

Let's Go! 2009 Annual Report

November 2009



Let's Go! is generously funded by the founding partners:



And Platinum Sponsor



Project Overview

Background. In 2006, seven business leaders representing Anthem Blue Cross and Blue Shield in Maine, Hannaford Bros. Co., MaineHealth, Maine Medical Center, TD Bank, Unum and United Way of Greater Portland joined together to launch an effort to improve the health of children and families in the Greater Portland Maine area. These funders were later joined by Harvard Pilgrim Health Care Foundation. Working through a collaborative process branded *Let's Go!*, these organizations have committed funding and resources to develop and implement a project with the shared vision of creating healthier communities and healthier children. By building on the strengths of each partnering organization, *Let's Go!* ultimately seeks to:

- Increase the proportion of youth, ages -18, at a healthy weight
- Implement integrated nutrition and physical activity programs
- Evaluate the interventions to make mid-course improvements and learn from experiences
- Create a model that can be replicated in other parts of Maine and nationally
- Assure the sustainability of the results

The population of focus for *Let's Go!* in its initial five-year project period is children, youth and their families in the following 12 communities in greater Portland: Cape Elizabeth, Cumberland, Gorham, Falmouth, Freeport, North Yarmouth, Portland, Scarborough, South Portland, Westbrook, Windham, and Yarmouth.

Staff Resources. In order to leverage organizational strengths, *Let's Go!* involves a partnership of program staff and expertise at two organizations, United Way of Greater Portland and the Kids CO-OP at the Barbara Bush Children's Hospital at Maine Medical Center. *Let's Go!* staff include:

- Emily Rines, MPH, CHES, Project Director
- Victoria Rogers, MD, Medical Director (part time)
- Carter Friend, Vice President Community, Community Impact (advisory)
- Emily Walters, Program Manager
- NaomiSchucker, MPH, Program Manager (MaineHealth in-kind donated staff)
- Heidi Kessler, School Intervention Coordinator
- Karen Schebaum, Administrative Associate
- Molly Lee, Administrative Associate (part time)
- Brian Ryan, Data Coordinator (part time)

In addition, each of the major funding organizations has contributed significant in-kind staff expertise, time and leadership to this project.

Project Collaboration. *Let's Go!* collaborates with many organizations that serve people in greater Portland or have an interest in reducing obesity and promoting healthy lifestyles.

Collaborators include:

- Kids CO-OP at The Barbara Bush Children's Hospital at Maine Medical Center
- Healthy Maine Partnerships
- Healthy Portland
- Maine Center for Disease Control and Prevention/ Physical Activity and Nutrition Program
- Maine Youth Overweight Collaborative
- Participating Schools, Child Care Providers, Health Care Providers, Employers, Communities
- Boys and Girls Clubs of Southern Maine, YMCAs
- WinterKids

Project Highlights. This annual report covers the period January 1, 2008 – June 30, 2009 (the 18 month reporting period reflects a change in the project year from January-December to July-June). During this period, the project made the following changes of note:

- The project initially had a strong emphasis on developing community-based interventions from the ground up through community teams, combined with recommended *Let's Go!* interventions. In the past 18 months, the project has evolved as it found strong interest and success in providing guidance on *Let's Go!* recommended interventions.
- Reflecting this change, in early 2008 *Let's Go!* added a Program Manager position at the Kids CO-OP at Barbara Bush Children's Hospital at Maine Medical Center to support *Let's Go!* intervention implementation.
- In February 2008, Assistant Project Director, Jessica Siraco left the United Way to work at another organization. After her departure, her responsibilities were redistributed to existing project staff to align with their project work. As part of the transition, the Youth Advisory Committee (YAC) initiative was discontinued. Youth are now consulted on specific program issues or topics rather than participating on a separate team.
- In June 2008, Robbie Lipsman stepped down as *Let's Go!* Project Director and Emily Rines M.P.H., C.H.E.S. was hired as the new Project Director.

During this period, *Let's Go!* was recognized for its work addressing childhood obesity in a number of ways:

- In July 2008, *Let's Go!* was invited to a Federal CDC Roundtable of 25 select successful community obesity prevention programs.
- *Let's Go!* was awarded the Maine Public Health Association's 2008 Program Recognition Award.
- *Let's Go!*'s Winter Activity PSA won 2nd place in the TV Spot category at the 2008 Maine Association of Broadcasters Awards.

The *Let's Go!* Multi-Sector Approach

Let's Go! uses a multi-sector approach to reach families where they live, study, work and play to reinforce the importance of healthy eating and physical activity. The program is based on the premise that if families are exposed to the health promotion messages through several settings, and if those settings have policies and environments that support healthy choices, they will be more likely to adopt or maintain the behaviors in their daily lives.

The *Let's Go!* program interventions center on the promotion of a simple mnemonic reminder of four behaviors that lead to good health – “5-2-1-0”. These behaviors are supported by science and endorsed as recommendations by medical professionals:

- 5- Eat at least five fruits and vegetables per day
- 2- Limit TV and computer use (not related to school) to two hours or less a day
- 1- Get one hour or more of physical activity every day
- 0- Limit the consumption of sugary drinks and replace them with water or low-fat milk

Since 2007, *Let's Go!* has worked in several priority settings including schools, healthcare practices, child care providers, after school centers, and with employers to support their efforts in promoting healthy eating and physical activity. As of June 2009, *Let's Go!* had engaged :

- 43 schools educating more than 16,842 students,
- 13 child care sites caring for more than 1,000 children,
- 128 physicians in practices throughout the 12 communities,
- 8 communities with specific 5-2-1-0 grant funded projects focused on environmental changes,
- 5 after school recreation centers supporting 780 youth members; and
- 6 of Portland's largest employers.

***Let's Go!* Experience Informed a Community Model for Addressing Childhood Obesity**

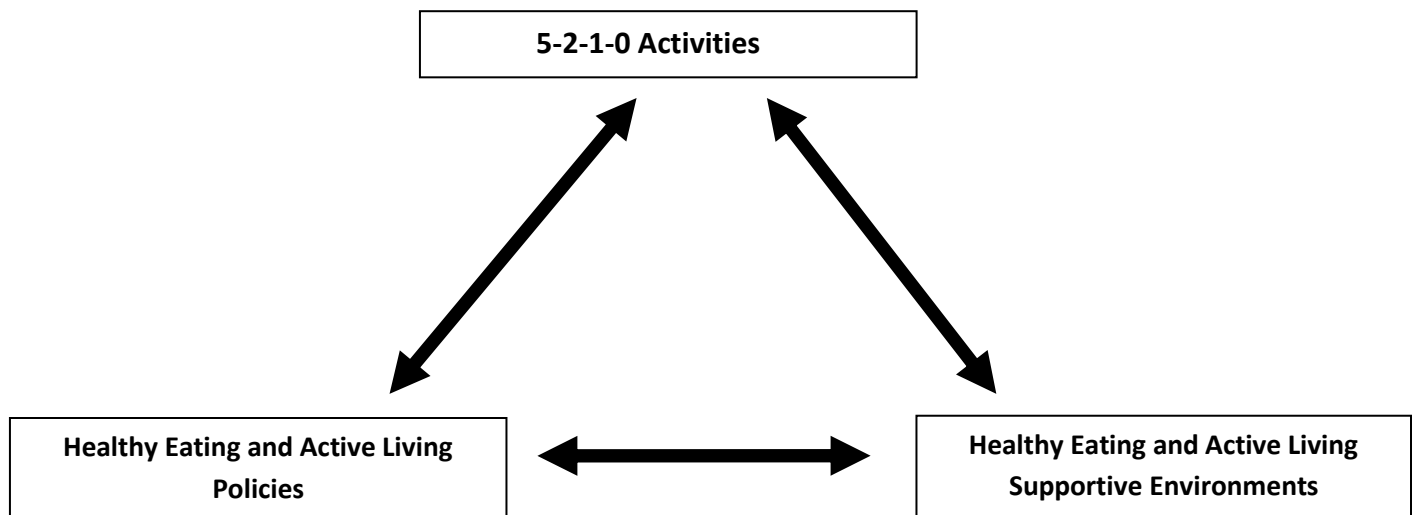
Since the inception of the program, *Let's Go!* has intended to use its experiences and lessons learned to design a model for use by other communities. To this end, during the past 18 months, *Let's Go!* has conducted extensive evaluation, made process and program improvements, and documented program components to refine a best practice community model for obesity prevention. Specifically, *Let's Go!* convened a group of stakeholders and used their lessons learned to frame materials and develop a best practice model for others. The model, illustrated by the puzzle in Figure 1, has been carefully defined and posted on the website for the public. The *Let's Go!* Core Principles include:

- Environmental & Policy Change Influences Behavior Change
- Interconnectivity Across Sectors is Essential
- Strategies are Evidence Based & Continuously Evaluated

Figure 1. *Let's Go! Community Based Model for the Prevention of Childhood Obesity and Support of Healthy Living*



Figure 2. *Successful Behavior Change is a Result of Implementing 5-2-1-0 Activities, Supportive Environments and Policies*



Let's Go! Program Progress and Continued Challenges of Childhood Obesity and Behavior Change

The Program is making Progress and Meeting Benchmarks

At the beginning of each fiscal year, the program established benchmarks for each of its components to guide the work and gauge progress. The objective of each component is to increase activities, and to create supportive environments and policies that promote healthy choices. See Figure 2. To track these multi-faceted objectives, each program component adopted outcome as well as process benchmarks. Overall, *Let's Go!* met the majority of the benchmarks and continues to set stretch goals for the work. Appendix A contains a complete list of the benchmarks and the status for program year 2009 and the new set established for 2010.

The following summary provides highlights of the program activities and outcomes from January 2008- June 2009.

Many Parents are Aware of *Let's Go!* and find it Very Positive

As a result of the multi-sector approach, almost one-half of all parents in the 12 communities are aware of *Let's Go!*. In fact, the parents reporting exposure through more settings were more likely to be aware of *Let's Go!* and the 5-2-1-0 message. A telephone survey conducted with 800 parents in late spring 2009 showed that:

- 49% of all parents are now aware of *Let's Go!*,
- 43% of parents are aware of 5-2-1-0,
- 28% of all parents report seeing *Let's Go!* in three or more settings, and
- 96% of parents report positive reaction to the *Let's Go!* approach and messages.

Behavior Changes have Started to Emerge

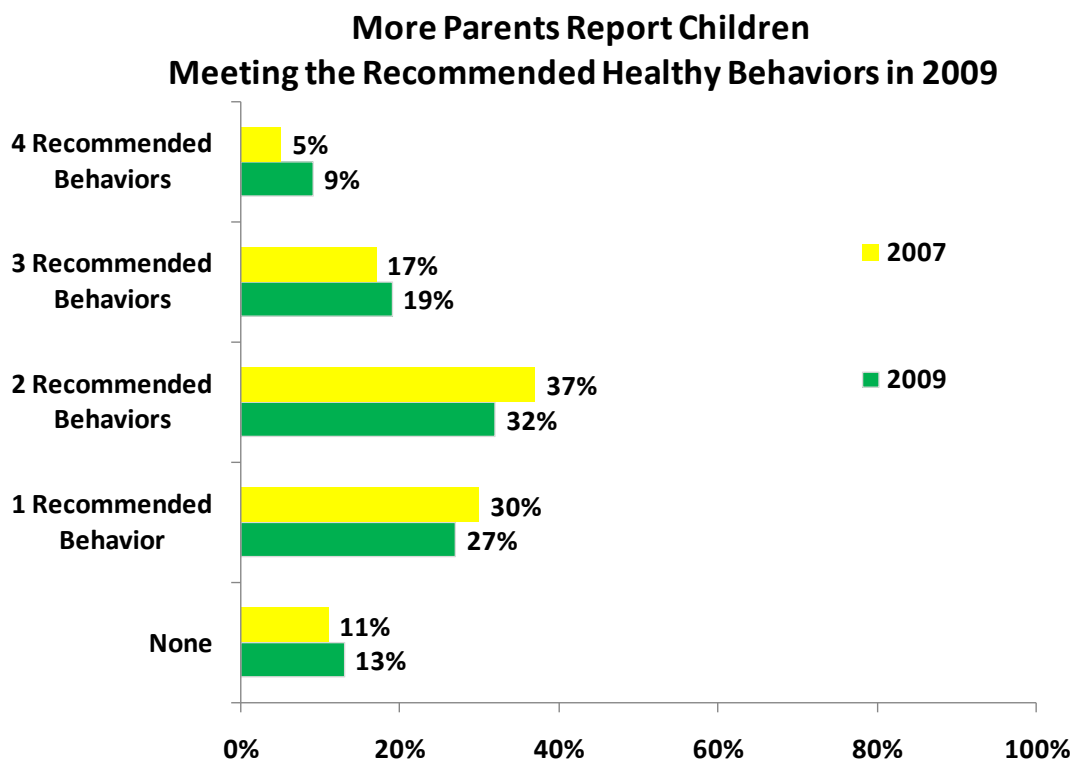
Let's Go! is focused on addressing the public health challenge of childhood obesity by encouraging families and children to eat healthy foods and increase their physical activity. After two years of implementation, early signs of positive trends in behavior change have started to occur. In the 2009 telephone survey, more parents reported that their children were meeting more of the 5-2-1-0 recommendations for healthy behaviors than in the 2007 survey. Specifically, a greater proportion of children were meeting at least three out of the four recommended behaviors in 2009 (28%) than were in 2007 (22%). See Figure 3.

When looking closely at subgroups of children, the survey revealed statistically significant changes among certain groups:

- Children ages 0 to 5 showed an increase in the proportion eating “5” fruits and vegetables. In 2007, 24% met the guideline, in 2009 42% met the guideline.

- Children from higher income households showed improvements in healthy eating and limiting screen time. Higher income includes households with total earnings over \$75,000 per year:
 - Meeting the recommended “5” fruits and vegetables was 18% in 2007 and 26% in 2009.
 - Meeting the 2-hour limit on screen time was 43% in 2007 and 53% in 2009.

Figure 3. More Parents Report that their Children are Meeting More of the Recommendations for 5-2-1-0 Behaviors



Source: Critical Insights RDD Telephone Surveys, Spring 2007 and 2009. (n=800 parents of children ages 0 to 18 in 12 communities in Greater Portland)

Parents Support School Policies to Limit Junk Food and Increase Physical Activity

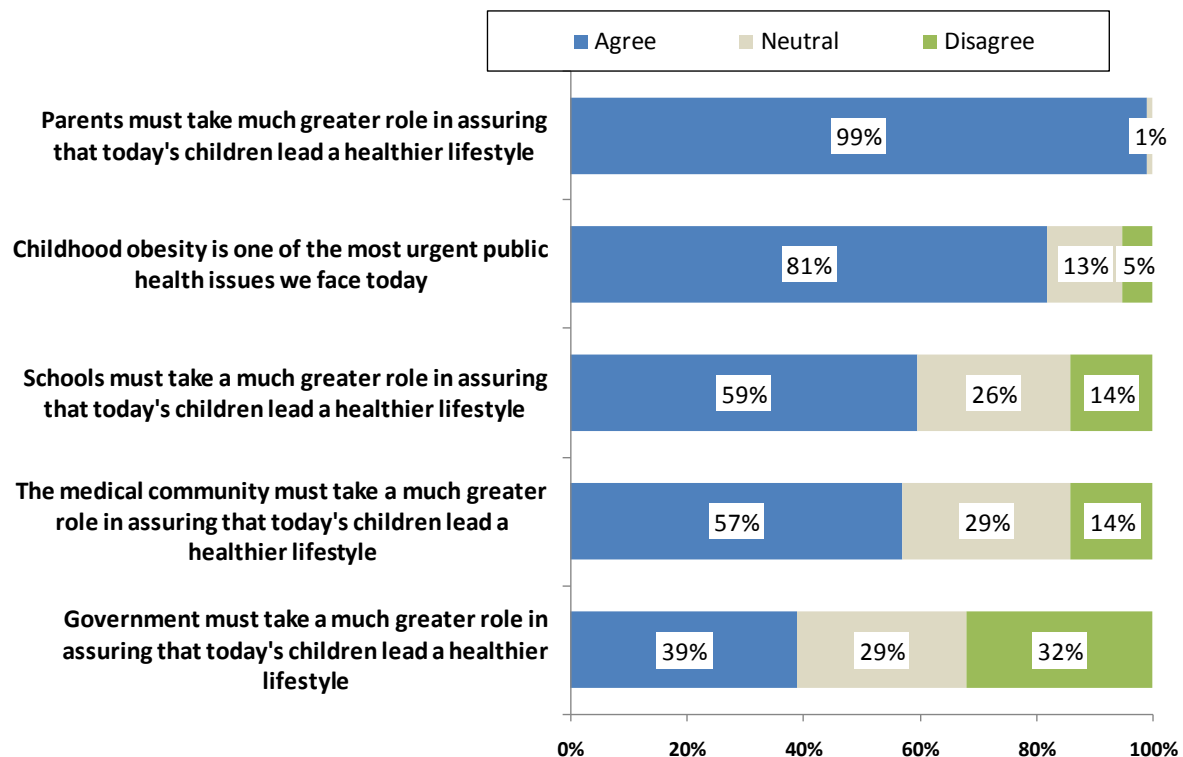
Survey findings also reveal that more than three-quarters of parents support school policies that limit junk food and increase the time spent in physical education.

- 77% support an increase in the amount of physical education during the school day for grades k – 8.
- 75% support a school policy that would ban the sale of junk food such as candy, soda or chips in vending machines during the school day.

Parents Believe They Should Play an Active Role in Their Child's Health Choices

The findings from the telephone survey revealed that a majority of parents (99%) agree that they must play a greater role in assuring healthy lifestyles for their children and a majority (81%) agree that childhood obesity is one of the most urgent public health issues. See Figure 4.

Figure 4. Most Parents Think They Should Play a Greater Role in Child's Health

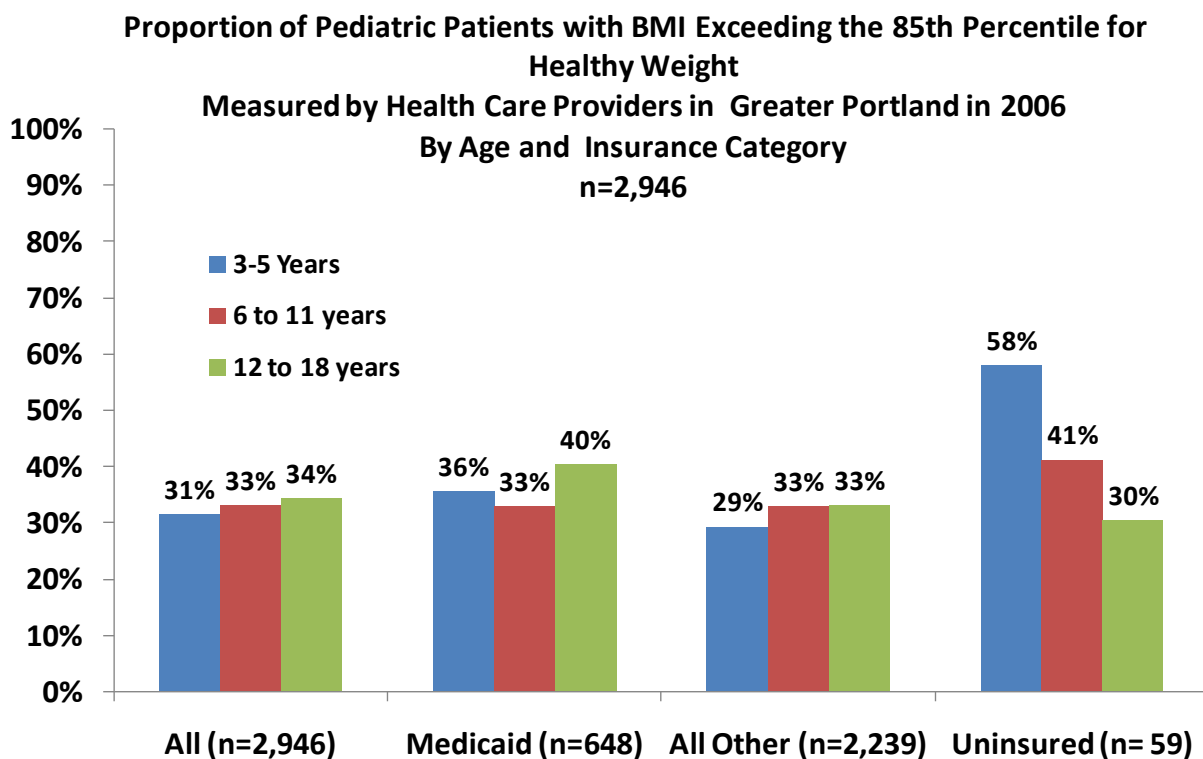


Source: Critical Insights RDD Telephone Survey, Spring 2009. (n=800 parents of children ages 0 to 18 in 12 communities in Greater Portland)

While progress has been made, Childhood Obesity Remains a Challenge

Let's Go! worked with Maine Medical Center researchers to summarize healthcare provider records on pediatric patient body mass index (BMI), an assessment of weight status. A baseline measure was established using 2006 data from provider registries in the area.¹ In 2006, the year before the launch of *Let's Go!*, about one out of every three children ages 3 to 18 were overweight or obese, with some differences by health insurance coverage. Comparing the regional rates to national rates for the same time period show that the prevalence of overweight is higher for 3-5 year olds (31.4%) than national rates (24.4%) and similar for ages 6 to 18 (33%) and similar for ages 6 to 18 (33%). See Figure 5.

Figure 5. One out of Every 3 Children, Ages 3 to 18, in Greater Portland are Overweight or Obese



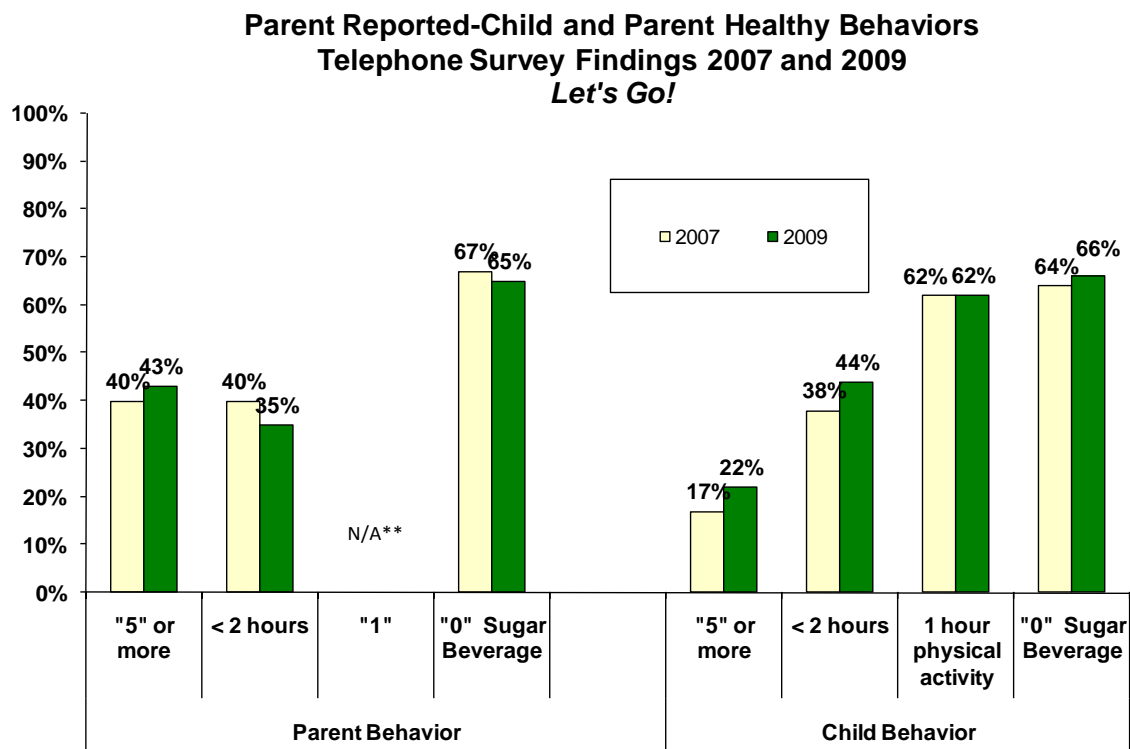
Source: Provider Practices in Greater Portland, Patient Registry Data, 2006. (n=2,946 children ages 3 - 18 years.)

¹ Registry data were used for analysis only, no individual patient data were shared with Let's Go!.

Most Children are Not Meeting Recommended Levels for Healthy Eating and Screen Time

The *Let's Go!* research shows that the underlying positive health behaviors are not habits for all children. While progress has been made in more parents reporting that children are meeting at least some of the 5-2-1-0 behaviors, looking at the overall population shows that most children do not eat the recommended 5 fruits and vegetables every day nor meet the screen time recommendations. See Figure 6.

Figure 6. Behavior Change is a Long Term Challenge



** No comparable physical activity question for parents is available.

Source: *Let's Go!* Telephone survey with parents in the 12 communities, August 2009. n=800

Experience Implementing *Let's Go!* Program Components

Marketing Communications

Throughout the period January 2008 through June 2009, *Let's Go!* implemented a comprehensive communications plan to raise awareness for 5-2-1-0 and healthy choices for eating and activity. The marketing communications efforts covers the entire 5-2-1-0 region and serve as a backdrop for the individual programs of *Let's Go!*. Since 2007, the awareness of *Let's Go!* and 5-2-1-0 have increased significantly, from a low of 9-14% to 43-49% in 2009. See Figure 7. The communications strategies are intended to provide education on the 5-2-1-0 message and steer people to the letsgo.org website for further program information and ideas on staying healthy. Figure 8 shows the relationship between the communications efforts and the web site traffic.

The communications strategies for January 2008 through June 2009 included:

TV Ads/Public Service Announcements

- Ads promoting the “1” hour of physical activity and limit screen time messages
- Ads promoting the “5” fruits and vegetables a day and “0” limit sugary drinks messages
- Flying kites ad-promoting activity
- Picnic ad-promoting activity and healthy eating
- Playground ad-promoting activity
- Winter activities-promoting activity
- Drinking more water and reducing sugar sweetened beverages
- Merits of canned and frozen fruits and vegetables as healthy options

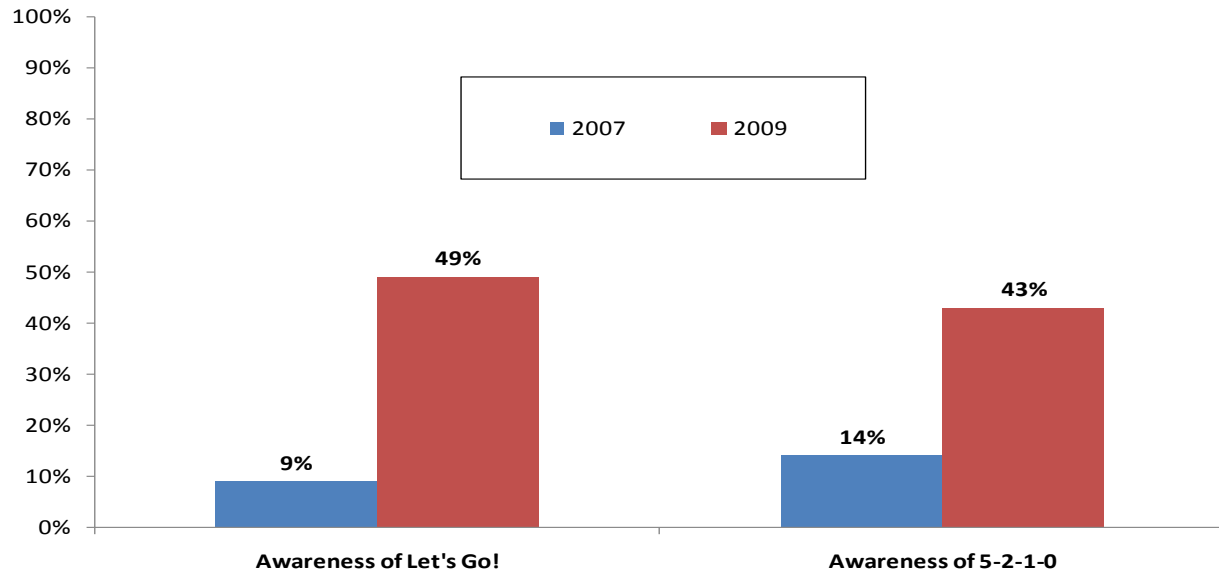
Redesigned Web Site

- Visits have increased overall and more traffic at the times when the ads run

Redesigned Toolkits and Resources in Print and on the Web

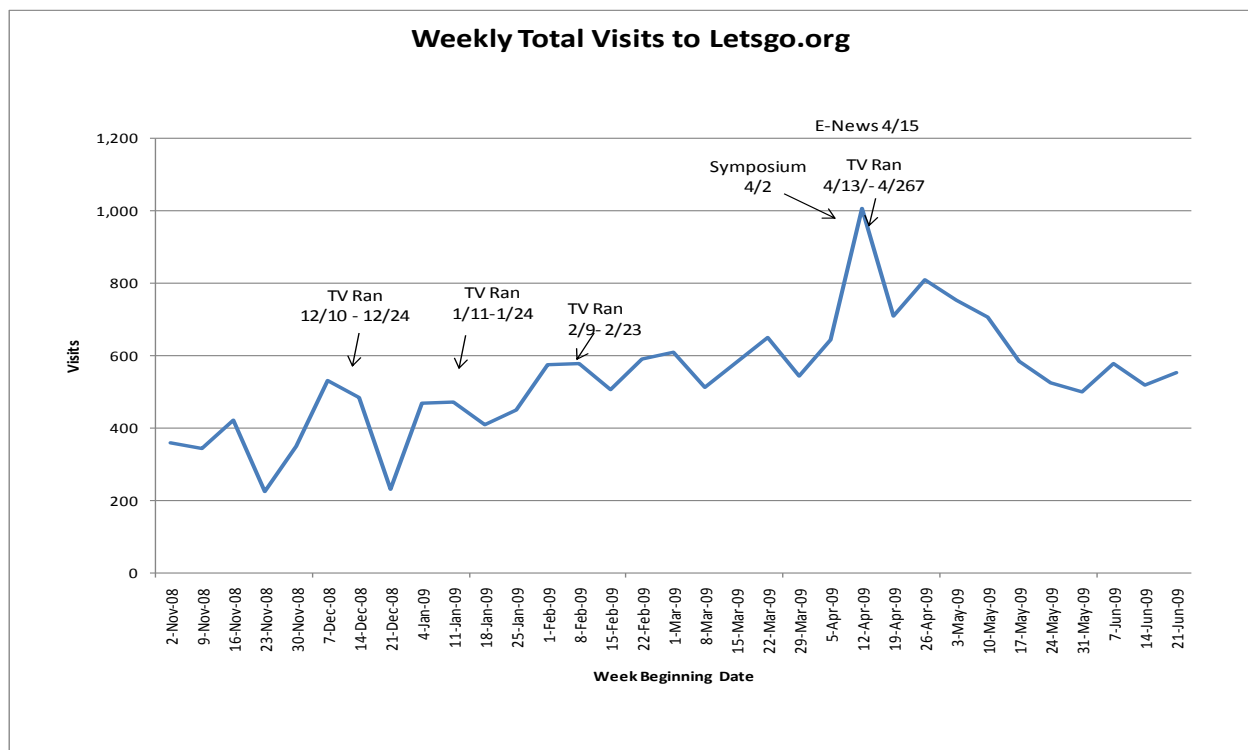
- *Let's Go!*/5-2-1-0 Goes to School Toolkit Update
- 5-2-1-0 Goes to Child Care Toolkit

Figure 7. There was a Large Increase in Awareness of *Let's Go!* and 5-2-1-0 Messages in Greater Portland from 2007 to 2009



Source: Critical Insights RDD Telephone Surveys, Spring 2007 and 2009. (n=800 parents of children ages 0 to 18 in 12 communities in Greater Portland)

Figure 8. Weekly Visits to Letsgo.org November 2008 – June 2009

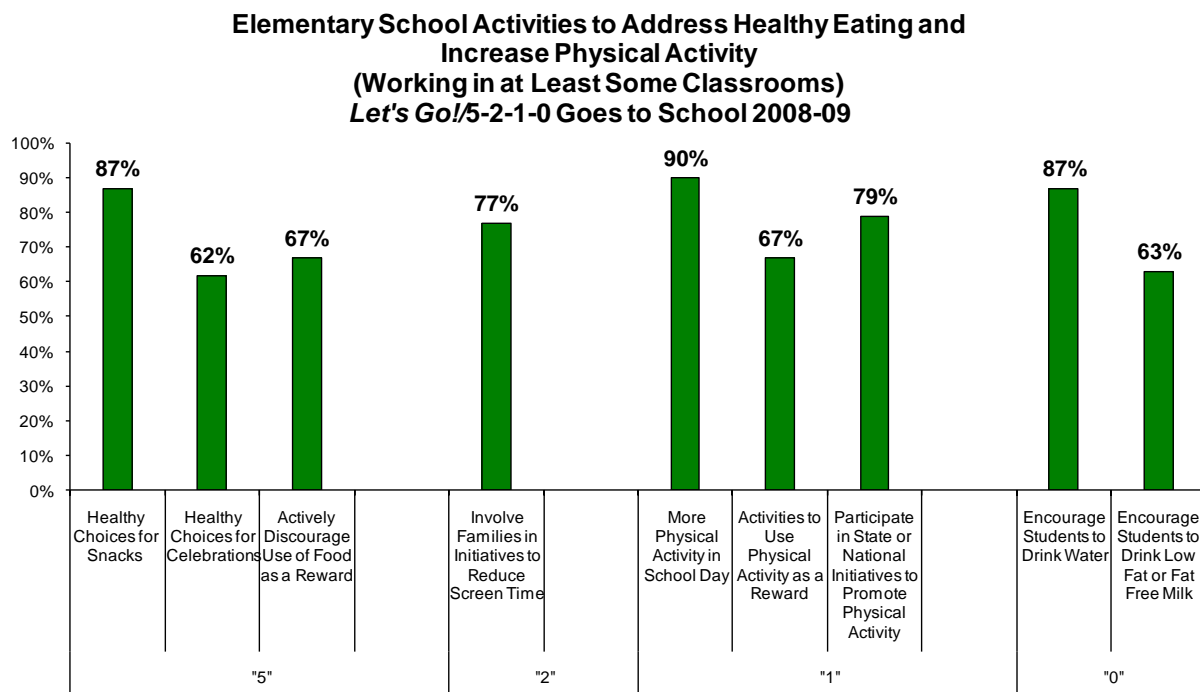


Let's Go! 5-2-1-0 Goes to School

A primary focus of the *Let's Go!* project is embedding the 5-2-1-0 messages in the schools where there are opportunities to influence children's behavior during the school day as well as through their school lessons. In the 2007-08 school year, the program was introduced into 20 schools. In 2008-09, 23 more schools joined for a total of 43 schools covering more than 16,000 students. Evaluation data show that positive change is occurring:

- Schools are making progress implementing the ten 5-2-1-0 strategies in at least part of the school. See Figure 9.
- The progress varies for schools with less experience with the program and for schools with higher rates of students qualifying for free and reduced lunch.
- School administrators are noting positive changes in their schools, but also recognize the long road to behavior change.
- Policy and environmental change is starting to occur in all schools.
- Program management resources are spread thin across 43 schools and would benefit from moving from a one-on-one approach to using more group communication and management methods.

Figure 9. Schools are Implementing Many of the 5-2-1-0 Strategies



Source: *Let's Go! 5-2-1-0 Goes to School 2008-09, Year End Elementary Implementation Survey.* (n=30 elementary schools)

School Nutrition Director Work Group

Throughout 2008 and the first half of 2009, nine school nutrition directors representing 10 of the 11 school districts participated in a work group to discuss food service and nutrition issues as well as the challenges they face in providing nutritious meals to students in their schools. During this time, *Let's Go!* worked with the directors to coordinate efforts to promote healthy choices for students eating in the school lunch program. The activities included:

- “Go, Slow Whoa” nutrition labels that show students which foods are healthy, which ones are fine in moderation, and others that are for special treats only (3 districts participated).
- Maine Harvest Lunch Program a promotional event where foods made from local farm produce were served and celebrated in the school. The event promoted healthy choices with students as well as reinforced the opportunities to purchase food or grow food locally.
- Nutrition directors in the schools worked within their own schools to make changes to support healthy choices such as eliminating whole milk and replacing with low fat milk, adding a salad bar, using more produce from the school garden, introducing classroom lessons about gardening to promote school gardens, starting a new school garden and remodeling the cafeteria.

5-2-1-0 Goes to Child Care

The work in the child care setting began with a series of trainings conducted in partnership with local health coalitions and child care training events throughout 2008. The early work helped *Let's Go!* create materials and modify the 5-2-1-0 approach for the youngest children. From January to June 2009, the 5-2-1-0 Goes to Child Care program conducted a pilot with 13 child care sites with over 1,000 children. The focus of the pilot was to test the new materials, and to receive feedback from providers as well as the families they serve. During this time, *Let's Go!* learned more about the network of child care providers in the region, their operating norms and their challenges and barriers they face in providing healthy options for their children. General feedback from providers included:

- Providers liked the ready-made activities that could be added on to on-going curriculum.
- Asked for more guidance with the site's menus.
- Discussed challenges with parents bringing in unhealthy snacks and opportunities for providing parents with more information about preparing healthy meals and snacks.
- There is a need for staff education about the obesity epidemic and the 5-2-1-0 message.

5-2-1-0 Goes to After School

From 2008 to 2009, *Let's Go!* worked with six sites that serve children and youth after the school day and on vacations. These sites typically provide their participants with recreation opportunities and often times serve them meals or snacks. *Let's Go!* initially worked with 15 sites to provide training on the HEAT (Healthy Eating Active Time) curriculum to integrate the 5-2-1-0 behaviors within the sites' day-to-day activities to 15 after school program sites. Once established with the

clubs in fall 2008, *Let's Go!* developed a “Redyness Scale”² to provide the engaged sites with strategies on how to implement the 5-2-1-0 messages and activities into their facilities. Also during this time, the program began to focus on longer-term impacts by developing nutrition guidelines for five of the afterschool sites and in March 2009, the Boys and Girls Club of Southern Maine adopted and implemented a new set of “Nutrition and Snacking Guidelines” that followed the 5-2-1-0 recommended guidelines to improve eating choices for thousands of youth.

Community

Community supports and social environments influence health behaviors for children and adults. Communities that encourage and support recreational opportunities and healthy eating usually experience more participation by community members. To facilitate community-based projects that promote 5-2-1-0 behaviors, *Let's Go!* awarded two sets of mini-grants to communities with plans to involve community members in the effort. The first year, grantees focused on implementing one-time activities, the second-year grantees proposed projects that created more long-term changes. See Figure 9 for a list of projects.

Figure 9. *Let's Go!* has Supported Eight Communities with Mini-Grants for Projects

<u>Let's Go!/Community Mini-Grant Projects</u>	
South Portland	Introduced healthy snacks, ideas for increased movement to low income families.
Westbrook	After school teen drop-in center activities included a walking program, family dinners, and new physical activity choices.
Windham	Introduced snowshoes and winter activities program to elementary students.
Healthy Portland	Produced and distributed 2,000 recreational maps, implemented an orienteering and compass program, installed water fountains in 3 schools.
Falmouth	Volunteers built 6 miles of hiking/biking trails, kiosks on protected properties, erected signage for the trails. The work increased trail use.
Westbrook	Built Prides Corner Trail.
Freeport	Cumberland County YMCA constructed a trail, added signs and promoted use. More people using trails.
Gorham	Worked with church to create “5-2-1-0 Goes to Church”.

In addition to the community mini-grant projects, *Let's Go!* engaged youth in activities in the community. *Let's Go!* facilitated a Youth Advisory Committee (YAC), engaging 10- 15 youth in a few community wide events. The events included working with *Let's Go!* to host a Sea Dogs baseball game, planning WinterFit activities as part of the Portland WinterFest in February 2009 and providing input into the development of *Let's Go!* materials and resources. Finally, *Let's Go!*

² “Redy” is the name of the *Let's Go!* mascot.

provided materials and resources to groups interested in conducting StoryWalks in their communities, promoting reading children's stories with physical activity.

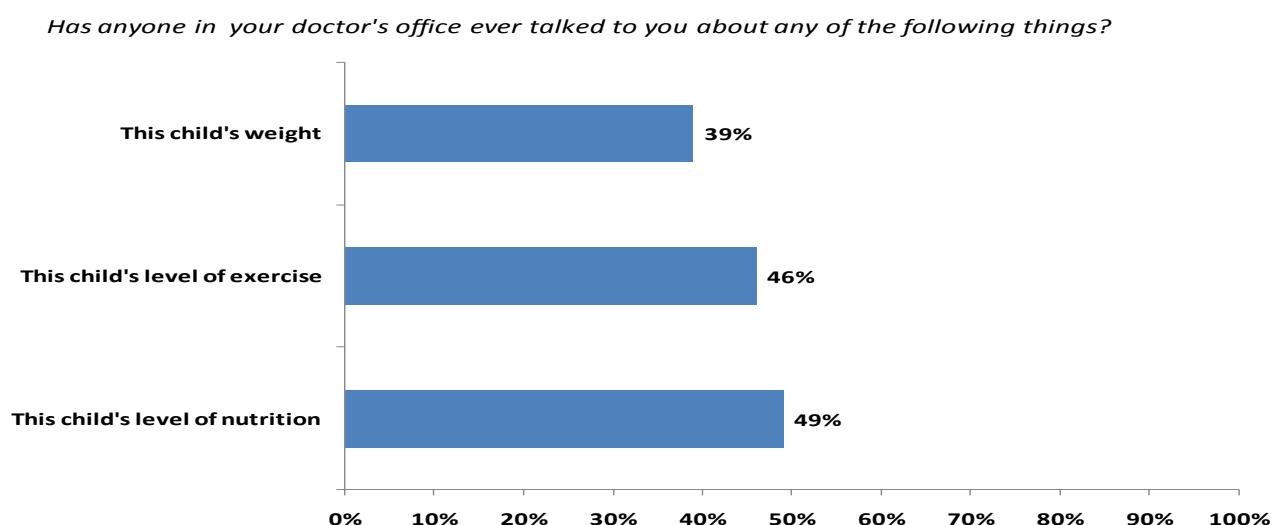
Healthcare

Physicians and healthcare providers are important sources for advice to families and children on health behaviors. Information and encouragement from healthcare providers can lead to behavior change for many. To leverage this important resource, MaineHealth, in collaboration with Maine Medical Center Physician Hospital Organization (MMC PHO), has designed a healthcare intervention to educate primary care physicians, including pediatricians, on childhood overweight and obesity. The intervention, co-branded and coordinated with *Let's Go!*, provides outreach, supporting materials and training to physicians in their practice settings, and other healthcare providers in the region.

- The intervention has been successful in increasing the number of patients in MMC PHO practices receiving a "healthy weight bundle." The bundle includes height and weight measures, calculation of body mass index, weight classification, blood pressure, and a 5-2-1-0 survey. The current count of patients receiving the full bundle is 8,744, representing approximately 59% of the patients in the registry.
- The initiative conducted 9 educational and outreach sessions for physician practices from January 2008 to June 2009.

The recent telephone survey conducted with parents in the 12 communities in spring 2009 showed that changes are starting to occur. Close to one-half of all parents said that their child's healthcare provider asked about exercise and nutrition during an office visit and almost two out of five reported having discussions about their child's weight. See Figure 10.

Figure 10. Healthcare Providers are Asking about Child's Weight and Behaviors, but There is Room for Improvement



Source: Critical Insights RDD Telephone Surveys, Spring 2007 and 2009. (n=800 parents of children ages 0 to 18 in 12 communities in Greater Portland)

Workplace

Adults spend much of their time at work and their health behaviors and knowledge can be greatly influenced by the work environment. Working with the founding partners, some of Portland's largest employers, *Let's Go!* has provided these employers with tips and web-based resources to use to promote healthy eating and physical activity. Specifically, *Let's Go!* collaborated with the local Healthy Maine Partnerships to distribute tool kits to interested employers. During this time period, 81 kits were shared.

Disparate Population

Recognizing that not all groups of people receive or respond to information in the same way, *Let's Go!* focused efforts on understanding more about sub-groups of families that may not receive the 5-2-1-0 messages or may have more challenges or obstacles to changing behavior than the general population. *Let's Go!* and MaineHealth staff conducted focus groups with refugee and immigrant populations, and low income rural and urban populations, groups known to face more challenges than most families in the Portland region. The interviewers found that:

- People shop at markets closest to their homes and may not go to farmers markets.
- Parents believe their children are healthy but they themselves are not healthy.
- Parents prefer that their children are safe at home rather than outside, even if it means more screen time.
- Parents did not see themselves as good role models for 5-2-1-0 behaviors.
- Parents would like to participate in group activities such as Zumba dancing, weight lifting, and other activities.

Let's Go! is considering these findings and working to introduce a disparate population focus to each intervention in each setting.

Moving Forward

While this report describes the progress made from January 2008 through June 2009, the program has already incorporated many of the lessons learned and has adapted programming and messaging to improve effectiveness. The new benchmarks for programming are found in Appendix B.

Highlights of the work for Fiscal Year 2010 include:

- Continued work with the set of 43 schools as well as the new schools with more emphasis on making policy and environmental changes.
- More concentrated effort to work with child care providers both in the Greater Portland region and with state credentialing and continuing education programs for child care.
- Newly designed set of interventions for the school nutrition programs limiting foods of lower nutritional quality and increasing communications of the nutritional content of food service offerings.
- An increased focus on disparate populations, in particular, low income Mainers.
- On-going and expanded collaboration with local, state and national partners to share lessons learned and increase capacity for obesity prevention.

Status of FY09 *Let's Go!* Benchmarks

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results												
Overall Program Benchmark																	
Increase from 25% to 32% the proportion of youth in the 12 communities who are reported to adhere to recommended levels for at least three of the four 5-2-1-0 behaviors by December 31, 2008.	Critical Insights Survey	May 2007	Spring 2009	Achieved	*Updated weighted data from 2007 reveals that baseline % was 22%. The results show that in 2009 28% now report to adhere to at least 3 out of the 4 (5-2-1-0) behaviors. The benchmark was achieved going from 22% to 28%. This is same proportional increase as listed in the benchmark.												
Document the baseline BMI prevalence in the 12 communities of Greater Portland by June 2009	BMI Prevalence Study		June 2009	Achieved	<div>A proportional sampling study of local physician’s offices reveal the following data for different age group in the ≥85% category. This data is from 2006.</div> <table><tr><td>Age</td><td>GP</td><td>NHANES</td></tr><tr><td>3-5</td><td>31.4%</td><td>24.4%</td></tr><tr><td>6-11</td><td>33%</td><td>33.3%</td></tr><tr><td>12-18</td><td>34.3%</td><td>34.1%</td></tr></table> <div>A full report is available on request</div>	Age	GP	NHANES	3-5	31.4%	24.4%	6-11	33%	33.3%	12-18	34.3%	34.1%
Age	GP	NHANES															
3-5	31.4%	24.4%															
6-11	33%	33.3%															
12-18	34.3%	34.1%															

Educational Continuum					
<i>Schools- Behavioral, Environmental and/or Policy Outcomes</i>					
1. Increase the proportion of elementary kids who participate in two of the four 5-2-1-0 behaviors (fruit & vegetable consumption, screen time, physical activity and soda consumption) in the 2008 - 2009 school year by June 2009.	Critical Insights Survey, a telephone survey of parents in the 12 communities	Spring 2007	June 2009	Achieved	2007 59% 2009 61%
2. Increase to 33% (14 schools) of all enrolled schools adopting at least 2 Let's Go recommended environmental changes in the 2008 – 2009 school year by June 2009.	Implementation Survey	May 2009	Sep 2009	In Progress	Staff is in progress of defining environmental changes. It appears that many schools have made at least one environmental change. Staff needs to identify the schools and the environmental changes. We anticipate accomplishing this by Dec 2009.
3. Increase to 15% (7 schools) of all enrolled schools adopting at least 1 Let's Go recommended policy change in the 2008 – 2009 school year by June 2009.	Implementation Survey	May 2009	Sep 2009	Achieved	9 schools adopted a policy reflecting 5-2-1-0 and/Let's Go! List available on request

<i>Schools- Process Outcomes</i>					
1. Increase total program reach by 100% from 8,713 students to 17,426 students by June 2009.	Tracking data; ongoing	Oct 2008	Sep 2009	Achieved	*Total number of children reached was 16,862. Baseline number of students was actually 8,047. A 100% increase of students would be 16,094.
2. Increase from 14 schools (35%) to at least 26 elementary schools (65%) in the 12 communities participating in Let's Go Takes 5210 to School in the 2008 – 2009 school year by June 2009.	Tracking data; ongoing	Oct 2008	Oct 2009	Achieved	Total number of elementary schools was 31.
3. Increase from 6 middle and high schools (20%) to 10 (34%) of the middle and high schools in Greater Portland region participating in the 2008 – 2009 school year by June 2009.	Tracking data; ongoing	Oct 2008	Oct 2009	Achieved	Total number of middle/high schools was 12.
<i>School Nutrition Process Outcomes</i>					
1. Increase the nutritional value of posted menu options in 30% (3) of the school districts based on the Healthier US School Challenge Criteria in the 2008-2009 school year by June 2009.	Menu analysis; on going	August 2008 for 2007 menus	June 2009	Not Achieved	During the year, it was determined that the current measurement tool would not be a reliable tool to determine the outcome. For FY2010 we have redesigned our intervention and developed new measurement tools.

2. 80% of all School Nutrition Directors in 11 districts will implement an environmental change by June 2009.	Environmental site visits, tracking data	Fall 2008	June 2009	Achieved	List available upon request
3. At least 90% (9 of 10) of the school nutrition directors in 11 districts will participate in School Nutrition Director Workgroup in the 2008 - 2009 school year by June 2009.	Tracking data; ongoing	On-going	June 2009	Achieved	List available upon request
4. 40% of school nutrition directors (4 of 10) will be actively involved with the 5210 Goes To School team in 11 districts in the 2008 - 2009 school year by June 2009.	Tracking data; ongoing	On-going	June 2009	Achieved	List available upon request
<i>After School –Behavior, Environmental, and/or Policy Outcome</i>					
1. 100% of the Boys and Girls Club of Southern Maine in the Greater Portland region (4 distinct sites serving over 780 youth) will adopt a Let's Go recommended nutrition policy that supports the 5210 message by June 2009.	Tracking Data	March 2009		Achieved	<p>Snack policy was developed and implemented in all 5 Boys and Girls Clubs of Southern Maine.</p> <p>The policy is available on request.</p> <p>This policy has generated interest from additional Boys and Girls Clubs throughout the state and nationally.</p>

<i>After School-Process Outcomes</i>					
1. The Boys and Girls Club of Southern Maine (4 distinct sites with over 780 youth) will participate in the after school intervention pilot by June 2009.	Tracking data; ongoing	On going		Achieved	List available upon request
<i>Pre-School & Child Care-Process Outcome</i>					
1. Pilot with the 10 largest and most diverse child care sites in Greater Portland (baseline: 0) with over 1000 children the 5-2-1-0 Child Care Intervention by June 2009.	Tracking Data	On going		Achieved	The pilot project was implemented in 13 sites. List available upon request

Healthcare					
<i>Healthcare-Process Outcomes</i>					
<p>1. Increase by 15% the number of patients (from a baseline of 1,862*) who have a Healthy Weight Bundle (height/weight, BMI, weight classification, blood pressure, and 5-2-1-0 survey) recorded in their chart June 2009.</p> <p>*This number represents the time frame of January 2008 – June 30, 2008. The Healthy Weight Bundle was not collected prior to January 2008.</p>	<p>Clinical Improvement Registry, Electronic Medical Record, BMI Prevalence Study; ongoing</p>	Ongoing	Ongoing	Achieved	<p>As of June 30, 2009, 8,744 patients had a Healthy Weight Bundle in the Clinical Improvement Registry. This represents 59% of the patients in the registry.</p>
<p>2. Increase by 15% the number of Let's Go Educational Outreach sessions (from a baseline of 5*) for health care providers practices by June 2009.</p> <p>*This number represents the time frame of January 2008 - June 30, 2008; the Let's Go! Educational Outreach sessions were not conducted prior to January 2008.</p>	<p>Tracking data; ongoing</p>	Ongoing	Ongoing	Achieved	<p>6 visits were completed. List available upon request.</p>

Workplace					
<i>Workplace-Process Outcome</i>					
1. 70% of all 7 Founding Partners worksites distribute messages supporting the Let's Go 5210 message to 9100 employees in Cumberland County by June 2009.	Tracking data; ongoing	Ongoing	June 2009	Achieved	This was accomplished through internal activities such as health fairs and wellness activities. The following Founding Partners were involved – Anthem, MMC, MaineHealth, Unum, and United Way
2. Let's Go will actively collaborate with Healthy Maine Partnerships on small business initiatives by partnering in the dissemination of 100 kits by June 2009.	Tracking data, critical insights; ongoing & May 2009	Mar 2009	June 2009	Achieved	*Let's Go! actively collaborated with the Healthy Maine Partnerships. 81 toolkits were distributed in Greater Portland thru the HMPs.
Communities					
<i>Community Mini-Grant- Process Outcome</i>					
1. 80% of mini-grants (4 out of 5) will achieve expected physical environment and policy change outcomes by June 2009.	Tracking Data		June 2009	Achieved	3 Trails were built and/or maintained in the following communities – Westbrook, Falmouth and Freeport. 1 water fountain was place in a Portland school – Nathan Clifford School. The mini-grant in Gorham focusing on faith –based work is extended until FY10. The work is progressing, however it is not completed.

<i>Youth Advisory Committee – Process Outcome</i>					
1. Let's Go YAC leads 3 youth driven initiatives that support the 5210 message in the community by June 2009	Tracking Data		June 2009	Not Achieved	Only 2 initiatives were completed: WinterFest and a Sea Dogs Game Day Activity.
Community/Marketing & Communications					
1. Increase the percentage of adults in the 12 communities from 38% to 50% who can correctly state recommended levels for all four components of 5-2-1-0 by June 2009.	Critical Insights Survey	May 2007	Spring 2009	Not Achieved	Updated weighted data from 2007 reveal the baseline to be 35%. 2009 data reveal the number to now be 43%. This demonstrates directional positive movement; however the benchmark was not achieved.
2. Increase the numbers of monthly website visits (from a baseline of 1300 visits) and monthly average multiple page views (from a baseline of 3.84) to the Let's Go website by June 2009.	Google Analytics Data	January 2009	Monthly	Partially achieved	Website visits for June 2,306. This part of the benchmark was achieved. Multiple page views for June were 3.03. This part of the benchmark was not achieved.

Program Dissemination					
1. Let's Go will develop an implementation model including recommended staff and budget needs for dissemination sites by September 2009.	Tracking Data		Sep 2009	Not Achieved	A dissemination implementation plan was discussed and agreed upon. A Let's Go! model was redefined – the puzzle piece of intersecting pieces with key core principles. A budget and staff recommendations were not developed.
Disparate Populations					
1. Identify strategies within Let's Go interventions to impact disparate populations by June 2009.	Tracking Data		June 2009	Not Achieved	Focus groups were held this summer with disparate populations. Additional work needs to be done to identify key strategies. Discussions will begin this Fall. It is anticipated that by Jan 2010 key strategies will be developed.

Let's Go! FY2010 Benchmarks

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
Overall Program Benchmarks					
Increase from the FY09 baseline the proportion of youth in the 12 communities who are reported to adhere to recommended levels for at least three of the four 5-2-1-0 behaviors by June 2010.	Critical Insights; May 2010 <i>*measurement tool in process and will be assuring that it's the correct tool.</i>		June 2010	On Track	
Slow the rise of elevated BMI prevalence in the 12 communities of Greater Portland by June 2011. <i>FY10 measurement will be set when FY 09 data analysis is complete.</i>	BMI Prevalence Study		June 2011	On Track	
Schools					
<i>Behavioral, Environmental and/or Policy Change Outcomes</i>					
Increase the proportion of elementary kids who participate in two of the four 5-2-1-0 behaviors (fruit & vegetable consumption, screen time, physical activity and soda consumption) in the 2009 - 2010 school year by June 2010.	Critical Insights Survey, Spring 2011		June 2010	On Track	
Increase from 33% to 40% (from 14 to 23 schools) of all enrolled schools adopting at least	Implementation Survey,		December 2009/	On Track	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
2 <i>Let's Go!</i> recommended environmental changes in the 2009 – 2010 school year by June 2010.	Environmental Profile		January 2010 then June 2010		
Increase from 15% to 20% (from 7 to 11 schools) of all enrolled schools adopting at least 1 <i>Let's Go!</i> recommended policy change in the 2009 – 2010 school year by June 2010.	Implementation Survey, Environmental Profile		December 2009/ January 2010 then June 2010	On Track	
<i>Process Outcomes</i>					
Increase total program reach by 33% from 17,426 students to 22,577 by June 2010.	Tracking data	Ongoing	June 2010	On Track	
Increase elementary school participation to 32 of 40 elementary schools (86%) in the 12 communities participating in <i>Let's Go!</i> Takes 5210 to School in the 2009 – 2010 school year by June 2010.	Tracking data	Ongoing	June 2010	On Track	
Increase middle and high schools to 15 (50%) of the middle and high schools in Greater Portland region (29) participating in the 2009 – 2010 school year by June 2010.	Tracking data	Ongoing	June 2010	On Track	
School Nutrition					
<i>Behavioral, Environmental and/or Policy Change Outcomes</i>					
Improve the nutritional quality of school food offerings in 50% of involved districts by June 2010.	Pre/post tracking tool, menu analysis		June 2010	On Track	
Implement a coordinated communications plan	Tracking data		June 2010	On Track	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
in 50% of involved districts with the goal of increasing the perception of nutritional quality of the National School Lunch by June 2010.					
Process Outcome					
At least 50% of school districts (6 of 11) in the <i>Let's Go!</i> region will participate in the Let's Go! School Nutrition Director Intervention in the 2009 – 2010 School Year by June 2010.	Tracking data	Ongoing	June 2010	Achieved	
After School					
Behavioral, Environmental and/or Policy Change Outcomes					
Increase by 4 (Baseline: 1) the number of After School programs that adopt a Let's Go recommended nutrition/PA policy that supports the 5-2-1-0 message by June 2010.	Tracking data	Ongoing		On Track	
Increase by 4 (Baseline: 1) the number of After School programs that adopt one or more <i>Let's Go!</i> recommended environmental changes that support the 5-2-1-0 message by June 2010.	Tracking data	Ongoing		On Track	
Process Outcome					
After School sites will be identified to participate in the above After School Intervention by December 2009.	Tracking data	Ongoing	December 2009	On Track	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
Child Care					
<i>Behavioral, Environmental and/or Policy Change Outcomes</i>					
Embed 5210 key strategies into Maine Roads to Quality and United Way funder local standards & funding requirements.	Tracking Data	Ongoing		Achieved	
Increase the knowledge of the 5-2-1-0 messages among providers at 4 child care trainings (Baseline: 0) that LG facilitates by June 2010.	Participant evaluation surveys; at trainings			On Track	
<i>Process Outcome</i>					
Increase by 15% (from 13 to 15 sites) the number of Child Care sites participating in 5-2-1-0 Goes to Child Care Intervention by June 2010.	Environmental Profile, mid & year end reports; ongoing	Ongoing		On Track	
Healthcare					
<i>Process Outcomes</i>					
Increase by 50% the number of patients (from a baseline of 2,141*) who have a Healthy Weight Bundle (height/weight, BMI, weight classification, blood pressure, and 5-2-1-0 survey) recorded in their chart by June 2010.*this number is a prediction based on FY09 benchmarks; this number will be replaced with the actual number of patients from FY09.	Clinical Improvement Registry, Electronic Medical Record, BMI Prevalence Study; ongoing			On Track	
Increase by 50% the number of <i>Let's Go!</i>	Tracking data	Ongoing		On Track	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
Educational Outreach sessions (from a baseline of 6*) for health care provider practices by June 2010. *this number is a prediction based on FY09 benchmarks; this number will be replaced with the actual number of sessions from FY09.					
Workplace					
<i>Process Outcomes</i>					
85% (6 of 7) Founding Partners worksites distribute messages supporting the Let's Go 5210 message to 11,900 employees in Cumberland County by June 2010.	Tracking data	Ongoing	June 2010	On Track	
Let's Go! will coordinate and actively support the Healthy Maine Partnerships small business initiative by June 2010.	Tracking data	Ongoing	June 2010	Off Track	
Community Mini Grants					
<i>Behavioral, Environmental and/or Policy Change Outcomes</i>					
75% of mini grants will achieve expected physical and environmental and policy change outcomes by June 2010. *exact percentage to be determined upon determination of the total number of grants awarded.	Tracking Data, individual mini grant evaluation data	Ongoing	June 2010	On Track	
<i>Process Outcome</i>					
Let's Go! will solicit appropriate mini-grant requests up to a total of \$12,000 for community projects with programmatic goals to create	Applications received			Achieved	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
change in physical and environmental policy by June 2010.					
Marketing & Communications					
<i>Behavioral, Environmental and/or Policy Change Outcomes</i>					
Increase the percentage of adults in the 12 communities who can correctly state recommended levels for all four components of 5210 by June 2010. <i>FY10 measurement will be set when FY09 data analysis is complete.</i>	Critical Insights Survey		June 2011	On Track	
<i>Process Outcome</i>					
Increase by 10% the numbers of monthly website visits (from a baseline of 2814 visits) to 3,095 visits <i>and monthly average multiple page views (from a baseline of 3.21) to the Let's Go! website by June 2010. FY 10 measurement will be set when FY09 data analysis is complete.</i>	Tracking data	Ongoing	June 2010	On Track	
Program Dissemination					
<i>Process Outcomes</i>					
<i>Let's Go!</i> will promote and support implementation of the dissemination model to 3 key community stakeholders organizations / sites by June 2010.	Tracking data	Ongoing	June 2010	On Track	
Post Dissemination support materials on website	Tracking data		September	Achieved	

Benchmark	Data Source	Date of Last Measure	Date of Next Measure	Status of Benchmark	Results
for local site utilization by September 2009.			2009		
Disparate Populations					
<i>Process Outcome</i>					
60% of all <i>Let's Go!</i> interventions will incorporate specific strategies to reach target disparate populations by June 2010.	Tracking data	Ongoing	June 2010	Off Track	