

COAST TO THE CASCADES
COMMUNITY WELLNESS NETWORK

C.H.E.F.

Culinary Health Education
& Fitness Program

MARKETING PLAN 2017-2020

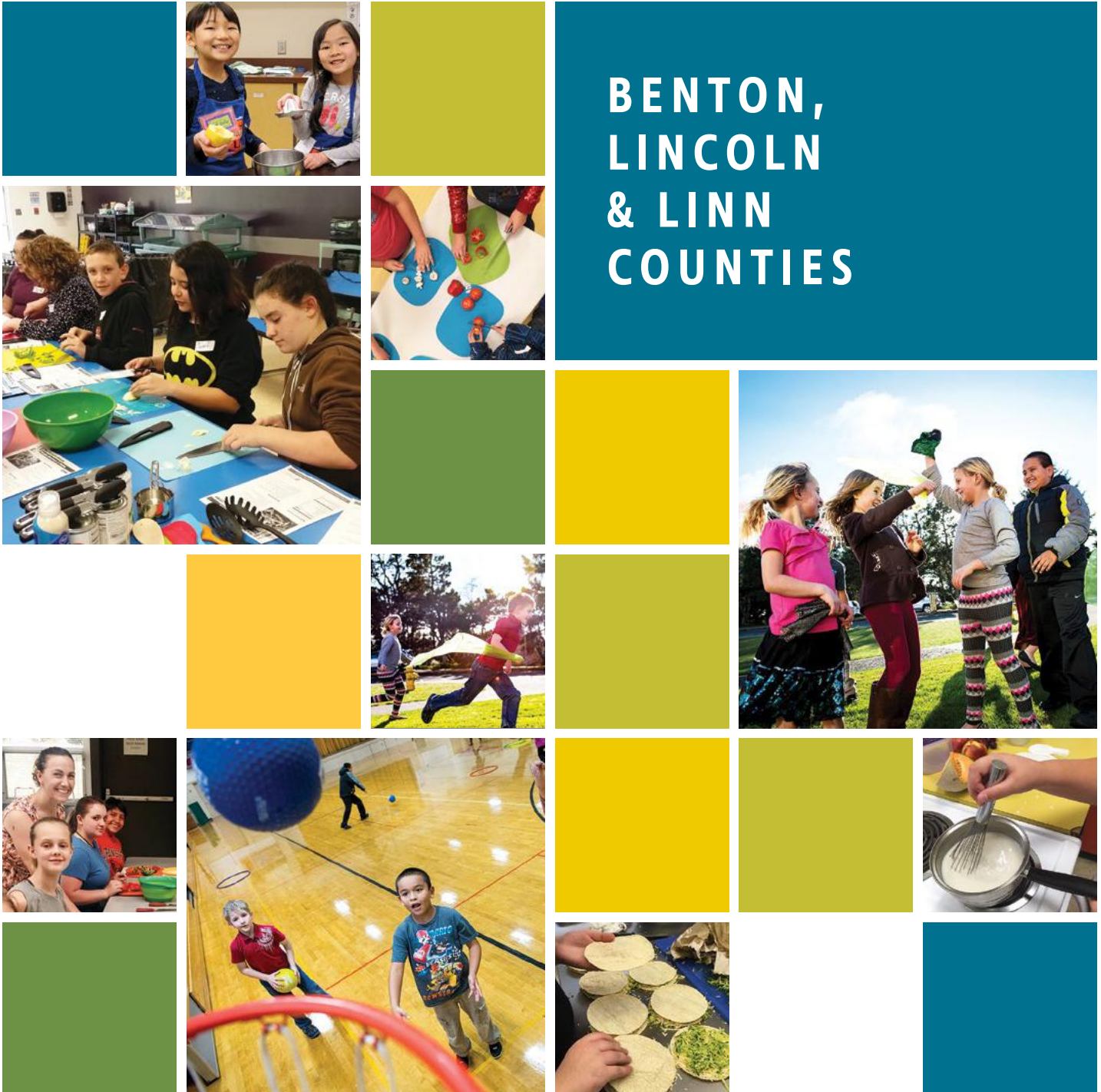




TABLE OF CONTENTS

NETWORK & PROJECT OVERVIEW	1
TARGET MARKET	2
MARKETING PLAN GOALS	3
MARKETING MIX	4
MARKETING PLAN EVALUATION	7
SECONDARY TARGET MARKET	8
KEY INITIATIVES & NEXT STEPS	9

This marketing plan was reviewed and approved on November 26, 2018, by the Coast to Cascades Community Wellness Network.

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number O6RH31062, "Rural Health Network Development Program – Culinary Health Education and Fitness Project," for \$884,631 total award amount and zero percentage financed with nongovernmental sources.

This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by, HRSA, HHS or the U.S. Government.

LINN, BENTON, LINCOLN PARTNERS FOR HEALTH COMMITTEE

Sharon Bogdanovic

Chintimini Senior &
Community Center

Krystal Boyechko

Samaritan Lebanon
Community Hospital

Carol Carlson

Oregon State University
Research Forest

Cecilia Caryl

Samaritan Pacific
Communities Hospital

Sheryl Casteen

Oregon State University Extension
Service & Casteen Family Farm

Janece Cook

Strengthening Rural Families

Jeannie Davis

College of Osteopathic Medicine
of the Pacific-Northwest

Pati D'Eliseo

Food Share of Lincoln County

Tina Dodge-Vera

Oregon State University
Extension Service

Samantha Escalante

Lincoln County School District

Deb Fell-Carlson

Live Longer Lebanon

Nicole Fields

Lincoln County Public Health

Angie Frederic

Samaritan Health Services

Sharon Gibson

Corvallis School District

Diane Giese

Samaritan Lebanon
Community Hospital

Mac Gillespie

Benton County
Health Department

Angie Gorman

Lebanon Community
School District

Shelley Hazelton

Samaritan Health Services

Faire Holliday

Lincoln County Public Health

Rebecca Holt

Community Volunteer

Carrie Judy

Samaritan Health Services

Rebecca Landis

Corvallis Farmers Market

Kris Latimer

Boys & Girls Club of
Greater Santiam

Jessica Linnell

Oregon State University

Sommer McLeish

Samaritan Lebanon
Community Hospital

Jennifer Meckley

Lebanon Community
School District

JoAnn Miller

Samaritan Health Services

Dr. Louise Muscato

College of Osteopathic Medicine
of the Pacific-Northwest

Erin Parrish

Lincoln County Public Health

Jennifer Pettit

Oregon State University
Extension Service

Kathy Pitzer

Albany Community School District

Caitlyn Reilley

Linus Pauling Institute at
Oregon State University

Stephanie Russell

Oregon State University
Extension Service

Candace Russo

Linus Pauling Institute at
Oregon State University

Samantha Schafer

Lincoln County Public Health

Dr. Jana Kay Slater

C.H.E.F. Program Evaluator

Cheryl Teschner

Samaritan Lebanon
Community Hospital

Kim Waldrep

C.H.E.F. Program Evaluator

Rich Waller

Samaritan Health Services

Suzanne Watkins

Samaritan Albany General Hospital

Earlean Wilson Huey

Samaritan North Lincoln Hospital

NETWORK & PROJECT OVERVIEW

NETWORK VISION

CCCWN's vision is to lead and sustain a system of partnerships between agencies and organizations working together to provide integrated services and programs that promote individual and community health.

NETWORK MISSION

CCCWN's mission is to improve community health in Benton, Lincoln and Linn counties by providing leadership and support for regional partnerships.

C.H.E.F. PROGRAM GOALS

The C.H.E.F. Program is a collaborative, community-level obesity prevention program that will help children and families in Lincoln, east Linn, and rural Benton counties achieve higher-quality lives free of preventable diseases related to poor nutrition and obesity.

The following C.H.E.F. Program goals align directly with CCCWN's shared vision:

- **GOAL 1** Implement nutrition-focused culinary education courses to empower children and families in Lincoln, east Linn, and rural Benton counties to be self-sufficient in the kitchen and to make healthy food choices.
- **GOAL 2** Expand CATCH (Coordinated Approach to Child Health) as a sustainable program for promoting health and the attainment and maintenance of a healthy weight for children in Lincoln, east Linn, and rural Benton counties.
- **GOAL 3** Increase consumption of fruits and vegetables among children in Lincoln, east Linn, and rural Benton counties.
- **GOAL 4** Establish culinary education as a vital and sustainable component of local obesity prevention efforts by building local capacity to promote and deliver standardized courses and introducing the next generation of physicians to culinary education's value for patients.

NETWORK MEMBERS

CCCWN comprises a seven-person Steering Committee and members of county health departments, schools, hospitals, federally qualified health centers (FQHCs), community-based organizations, tribal councils and the health professions. Current members include:

- Benton County Health Department
- Capitol Dental Care
- Community members
- Community Outreach, Inc.
- Community Services Consortium
- Confederated Tribes of Siletz Indians of Oregon
- Community Health Centers of Benton and Linn Counties
- Good Samaritan Regional Medical Center
- Lebanon Community School District
- Lincoln County Board of Commissioners
- Lincoln County Health and Human Services
- Lincoln County Sheriff's Office
- Linn County Department of Health Services
- Oregon Cascades West Council of Governments
- Oregon Office of Rural Health
- Oregon State University
- Samaritan Albany General Hospital
- Samaritan Health Plans
- Samaritan Health Services, Inc.
- Samaritan InterCommunity Health Network CCO
- Samaritan Lebanon Community Hospital
- Samaritan North Lincoln Hospital
- Samaritan Pacific Communities Hospital
- Western University COMP-Northwest

TARGET MARKET

MARKET SEGMENTS

CCCWN has identified the following market segments for the C.H.E.F. Program:

- C.H.E.F. Program participants
- C.H.E.F. Program sites and institutional partners
- Medical students
- Community trainees and volunteers
- General public

PRIMARY TARGET MARKET

C.H.E.F. Program participants are the primary target market, partly because the program is geared to their needs and partly because marketing and communication efforts are key to making them aware of and engaged in C.H.E.F. Program activities and events. C.H.E.F. Program participants have the following characteristics.

Demographics

- Rural and/or geographically isolated elementary and middle school students and families in Lincoln, east Linn, and rural Benton counties
- Children and families who are members of health professional shortage areas (HPSAs), medically underserved areas (MUAs) and medically underserved populations (MUPs)
- Limited or no local access to healthy foods (food deserts)
- Limited or no local access to recreational options and physical education (recreational deserts)
- Limited or no access to transportation
- Low socioeconomic status (poverty; children receiving free or reduced-price school meals; cultural, linguistic, religious and socioeconomic differences)

Goals

- Improve their own health, wellness and quality of life
- Understand how to plan and prepare healthy meals on a budget
- Understand how to recognize and avoid unhealthy food options
- Get more exercise

Pains

- Rising obesity rates among adolescents and adults, and limited or no access to obesity prevention services
- Time and economic pressures that make it difficult to select and prepare healthy foods
- Lack of knowledge of nutrition labeling, safe food handling and cooking skills
- Lack of full-service grocery stores, which often limits access to fresh fruits and vegetables
- Lack of safe, accessible exercise and recreation options, especially for rural or isolated children
- Lack of transportation options for rural and low-income populations

Gains

- Reduced risk of obesity and related health issues such as diabetes
- Establishing and maintaining healthy habits
- Nutrition knowledge and self-efficacy
- Better access to fresh and healthy foods
- Menu planning and cooking skills
- More frequent physical activities (at CATCH sites)

MARKETING PLAN GOALS

MARKETING GOALS	PROJECT GOAL
Conduct culinary education courses in the tri-county region	1
Recruit and register culinary education participants	1
Deliver evidence-based culinary education curricula	1
Expand CATCH to new schools	2
Host CATCH kickoff at each new school	2
Establish tasting tables at all CATCH sites	3
Distribute Pick of the Month flyers at all CATCH sites	3
Establish a health-conscious culture that promotes healthy food choices at CATCH school events and community sites	3



MARKETING MIX

PRODUCTS AND SERVICES

EXISTING PRODUCTS & SERVICES

Age-appropriate nutrition-focused culinary education courses: Fresh Grown Cooking for Kids, Simply Delicious (Linus Pauling Institute); Cooking Matters for Families, Cooking Matters for Kids (Food Share of Lincoln County)

NEEDS MET

- Nutrition knowledge and self-efficacy
- Planning and preparing healthy meals on a budget
- Establishing and maintaining healthy habits
- Reduced risk of obesity and related health issues such as diabetes

Take-home food items for participants

- Access to fresh and healthy foods

Enhanced physical education activities (CATCH)

- More frequent physical activities
- Better access to recreational options and physical education
- Safe, accessible exercise and recreation options for rural children
- Establishing and maintaining healthy habits
- Reduced risk of obesity and related health issues such as diabetes

Tasting tables at schools

- Access to fresh and healthy foods

Pick of the Month flyers

- Nutrition knowledge and self-efficacy

Health fairs and other events that promote healthy food choices at CATCH schools and community sites

- Establishing and maintaining healthy habits

NEW PRODUCTS & SERVICES

NEEDS MET

CATCH program expansion

- More frequent physical activities
- Establishing and maintaining healthy habits
- Reduced risk of obesity and related health issues such as diabetes

Spanish-language curricula

- Improved access to health and wellness information and resources for underserved and low socioeconomic status population

PROMOTION: KEY MESSAGES

PRODUCT	KEY MESSAGE	DELIVERY METHODS
Culinary education courses for elementary and middle school students	"Learn to cook, and explore and prepare nutritious recipes!"	<ul style="list-style-type: none"> • Teacher referrals • School announcements • Medical provider "referrals" • Flyers sent home with children and through email • Word of mouth from peers
Culinary education courses for adults	"Gain tools to help make healthy food choices and purchase, prepare, and cook healthier meals."	<ul style="list-style-type: none"> • Medical provider "referrals" to at-risk patients (overweight, obese, diabetic) • Nonclinical sites such as WIC and Head Start • School open houses and parent/teacher events • Facebook and other social media • Articles in Heart to Heart magazine and other e-newsletters and social media posts • Flyers at high-visibility community sites • Articles and advertisements in local newspapers
Take-home food items for participants	"Gain tools to help make healthy food choices and purchase, prepare, and cook healthier meals."	<ul style="list-style-type: none"> • Take-home grocery bags for Cooking Matters for Families participants • Take-home meals for Simply Delicious and Fresh Grown Cooking for Kids participants
Enhanced physical education activities (CATCH)	"An evidence-based program that teaches children the importance of healthy eating and physical activity to improve overall health."	<ul style="list-style-type: none"> • CATCH Champion trainings • CATCH Champion advocacy • Teacher referrals • School announcements • Flyers sent home with children and through email • Word of mouth from peers
Tasting tables at schools	"Encourage children and families to try new fruits and vegetables."	<ul style="list-style-type: none"> • School announcements • Flyers sent home with children and through email
Pick of the Month Flyers	"Encourage children and families to try new fruits and vegetables."	<ul style="list-style-type: none"> • School announcements • Flyers sent home with children and through email
Spanish-language curricula	"Enhancing access in our rural communities."	<ul style="list-style-type: none"> • Medical provider "referrals" for at-risk patients (overweight, obese, diabetic) • Nonclinical sites such as WIC and Head Start • Articles in Heart to Heart magazine and other e-newsletters and social media • Teacher referrals • School announcements • Articles and advertisements in local newspapers • Flyers at high-visibility community sites and schools • Word of mouth
Health fairs and related events	"Gain tools to help make healthy food choices and purchase, prepare, and cook healthier meals."	<ul style="list-style-type: none"> • School announcements • Community announcements

MARKETING MIX—continued

PRODUCT & SERVICE DELIVERY

Infrastructure

Many local organizations and agencies work together to deliver the C.H.E.F. Program. Current partners include:

- Alsea School District
- Boys & Girls Clubs of the Greater Santiam
- Central Linn School District
- Coast to Cascades Community Wellness Network
- Western University of Health Sciences College of Osteopathic Medicine of the Pacific-Northwest
- Food Share of Lincoln County
- Lebanon Community Schools
- Lincoln County School District
- Linn, Benton, Lincoln Partners for Health
- Live Longer Lebanon
- Monroe School District
- Neighbors for Kids
- Oregon State University Extension Service
- Oregon State University Linus Pauling Institute Healthy Youth Program
- Samaritan Early Learning Center
- Samaritan Health Services
- Samaritan Family Medicine Resident Clinic – Lebanon
- Samaritan Lebanon Community Hospital
- Samaritan Lebanon Health Center
- Samaritan North Lincoln Hospital
- Siletz Valley Schools
- Sweet Home Family Medicine
- Yachats Youth and Family Activities Program, Inc.

CCCWN is responsible for operationalizing the work plan. The Project Director oversees the program and provides

monthly updates to the Network Director, who provides supervision, staffing and support. The Steering Committee provides general and specific leadership and direction based on coalition input. Network partners include:

- **Linn, Benton, Lincoln Partners for Health (LBLPFH)**, who are responsible for recommending promising local strategies and projects
- **County Coordinators**, who organize trainings and events, engage with CATCH Champions, schedule culinary education courses, and provide overall program support
- **Site Champions**, who work with County Coordinators at each CATCH site to implement and troubleshoot the program

Site and institutional partners include:

- Schools that serve as culinary education and CATCH sites (including administrators, teachers, parent volunteers and culinary education instructors)
- Medical providers who provide “referrals” to the program
- Nonclinical human services sites such as WIC and Head Start
- Philanthropic organizations that support local health activities aimed at youth, such as Soroptimist, 4H and Rotary clubs

Delivery Methods

C.H.E.F. Program products, services and messaging are delivered through schools and other community sites, either in person or through educational materials such as:

- Trainings and meetings
- Printed materials
- Web-based media and resources

MARKETING PLAN EVALUATION

EVALUATION PLAN

Implementation will be tracked monthly through the collection of Performance Improvement and Measurement System (PIMS) data and related information. This will ensure that the plan proceeds appropriately and reaches target populations. Detailed activity tracking also occurs through monthly reports.

MARKETING GOAL	OUTCOME MEASURE	MARKETING TARGET	MEASURE TYPE	COLLECTION METHOD	TIME FRAME	RESPONSIBLE PARTIES
Conduct culinary education courses in the tri-county region	Courses conducted	69 courses by April 2020	Quantitative	Course records	End of each course	<ul style="list-style-type: none"> Project Director County Coordinators LPI, COMP-NW & Food Share of Lincoln County
Recruit and register culinary education participants	Participants registered	1,380	Quantitative	Attendance records	Ongoing	<ul style="list-style-type: none"> Project Director County Coordinators LPI, COMP-NW & Food Share of Lincoln County
Deliver evidence-based culinary education curricula	Increase culinary skills and knowledge, and build positive attitudes about nutrition and cooking	Post-class test scores are 10% higher than pre-class scores	Quantitative Qualitative	Participant surveys	Before and after each course	<ul style="list-style-type: none"> Project Director County Coordinators LPI, COMP-NW & Food Share of Lincoln County
Expand CATCH to new schools	Participating schools	4 schools	Quantitative	Memoranda of Agreement	By April 2020	<ul style="list-style-type: none"> Project Director County Coordinators Site Champions
Host CATCH kickoff at each new school	Kickoffs held	4 schools	Quantitative	Monthly Reports/ Tracking	By June 2019	<ul style="list-style-type: none"> Project Director County Coordinators Site Champions
Establish tasting tables at all CATCH sites	Tasting tables at elementary and middle schools	11 schools	Quantitative	Memoranda of Agreement	By April 2020	<ul style="list-style-type: none"> County Coordinators Site Champions
Distribute Pick of the Month flyers at all CATCH sites	Flyers distributed monthly	Distribute to all students at 11 CATCH sites	Quantitative	Monthly Reports/ Tracking	Ongoing	<ul style="list-style-type: none"> County Coordinators School staff /volunteers
Establish a health-conscious culture that promotes healthy food choices at CATCH school events and community sites	Health fairs and other events held	Annual events at each site	Quantitative Qualitative	Monthly Reports/ Tracking	Oct 2017– April 2020	<ul style="list-style-type: none"> Project Director County Coordinators Site Champions Volunteers

SECONDARY TARGET MARKET

The C.H.E.F. Program's secondary target market comprises site and institutional partners who deliver the program to end users. A marketing effort directed toward this segment differs in that it entails:

- Recruiting leaders who will then recruit volunteers
- Cultivating liaisons to clinics to encourage medical provider "referrals"
- Improving communications between existing partners through an ongoing newsletter and/or social media presence
- Aligning goals and evaluation methods across all sites and partners
- Coordinating site logistics, staffing and training (e.g., for middle school offerings)
- Recruiting and training new medical students and volunteers
- Training volunteers to support local program sustainability
- Bringing more primary medical providers into a referral role
- Creating unified messaging for all project sites and partners
- Providing schools and organizations with ongoing technical support to ensure adequate staff coverage
- Engaging local philanthropic organizations, such as Soroptimist, 4H and Rotary clubs to fund the program and/or provide transportation services
- Communicating program benefits to teachers (participating children are more engaged, more motivated and better behaved)

KEY INITIATIVES & NEXT STEPS

ACTION	RESPONSIBILITY	DEADLINE
Publish C.H.E.F. Program newsletter	<ul style="list-style-type: none"> • Project Director • County Coordinators 	Ongoing
Distribute Pick of the Month flyers through schools and community sites	<ul style="list-style-type: none"> • Project Director • County Coordinators 	Ongoing
Attend health fairs and other events that promote healthy food choices at CATCH schools and community sites	<ul style="list-style-type: none"> • Project Director • County Coordinators 	Ongoing

