders, including other programs, government agencies and nongovernmental lay and professional groups to build support for chronic disease prevention and control.
2. **Design and Evaluate Programs:** Chronic disease practitioners develop and implement evidence-based interventions and conduct evaluation to ensure on-going feedback and program effectiveness.
3. **Influence Policies and Systems Change:** Chronic disease practitioners implement strategies to change the health-related policies of private organizations or governmental entities capable of affecting the health of targeted populations.
4. **Lead strategically:** Chronic disease practitioners articulate health needs and strategic vision; serve as a catalyst for change and demonstrate program accomplishments to ensure continued funding and support within their scope of practice.

5. Manage People: Chronic disease practitioners oversee and support the optimal performance and growth of program staff as well as themselves.
6. Manage Programs and Resources: Chronic disease practitioners ensure the consistent administrative, financial, and staff support necessary to sustain successful implementation of planned activities and build opportunities.
7. Use Public Health Science: Chronic disease practitioners gather, analyze, interpret and disseminate data and research findings to define needs, identify priorities, and measure change.

### **Relevance to Innovation, Leadership and Practice Initiative (ILPI)**

State Engagement Model, including the StEM, are intended to support states in advancing physical activity and nutrition work in the absence of dedicated federal funding. The PAN StEM is implemented in support of NACDD's cooperative agreement with the National Center for Chronic Disease Prevention and Health Promotion for PPHF2018-National Organization for Chronic Disease Prevention and Health Promotion-financed in part by 2018 Prevention and Public Health Funds CDC-RFA-DP18-1814, or Innovation, Leadership and Practice Initiative (ILPI).

The State Engagement Model supports one program objective: 5.4. Engage state stakeholders and build partnerships through implementation of at least 2 State Engagement Meetings (StEM) meetings to promote state capacity on emerging issues.

The StEM objectives support the following activities within the NACDD Strategic Map: 2019-2020:

*Be A Catalyst to Grow State Capacity to Address Upstream Factors with Other Sectors:*

B.1 Assess the Current Landscape to Target and Define Upstream Factors to Be addressed.

B.2 Integrate Upstream Factors into Professional Development

*Be the Integral Source for Chronic Disease and Health Promotion Best Practices and Innovation*

C.2 Engage Members in Professional Development and Innovation

C.3 Strengthen Communication and Collaboration with States and Partners

### **Evaluation**

Evaluation of short-term and intermediate outcomes will be accomplished through several data collection strategies including semi-structured interviews, surveys, and post meeting paper evaluation tools. Evaluators will assess both process and impact of the efforts over the implementation period. The NACDD Evaluation Team will provide support, direction and data gathering/analysis and reporting for the StEM process. For additional details about the evaluation, see the PAN StEM Evaluation Plan which includes a logic model, a description of the overarching evaluation questions and a detailed description of the tools and timeline for data collection and communication of evaluation findings.

The following table details how data will be collected and indicators that will be utilized to measure the stated purposes of the evaluation:

- 1) Informing continuous quality improvement efforts;
- 2) Satisfying the requirements of the 110 evaluation components;
- 3) Identifying if states are able to move forward in their practice; and
- 4) Ascertain if the NACDD PAN StEM is able to assist the selected state in engaging partners to solve or alleviate their identified topic.

<b>Evaluation Question</b>	<b>Indicator(s)</b>	<b>Data Sources</b>	<b>Data Collection Methods</b>	<b>Data Analysis Methods</b>	<b>Person(s) responsible</b>
<b>1.1</b> In what ways can planning and implementation be made more efficient and effective?	HOOPLA results reflect discussion related to planning and/or implementation	StEM Team	HOOPLA	Post discussion of StEM Meeting Notes	StEM Team
<b>1.2</b> In what ways did the SMEs shape the planning, meeting, and implementation process for participating states?	HOOPLA results reflect discussion related to how SMEs shaped the planning and/or implementation process for states	StEM Team	HOOPLA	Post discussion of StEM Meeting Notes	StEM Team
<b>2.1</b> How many NACDD members were engaged and, to what extent?	# of NACDD Members	StEM Team	Registration List	Frequency Distribution and List	StEM Team
	Role indicated on the Partner Commitment Tool		Partner Commitment Tool	Data entry, Frequency Distribution, Text Analysis/Cleaning within 1 month of StEM	StEM Team (data collection), Data Manager (data analysis and data entry management)
	Extent to level of engagement indicated through HOOPLA		HOOPLA	Post discussion of StEM Meeting Notes	StEM Team
<b>2.2</b> How many state stakeholders were engaged and to what extent were <u>new</u> stakeholders engaged in the physical activity and nutrition work?	# of stakeholders listed on the Registration list  # of new stakeholders listed on the Registration list	State Stakeholders	Registration List – the list would need to indicate who is new.	List	StEM Team

	# of new stakeholders who indicated leadership role on the Partner Commitment Tool  Role indicated on the Partner Commitment Tool		Partner Commitment Tool	The paper-based Partners Commitment Tool is provided at the end of the StEM Meeting to all participants	StEM Team (data collection), Data Manager (data analysis and data entry management)
<b>2.3</b> To what extent did knowledge increase related to the topics covered?  <b>a.</b> Members knowledge of Collective Impact (as part of the peer-to-peer meetings)?  <b>b.</b> Stakeholder knowledge of PAN topics and evidence-based practice (As outcome of StEM Meeting)	Percent of knowledge increased related to each topic  Increase in understanding of what is meant by “Collective Impact”  Increase in knowledge of evidence-based practices	State Members and Stakeholders	Initial Evaluation Pre/post retroactive (Knowledge-based)	State Members and Stakeholders	StEM Team (data collection), Data Manager (data analysis and data entry management)
<b>2.4</b> To what level were participants satisfied with the StEM meeting?	75% rate the session useful  75% overall satisfaction rating of 8-10	State Members and Stakeholders	Post Meeting Evaluation	Data entry, Frequency Distribution, Contextual Analysis/Cleaning within 1 month of StEM	StEM Team (data collection), Data Manager (data analysis and data entry management)
<b>2.5</b> To what extent did the PAN StEM meeting facilitate commitments by state partners?	# of Commitments by State Partners  Level of Partnership	State Members and Stakeholders	Partner Commitment Tool	Data entry, Frequency Distribution, Contextual Analysis/Cleaning within 1 month of StEM	StEM Team (data collection), Data Manager (data analysis and data entry management)
<b>3.1</b> As a result of engaging with PAN StEM activities, in what ways did State members advance leadership initiatives/management efforts?  <b>a.</b> How did the PAN STEM process change the way CDDs and	# of advancements in leadership initiatives completed  # of advancements in management efforts completed  # of staff and CDDs who	State Members	Technical Assistance notes, 6-month Action Plan/ follow-up Report (1 month prior to calls, ES Team will send “postcard” (electronic or physical).	Notes, Follow-up call, Contextual Analysis	StEM Team, Program Evaluator, Data Manager

<p>staff think about and approach their work?</p> <p>b. What newly acquired skills/knowledge did they apply?</p>	<p>report this process changed the way they think when approaching their work</p> <p>How staff and CDDs changed the way they think about their work</p> <p># of new skills/knowledge reported and applied</p>		<p>Solicit Qualtrics responses at week 2. Follow-up with phone calls with a goal of gathering at least 60% of responses.)</p>		
<p><b>3.2</b> In what ways, if any, did information/technical assistance received through the NACDD Innovation Team add value or help:</p> <p>a. Mobilize state and/or community partnerships to identify and advance physical activity and nutrition goals?</p> <p>b. Develop policies and plans that support individual and community health efforts around physical activity and nutrition.</p>	<p>Goals identified and # of goals states and community partners felt were moved forward by this process</p> <p># of policies or plans developed through this process</p>	<p>State Members, Stakeholders, Community Partners</p>	<p>6-month Action Plan/ follow-up Report, Notes from Technical Assistance Meetings</p>	<p>Follow-up call notes, Contextual Analysis, Notes from TA</p>	<p>Data Manager, Program Evaluator</p>
<p><b>3.3</b> To what extent did state partners follow through with commitments made at the PAN STEM meeting to advance work around physical activity and nutrition?</p>	<p># of partners who followed through on their Commitments</p> <p># of partners who went above their commitment</p> <p>How did partners engage when others did not follow through on their commitments?</p>	<p>State Members, Stakeholders, Community Partners</p>	<p>Partner Commitment Tool, 6-month Action Plan/ follow-up Report</p>	<p>Follow-up call notes, Contextual Analysis, Notes from TA</p>	<p>Data Manager, Program Evaluator</p>

## **Communication/Dissemination**

The NACDD Communication's team can play an important role in celebrating the success of the PAN StEM States and disseminating the learning that emerges from each unique state. Communication and dissemination strategies may include:

- Case Stories
- Social media recognition (on day of meeting or shortly thereafter)
- Social media recognition of progress implementing the StEM Plan (at 3 or 6 months after the meeting)
- Newsletter articles in the NACDD Impact Brief
- Resource sharing on the NACDD website

## **General Timeline (Estimated)**

The timeline below is an estimated timeline of for implementation. 2019 states in blue font.

December 2019	<ul style="list-style-type: none"><li>• Release request for application to eligible states</li></ul>
November - December 2019	<ul style="list-style-type: none"><li>• <a href="#">Post StEM Support for 2019 States</a></li><li>• <a href="#">Post StEM Peer to Peer #1</a></li></ul>
January – February 2020	<ul style="list-style-type: none"><li>• Select and confirm 2020 states by January 27th</li><li>• Orientation for 2020 states on January 30<sup>th</sup> from 2:00 – 3:00 pm ET</li><li>• Pre-Stem Peer-to-Peer Calls with 2020 states (Perhaps Mondays in Feb: 10, 17, 24<sup>th</sup>)</li><li>• <a href="#">Post StEM Support for 2019 States</a></li><li>• <a href="#">Post StEM Peer to Peer #2</a></li></ul>
February – March 2020	<ul style="list-style-type: none"><li>• StEM 2020 Strategy Sessions and Meeting Planning Phase</li><li>• <a href="#">Wrap Up Phase for 2019 States - one-hour interviews with each state to evaluate progress and collaboratively develop a state specific summary detailing lessons learned and plans for continuous improvement.</a></li></ul>
April – August 2020	<ul style="list-style-type: none"><li>• StEM 2020 Meetings held with 4 states (one from Year 1 carryover)</li><li>• Post StEM meeting reports and draft plans completed</li></ul>
August – December 2020	<ul style="list-style-type: none"><li>• Post StEM Support to 2020 States</li><li>• Post StEM Peer to Peer Calls 1 &amp; 2</li></ul>
January 2021	<ul style="list-style-type: none"><li>• <a href="#">Wrap Up Phase for 2020 States - one-hour interviews with each state to evaluate progress and collaboratively develop a state specific summary detailing lessons learned and plans for continuous improvement.</a></li></ul>

# PAN StEM Request for Technical Assistance Form

## APPLICANT INFORMATION

State Health Department Name\*

Chronic Disease Director Name\*

State/Territory\*

Email Address\*

Phone Number\*

Designated Team Lead Name (Point of Contact):\*

POC Email Address\*

POC Phone Number\*

## COMMITMENT

Please review the list of required commitments for participating in PAN StEM. Check each item to indicate your commitment to completing each activity.

\* a. The Chronic Disease Director and/or Team Lead will be required to attend up to 3 peer-to-

peer calls with other involved states for learning and sharing. Additionally, the team lead will need to be available for 5 - 8 planning calls prior to the in-person meeting. The purpose of these calls is to develop the meeting purpose, objectives, priority planning areas, invitation language, agenda, and other aspects of meeting planning.

\* b. The Chronic Disease Director and/or Team Lead must attend the State Engagement Meeting in your state and should play a key role in supporting the process, including in the breakout groups and providing subject matter expertise.

\* c. The Chronic Disease Director and/or Team Lead and lead staff, and planning area leads (internal or external to the unit) participation in a 2 hour in-person debrief meeting the morning after the State Engagement Meeting.

\* d. The Chronic Disease Director and/or Team Lead (as applicable) will be available for post meeting calls for up to six-months following the State Engagement Meeting to receive action plan implementation support from NACDD.

\* e. The Chronic Disease Director and/or Team Lead completion of the NACDD evaluation and communication team requests that support dissemination of the learning to broader audiences and to meeting participants.

## POSSIBLE DATES

Please rank all the possible dates for the PAN StEM Meeting in your state (1 indicates your top choice).

Please note: The State Engagement Meetings is just one day but travel to/from the meeting location and the post meeting follow up will require at least 3 days of commitment by the NACDD Team and State Health Department. Dates listed below are a range of dates that will be determined by the national selection committee based on state staff and venue availability (dates include NACDD team travel dates).

**April 21 – 25\***

**May 4 – 9\***

**May 26 – 29\***

**June 1 – 5\***

**June 8 – 12\***

**June 15 – 19\***

August 3 – 7\*

Select ▼

## PROJECT PROPOSAL

Items 1-7 below will be scored.

**\*\*Please limit 150-word response to each question\*\***

**1. Please provide a brief interest statement as to why your state wants to participate in a StEM for the PAN activities.\***

**2. Please list your potential PAN topic area of interest that aligns with this application and explaining the work to date, current momentum, and how StEM can assist you in advancing the effort, listing a specific population group that you intend to focus efforts on? (i.e., youth, vulnerable populations, people with disabilities, etc.).**

**3. Please describe the urgency and/or need for addressing the selected PAN issue in new and or different ways by multiple-sector partners, such as key state partners, funders or decision makers and or how would you use this model to create the need or urgency.**

**4. Please describe how you propose to support implementation and sustainability of-a multi sector PAN action plan post StEM meeting (please include any human resources, funding or other support from your or your partner agencies.**

**5. Please describe any limitations to success in your state that you think this process can help overcome.\***

**6. Please list and describe influential champions or catalysts who can bring cross-sector leaders and beneficiaries together through the StEM Model.**

**7. Please list any relationships that exist, such as an existing coalition or partnership, that will enable engaging a broad, cross-sector group of actors to participate in and then lead or support implementation of the defined action steps. (Please include existing coalition and list specific partners (up to 10) you plan to invite to the in-person StEM and if identified partners ready and willing to participate in your StEM efforts.)**

**8. Please provide any other information that supports this application that has not been described above (not scored).**

Send me a copy of my responses

Submit

