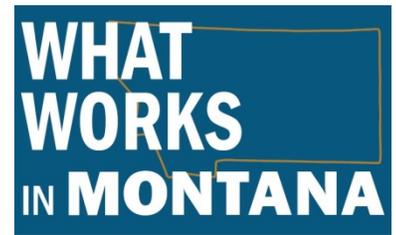


**Projects Showcased at the  
Montana Healthy Communities Conference  
November 1-2, 2017**

# What Works in Montana Poster Guide



## Project Icon Key

-  Access to healthy foods
-  Children and youth
-  Opportunities for physical activity and active living
-  Access to affordable, healthy housing
-  Access to health care
-  Community and economic development
-  Mental health

## Posters at a Glance

If you're looking for projects focused on or featuring...	See the posters numbered...
Access to healthy foods	1, 2, 3, 5, 8, 9, 12, 13, 14, 15, 16, 17, 18, 21, 23, 24
Opportunities for physical activity and active living	2, 3, 4, 5, 9, 12, 16, 18, 19, 23, 24
Access to health care	6, 7, 11, 16, 20, 22, 25
Mental health	7, 8, 9, 20, 22, 24
Children and youth	1, 2, 3, 4, 6, 7, 8, 9, 16
Access to affordable, healthy housing	10, 11, 12, 21, 22
Community and economic development	1, 15, 16, 17, 18, 19, 20
Engagement of hospital and clinic partners	1, 3, 7, 11, 13, 14, 15, 16, 21, 22
Reservation area/Indian Country	6, 15, 16, 17, 20, 25

## Projects Showcased

- 1 Montana Harvest of the Month**  
Poster representative: Aubree Roth, Montana Team Nutrition Program, Montana State University
- 3 Let's Move! Missoula**  
Poster representative: Mary McCourt, Let's Move! Missoula, Missoula City-County Health Department
- 2 No Kid Hungry Active Kids Project**  
Poster representative: Elaine Stedman, CEO, Boys & Girls Club of Richland County
- 4 Kids in Motion**  
Poster representative: Wyeth Friday, City of Billings

- 5 Partnerships for a More Vibrant and Healthier Neighborhood**  
Poster representative: Melissa Henderson, Healthy by Design
- 6 Sealants for Smiles!**  
Poster representative: Caity Kirk, Sprout Oral Health
- 7 Butte Child Evaluation Center, Multi-Disciplinary Team**  
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- 8 Montana Project LAUNCH**  
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- 11 Cascade Ridge Senior Apartments**  
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- 13 Pantry Supper Club**  
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- 14 Fresh Food Initiative**  
Poster representative: Kim Dale, Helena Food Share
- 15 Montana Healthy Food and Communities Initiative (MHFCI)**  
Poster representative: Devona Bell, National Center for Appropriate Technology
- 16 River Valley Farmer's Market Expansion Project**  
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- 17 Healthy Foods Financing Initiative Project (HFFIP)**  
Poster representative: Mitzi Racine, Native American Development Corporation
- 18 Butte's Open Air Small Business Incubator**  
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- 19 Pedlet**  
Poster representative: Joan Redeen, Great Falls Business Improvement District
- 20 Northern Winds Recovery Center (Small Business Lending)**  
Poster representative: Sarah Fitzgerald, Montana & Idaho CDC
- 21 Montana Health Justice Partnership**  
Poster representative: Michelle Potts, Montana Legal Services Association
- 22 Adult Resource Alliance Care Transition Team of Yellowstone County**  
Poster representative: Jennifer Hough, Adult Resource Alliance
- 23 Active Living Wayfinding System**  
Poster representative: Karen Lane, Lewis and Clark Public Health
- 24 Promoting a Culture of Health in Workplaces**  
Poster representative: Sara Murgel, Montana Department of Public Health and Human Services, Chronic Disease Prevention and Health Promotion Bureau, Montana Cancer Control Program
- 25 IPHARM—Improving Health Among Rural Americans**  
Poster representative: Donna Beall, University of Montana College of Health Professions and Biomedical Sciences



# Montana Harvest of the Month

## WHAT WORKS PROJECT 1 IN MONTANA

### GOALS AND ACTIVITIES

Montana Harvest of the Month aims to improve student nutrition and support Montana's ranchers and farmers by:

- Exposing students to locally grown healthy foods through meals and taste tests
- Providing educational lessons on the nutritional and agricultural aspects of food
- Offering resources to engage teachers, school food service staff, and parents

**This farm to school program includes three core elements:** procurement, school gardens, and education.

### POPULATIONS SERVED

This program currently serves students in K-12 schools and after school programs in 130 sites across the state of Montana. Plans for expansion to early child care centers, grocery stores, hospitals, and other institutions are in the works.

### MAJOR PARTNERS AND FUNDERS

Montana State University, Gallatin Valley Farm to School, National Center for Appropriate Technology, Office of Public Instruction, Montana Food Corps, Montana Healthcare Foundation, Montana Department of Public Health and Human Services, Northern Pulse Growers Association, Montana School Nutrition Association, Montana Department of Agriculture, U.S. Department of Agriculture

### MAJOR OUTCOMES

Data gathered in the program's pilot year indicate that the program did improve children's healthy food preferences.

The program has led to increased purchasing and serving of locally grown food items in schools and has increased schools' collaboration with communities.

### INGREDIENTS FOR SUCCESS

Provided training to producers who could benefit from the sales of Harvest of the Month items to schools.

Provided participating sites with a media tool kit and Harvest at Home handouts to help share news about their Harvest of the Month activities and meals.

Involved a broad range of stakeholders in the development of the program through feedback gathered from training and presentation audiences.

Engaged community members in teaching Harvest of the Month lessons in local schools, including farmers, gardeners, and college students.

### ADVICE FOR OTHERS

"Appoint a central contact person to coordinate efforts and keep the project on track. Reach out to potential partners even if the fit might be stretch by findings ways to solicit their feedback. Allow more time to complete highly collaborative projects and set realistic deadlines. Continue to monitor and evaluate the program on an ongoing basis."

— Aubree Roth, Farm to School Coordinator, Montana Team Nutrition Program, Montana State University



## No Kid Hungry Active Kids Project

# WHAT WORKS PROJECT 2 IN MONTANA

### GOALS AND ACTIVITIES

Provide weekly food backpacks to children referred by school and community personnel. Each week children bring fresh food to their homes.

Provide outdoor games and activities to promote healthy lifestyles at the Boys & Girls Club of Richland County's summer programs for camp participants and kids in the Summer Food Program hosted by the Club.

### POPULATIONS SERVED

School-age children in Richland County, about 40 percent served were disadvantaged. The bulk of the children are in grades K to 5.

### MAJOR PARTNERS AND FUNDERS

Boys & Girls Club of Richland County, No Kid Hungry Grant, Sidney Public Schools, Fairview Public Schools, Oneok MidStreams, 4H, AmeriCorps, Farm Bureau, Montana Food Bank Network, Foundation for Community Care, and Enerplus

### MAJOR OUTCOMES

Served 50 students with food backpacks last year and hope to grow the program to 100 this year. Also included low- to moderate-income children outside of the Boys & Girls Club summer camp in outdoor games and activities.

### INGREDIENTS FOR SUCCESS

Shared information with local housing organizations to encourage participation. Program was also featured at meetings of Partnership for Promise and Communities in Action. Community organizations provided resources, such as bags, fresh fruit, and vegetables. Cooperation between the local schools and Boys & Girls Club was pivotal in making this happen.

### ADVICE FOR OTHERS

“Work with community partners and seek grant funding to get started. Once the program is launched, community support will probably maintain it because it touches people's hearts.”

— Elaine Stedman, CEO, Boys & Girls Club of Richland County



## Let's Move! Missoula

# WHAT WORKS IN MONTANA

PROJECT  
3

### GOALS AND ACTIVITIES

Create, support, and mobilize projects and partnerships that enhance and build healthy environments for all children and residents. Strategies include education, policy development, advocacy, and environmental change. Priority areas:

**Infrastructure.** Build consistent, effective systems and policies that drive quality services and foster best practices to improve childhood obesity rates. Examples include schools supporting quality nutrition and 60 minutes of daily physical activity, more sidewalks and trails, accessible playgrounds, bicycle-friendly policies, and more home and community gardens.

**Activities.** Develop strategies where public health and community stakeholders can engage, monitor, and advocate for increased physical activity for children.

**Awareness.** Use social media and marketing to educate the population on the importance of healthy nutrition and exercise.

**Goal:** Reduce childhood obesity rates in Missoula County by 10 percent, from 12 percent to 10.7 percent.

### POPULATIONS SERVED

Residents in Missoula County with an emphasis on children age 0 to 18 and a focus on children living in three low-wealth neighborhoods.

### MAJOR PARTNERS AND FUNDERS

Missoula City-County Health Department, Community Medical Center, City of Missoula, Missoula Area Chamber of Commerce, Missoula Board of County Commissioners, Missoula County Public Schools, Missoula Family YMCA, Missoula Parks & Recreation, Providence St. Patrick Hospital, University of Montana, United Way of Missoula County

### MAJOR OUTCOMES

Made progress in school wellness policies.

Mapped Missoula with GIS technology to show poverty, public health, and infrastructure data.

Recognized as one of the top 11 Let's Move! initiatives in the country.

Developed new partnerships among service providers.

Elevated "health equity" into many decisions.

### INGREDIENTS FOR SUCCESS

Missoula City-County Health Department has prioritized this initiative and provides staffing; other partners provide in-kind support and grants.

State grants helped move school policy work forward and a major grant from Robert Wood Johnson Foundation will support initiatives in the three focus neighborhoods.

Accessible data on local child obesity in partnership with school districts helped attract grants and measure progress.

### ADVICE FOR OTHERS

"Build a table of key decision makers, take the time to know your partners and the work they are doing to integrate similar programs, clearly define the population that you want most to impact, and consider social marketing to get your message out."

—Mary McCourt, Let's Move! Missoula, Missoula City-County Health Department



## Kids in Motion

# WHAT WORKS IN MONTANA

PROJECT  
4

### GOALS AND ACTIVITIES

Kids in Motion (KIM) is an active transportation educational program that encourages young people and their families in the Billings Community to make healthy transportation choices. The program's goal is to increase bicycling and walking rates through outreach and education, and eliminate barriers to non-motorized transportation. KIM provides young people with tools to be independent and successful members of the community while encouraging healthy and economically beneficial lifestyle choices.

#### Activities:

- Facilitates bicycle maintenance clinics targeted to low- to moderate-income (LMI) students.
- With Billings Public Schools, develops community-focused, active transportation education materials.
- Outfits students with bicycle lights to improve visibility and encourage safe riding.

### POPULATIONS SERVED

Elementary students and some middle school students and families in Billings Public Schools.

### MAJOR PARTNERS AND FUNDERS

City of Billings, St. Vincent Health Care Mission Fund, Billings Public Schools, Billings Education Foundation, TrailNet, The Spoke Shop, Billings Metro VISTA Project

### MAJOR OUTCOMES

Reached about 1,500 elementary students over the past few years (about 35 percent to 50 percent LMI).

Built a partnership between the City of Billings and Billings Public Schools leading to other cooperative efforts.

Provided a focus for other organizations and businesses in the community to meet goals of community support, volunteerism, and active transportation.

### INGREDIENTS FOR SUCCESS

Highlighting the connection between riding or walking to school and improved community health.

Forming a responsive planning committee of funders and program supporters.

Managing a pool of 15 to 20 volunteers.

Developing accessible curriculum materials with Billings Public Schools.

Working with local businesses to hold fundraising events.

### ADVICE FOR OTHERS

“Early in the process, identify partners in your community who are already focused on elements of what you wish to achieve.”

— Wyeth Friday, Director of Planning and Community Services Department, City of Billings and Yellowstone County



## Partnerships for a More Vibrant and Healthier Neighborhood

# WHAT WORKS IN MONTANA

PROJECT  
5

### GOALS AND ACTIVITIES

The project's aim was to identify and prioritize resident-driven solutions to the question, "what would make the South Side a healthier, more vibrant place?"

The project team engaged representatives from neighborhood-based businesses, nonprofit organizations, churches, resident groups, the local chamber, and city and county health and economic development departments to examine how concepts of food access, creative placemaking, health equity, and economic development intersect at the neighborhood level.

### POPULATIONS SERVED

The South Side neighborhood in Billings is one of the city's oldest and most diverse neighborhoods. Located there are historic homes, the health department, the first neighborhood schools, first city park, and the first public pool. Despite a relatively low unemployment rate, 1 in 3 neighborhood residents receives SNAP (food stamp) benefits and 46 percent of families with children live below the poverty line.

### MAJOR PARTNERS AND FUNDERS

Healthy By Design, City/County Planning Department, Billings Parks and Recreation, Billings Public Works, Downtown Billings Association, Friendship House, Western Heritage Center, Billings Chamber of Commerce, Passages, RiverStone Health, St. Vincent Healthcare, Billings Clinic, Kresge Foundation, Groundswell, Inc., Community Leadership Development Inc., and the South Side Neighborhood Task Force

### MAJOR OUTCOMES

Completed a resident-driven neighborhood plan and received implementation funding from the Kresge Foundation.

Developed and enhanced a multi-season gardener's market with invested vendors while also enhancing placemaking on the South Side.

### INGREDIENTS FOR SUCCESS

Used a "community-based participatory research" approach to engage residents at every stage of the planning process.

Translated complex concepts rooted in evidence-based policies, systems, and environmental interventions into actionable concepts.

### ADVICE FOR OTHERS

"Community-based projects take more time. Relationships and trust take more than one meeting to build. It means a lot when staff have been coming to neighborhood meetings before the project ever started, and keep coming. When organizing a meeting for resident input, make sure your project staff do not outnumber them. It takes away a sense of any real power."

— Neighborhood resident and project steering committee member

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## Sealants for Smiles!

# WHAT WORKS IN MONTANA

## PROJECT 6

### GOALS AND ACTIVITIES

Since 2012, Sealants for Smiles (SFS) has helped children maintain good oral health while in school, since cavities and pain can be detrimental to learning. Nearly 60 percent of low- to moderate-income 3rd graders in Montana have not received dental sealants. In addition, 38 percent of Montana children have dental insurance through Medicaid, while 12 percent are uninsured.

Cavity prevention services are targeted to children in Montana, primarily ages 6 to 9. Local dentists, hygienists, and other volunteers teach children in schools about oral health practices and provide cavity prevention by applying dental sealants and fluoride varnish. Children receive free tooth brushes and toothpaste. SFS also provides assistance with follow-up care for children most in need and helps families apply for public insurance.

### POPULATIONS SERVED

Schools in which 50 percent or more of the children qualify for Free or Reduced Lunch, as reported by the Office of Public Instruction. Most schools are in rural and frontier areas, with limited access to dental care.

### MAJOR PARTNERS AND FUNDERS

Sprout Oral Health, Montana Public Schools, Montana Dental Association, Colleges of Nursing at Montana State University and University of Montana, Indian Health Services, Montana Department of Public Health and Human Services, Montana Healthcare Foundation, Montana Office of Medicaid, Montana School Nurses Association, Montana Primary Care Association

### MAJOR OUTCOMES

In 2016–2017, provided care to 10,453 children in 81 schools across Montana, expanded reach through American Indian services, and launched a school nurse fluoride varnish program.

SFS allows children to receive dental care and not miss school.

Established goal that children with dental abscesses receive treatment within 24 to 48 hours.

### INGREDIENTS FOR SUCCESS

Works with school leaders and nurses to bring SFS into their schools.

Uses local dental providers where possible to boost community support and establish continuing care and dental homes for children.

SFS has a custom-built electronic dental record which supports data quality and management.

Strong communication helps ensure partners know their respective roles.

Over 560 volunteers statewide allows program to employ only two staff.

### ADVICE FOR OTHERS

“To be sustainable and successful, it is important to recognize and include all stakeholders. To improve community health it helps to involve all aspects of the community.”

— Caity Kirk, Sprout Oral Health

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## Butte Child Evaluation Center, Multi-Disciplinary Team

# WHAT WORKS IN MONTANA

PROJECT  
7

### GOALS AND ACTIVITIES

The Butte Child Evaluation Center (CEC) is the first accredited Child Advocacy Center in Montana. Its Multi-Disciplinary Team (MDT) is a coalition of public and private agencies that serves child victims of sexual and physical abuse and promotes dignity and respect while minimizing trauma, maximizing criminal prosecution, and ensuring continuity in treatment for the best outcome.

Child interviews and medical exams are conducted onsite. CEC also provides victim advocacy and mental health services so that children and families receive the services they need to begin healing. CEC also partners with Big Brothers/Big Sisters of Butte to provide schools with prevention and safety education.

### POPULATIONS SERVED

Children age 0 to 18 where there is an allegation of sexual and/or physical abuse, neglect, drug endangerment, witness to violence or internet crimes against children, and adults with developmental delays as requested by MDT.

### MAJOR PARTNERS AND FUNDERS

Southwest Montana Community Health Center (Butte Child Evaluation Center), Butte Silver Bow Law Enforcement, Butte Division of Child and Family Services, Butte Silver Bow County Attorney, Dr. Jessie Salisbury, Montana Board of Crime Control, MCSART, Children's Alliance of Montana, National Children's Alliance

### MAJOR OUTCOMES

Working effectively as a team.

Accredited by the National Children's Alliance since 2007.

Serving children and their families with a coordinated and thoughtful response.

### INGREDIENTS FOR SUCCESS

Bringing community partners together in discussion, creation, and maintenance of the MDT has ensured that families and victims are supported from start to resolution with the intent to reduce the effects of trauma on child development.

Data management is supported by National Children's Alliance (NCATrak), which tabulates information including demographics, services, participating team members, outcomes, and victim services discussed or referred.

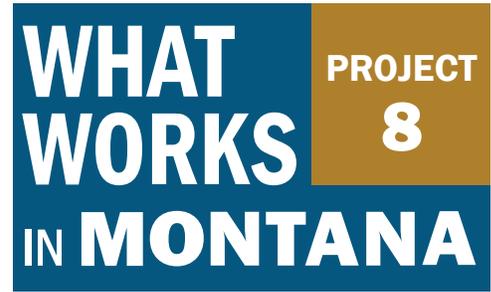
### ADVICE FOR OTHERS

"When we have law enforcement, family services, and medical providers who understand trauma-informed approaches to care, this benefits everyone and in the long run will likely improve overall health and wellness in our communities."

—Molly Molloy, Director of Behavioral Health and the Child Evaluation Center, Southwest Montana Community Health Center



## Montana Project LAUNCH



### GOALS AND ACTIVITIES

Montana Project LAUNCH promotes prevention strategies to improve outcomes for the social-emotional wellness of children ages birth to 8. By strengthening partnerships, growing resources, developing workforce skills, implementing screening, and improving the referral process, Project LAUNCH strives to create more streamlined and effective support for young children and their families.

Partners are members of either the Gallatin Early Childhood Community Council or Park County Early Childhood Coalition, voluntary councils of community members interested in progressing topics related to early childhood. In addition, agency decision makers regularly meet to focus on early childhood social-emotional issues and to strengthen networks for families. The initiative also has a partnership with higher education to address workforce development challenges.

### POPULATIONS SERVED

Families with pregnant women and children ages birth to 8. Pilot site includes Gallatin and Park Counties, with a goal of scaling up services throughout the state.

### MAJOR PARTNERS AND FUNDERS

SAMHSA, Montana Department of Public Health and Human Services, Bozeman Health, Child Care Connections, Community Health Partners, Gallatin City-County Health Department, Greater Gallatin United Way, Park County Community Foundation, Park County Health Department

### MAJOR OUTCOMES

Meaningful interagency collaboration that allows families to access and move through resources efficiently, a diverse workforce knowledgeable about early childhood mental health, and community focus on social emotional health of young children and their families. Specific initiatives include on-site coaching and consultation for early care and education providers, an embedded mental health professional in a pediatric clinic, and burnout prevention for home visitors.

### INGREDIENTS FOR SUCCESS

2013 needs assessment in Gallatin County provided data that helped secure grant from SAMHSA. Partners and councils developed a living strategic plan that commits to initiatives and goals, but allows flexibility to respond to new needs. Evaluation team from Montana State University created a robust data collection plan to assess progress. The project depends on relationships and encourages cross-sector collaboration.

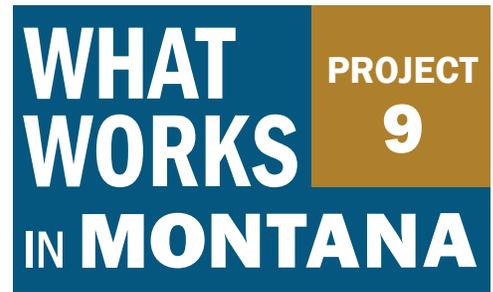
### ADVICE FOR OTHERS

“Create a vision and strategic plan as a group, dedicate staff to focus on effort, identify champions early and capitalize on those who are most passionate and creative, know how your partners operate, learn each other’s language, and be on the lookout for creative strategies outside of your field of work.”

— Sarah Webb, Young Child Wellness Coordinator, Gallatin City-County Health Department



## Food for Thoughts



### GOALS AND ACTIVITIES

This project aims to support student achievement by connecting youth to caring adults who can offer guidance, encouragement, and help to raise self-esteem.

Red Lodge Fire Rescue Community Care Team provides informal counseling, welcoming hugs, and healthy snacks to community high school students each Monday an hour before school begins. Students in need of individual mentorship are referred by administrative staff at Red Lodge High School. School counselors receive weekly reports of meetings with students.

Research has shown that a connection to a caring adult can help to increase the likelihood of graduation and mitigate the negative effects of “toxic stress,” which can cause lasting health problems.

### POPULATIONS SERVED

Students who attend Red Lodge High School, which includes the communities of Red Lodge, Roberts, and Luther, with a focus on at-risk youth who lack a strong, emotional support network.

### MAJOR PARTNERS AND FUNDERS

Red Lodge Fire Rescue Community Care Team, Red Lodge High School, and Red Lodge Area Community Foundation

### MAJOR OUTCOMES

Received positive feedback from students, school staff and parents:

- One student said that Monday mornings, when the Community Care Team visits, are the highlight of his school week.
- The team has helped several students dealing with mental health issues, including depression. One parent said he believes his daughter would not have made it through her junior year without us.

### INGREDIENTS FOR SUCCESS

Relationships and public trust were key. Members of the Red Lodge Fire Rescue Community Care team had been actively involved with the school in parent, coach, adviser, aid, and booster roles prior to this initiative. Because of that history, they were welcomed with open arms.

### ADVICE FOR OTHERS

“Be flexible and willing to collaborate with a variety of partners.”

— Ruth Bilyeu, Red Lodge Fire Rescue Community Care Team



# Manufactured Housing and Health

## WHAT WORKS PROJECT 10 IN MONTANA

### GOALS AND ACTIVITIES

This project aimed to improve the physical and mental health of residents by making home improvements and building social connectivity.

Activities included a community discussion on health and housing, financial education and counseling, housing assessments, weatherization, and home rehab.

### POPULATIONS SERVED

Low-income residents who are part of the Buena Vista manufactured home park community in Missoula, Montana. Several of the residents are elderly and/or living with a disability.

### MAJOR PARTNERS AND FUNDERS

NeighborWorks Montana, Missoula Human Resources Council, Climate Smart Missoula, Home Resources, Buena Vista Community, Partnership Health Center, Missoula City-County Health Department, Homeward, NeighborWorks America, Robert Wood Johnson Foundation, County Health Rankings and Roadmaps, Missoula County Grants and Planning Office, Resident Owned Communities USA

### MAJOR OUTCOMES

Coordination of existing housing education and counseling, weatherization, and health outreach dollars toward shared goals.

Improved financial skills for some households, including the ability to budget and save toward housing goals.

Increased social cohesion through strong resident engagement in the initiative.

Improved housing quality through weatherization and rehab.

### INGREDIENTS FOR SUCCESS

Strong relationships with housing residents that Neighbor Works Montana had built over the past four years opened the door for successful resident engagement and the development of shared goals.

Partners' willingness to fully engage, embrace the unknowns, and re-evaluate and adjust course when hurdles arose.

Used data from a previously conducted survey to inform the focus of this initiative and worked with a County Health Rankings and Roadmaps community coach.

### ADVICE FOR OTHERS

“Make sure that each participant has some self-interest in the shared goals so that the effort is worth their time and builds on their existing interests and skills, both as individuals and in terms of the organization they represent. Meet on a regular basis, and constantly evaluate your work, so that adjustments can be made as needed.”

—Kaia Peterson, Assistant Director, NeighborWorks Montana



## Cascade Ridge Senior Apartments

# WHAT WORKS PROJECT 11 IN MONTANA

### GOALS AND ACTIVITIES

Cascade Ridge Senior Apartments aims to **provide affordable, accessible housing for older adults** who want or need to live in close proximity to health care providers.

The housing site includes 56 units that have universal design features to help accommodate residents with accessibility needs. The one-bedroom apartments are 726 square feet and the two-bedroom apartments are 905 square feet.

The project was financed with federal Low Income Housing Tax Credits (LIHTC), which require the rent levels to remain affordable over a time horizon of at least 30 years.

### POPULATIONS SERVED

Residents in Great Falls who are age 55 or older with incomes at or below 60 percent of Area Median Income

### MAJOR PARTNERS AND FUNDERS

Montana Board of Housing, Mountain Plains Equity Group, Inc., Benefis Health System

### MAJOR OUTCOMES

Cascade Ridge is the first LIHTC property for seniors in Montana that was built in partnership with a hospital. The project has resulted in:

- Increased proximity to health care, which decreases the likelihood of missed medical appointments.
- Increased affordability of housing, which leaves more money left over for other household needs.
- Increased employment and volunteerism—some residents work or volunteer part-time at the hospital or cancer center nearby.

### INGREDIENTS FOR SUCCESS

Benefis Health System contributed the land parcel for the development, which includes four acres of real estate available on a long-term land lease at \$1.00 per year. Their participation allowed for the development of below-market-rate housing for low- to moderate-income seniors. As the largest non-governmental employer in Great Falls, Benefis's trusted brand and reputation also played an important role in the success of the project.

### ADVICE FOR OTHERS

“Safe and affordable housing plays a very important role in a person's overall health. It is natural for hospitals to become engaged in building affordable housing, especially for seniors who comprise a large proportion of their customer base. In providing access to quality, affordable housing, hospitals are able to be more proactive in meeting their patients' health needs.”

—Mary Bair, Montana Board of Housing

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## Big Sky Villas Rehabilitation Health Impact Assessment

### GOALS AND ACTIVITIES

This project aimed to identify the potential health impacts of the proposed rehabilitation for the Big Sky Villas Apartments complex using a Health Impact Assessment (HIA).

Research questions addressed the relationship between housing and health. The HIA provided an opportunity to address health inequities identified in the most recent Community Health Assessment conducted by Bozeman Health Deaconess Hospital and its partners.

### POPULATIONS SERVED

Residents of Big Sky Villas, an affordable family housing complex located in a low-income census tract in Belgrade, Montana, where 10 percent of residents live in poverty and nearly 50 percent are housing cost-burdened (pay more than 30 percent of their income for monthly rent).

### MAJOR PARTNERS AND FUNDERS

Gallatin City-County Health Department, National Association of County and City Health Officials (NACCHO), Human Resource Development Council District IX, Montana Nutrition and Physical Activity Program, Montana State University Health and Human Development, and City of Belgrade Planning Department

# WHAT WORKS PROJECT 12 IN MONTANA

### MAJOR OUTCOMES

Participation raised the profile of health in other sectors, reconnected public health and city planning, and focused on equity. Ultimately, the HIA helped make health a shared value among stakeholders and created a basis for coordinated action. Recommendations:

Manage temporary relocations to minimize school and work disruptions; consider a phased construction schedule so not all residents are displaced at once.

Develop a community garden, adopt and enforce smoking policies, create a resident council, develop a playground adjacent to the new building, recruit residents to help make streets more pedestrian- and bike-friendly.

Use the Green Building and Energy Conservation Standards developed by the State of Montana Department of Commerce to prevent exposure to toxins, chemicals, and enhance energy efficiency.

### INGREDIENTS FOR SUCCESS

Big Sky Villas residents participated in a workshop that produced a map of the community with resident-identified assets and areas of need. This helped inform HRDC and others involved in the building's rehab.

The project team identified indicators to evaluate the implementation of recommendations and continues to meet quarterly to track progress.

### ADVICE FOR OTHERS

“Start working with willing partners and invite new partners into this mix. The rapport that exists between previous partners ... can stimulate new relationship building. Be cognizant of the jargon used in each profession and work towards common meaning and understanding. Have a backbone organization or individual charged with organizing and facilitating clear, concise meetings to help partners accomplish goals.”

— Lori Christenson, Gallatin City-County Health Department



## Pantry Supper Club

# WHAT WORKS PROJECT 13 IN MONTANA

### GOALS AND ACTIVITIES

This project aims to improve nutrition and health of older adults who experience food insecurity and poor diet.

The Pantry Supper Club provides five frozen meals to program participants each week. The meals are in serving trays that can be heated in a standard oven or microwave. All meals can be eaten with just a spoon if necessary, do not require the use of a knife, and are easy to chew.

Worked with the local hospital, Meals on Wheels program, Human Resources Development Council (HRDC), and property managers of low-income housing facilities to identify participants.

Worked with Montana State University Dietetic Program interns to develop meal plans and recipes that support good health for older adults with diabetes, high blood pressure, and other chronic health conditions.

### POPULATIONS SERVED

Low-income seniors, age 60 or older, who live in Livingston or Park County who have at least one barrier that prevents them from being able to afford, shop for, and prepare healthful meals.

### MAJOR PARTNERS AND FUNDERS

Livingston Food Resource Center, Park County Meals on Wheels Program, Livingston Health Care, Montana State University Dietetic Internship Program, and Park County Community Foundation

### MAJOR OUTCOMES

Seniors who participated in the program reported feeling better, being more active, and feeling that they could live independently in their own homes.

### INGREDIENTS FOR SUCCESS

Hired a part-time professional chef to cook the meals, organized a team of volunteers to do meal packaging and distribution, use locally-sourced ingredients processed in the Livingston Food Resource Center commercial kitchen.

Used data to identify program need and evaluate effectiveness:

- Conducted a survey that revealed that many seniors experience health problems related to poor diet, lack financial resources to purchase healthy food, and do not have the physical capacity to shop or cook.
- Conduct bi-monthly interviews with participating seniors to help ensure effective service. Learned that seniors really liked the food, but that initial serving sizes were too large and seasoning was too spicy.

### ADVICE FOR OTHERS

Look for specific needs among well-defined segments of your community's population and then identify opportunities to work with those organizations who are working with those groups.

— Michael McCormick, Livingston Food Resource Center

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## Fresh Food Initiative

# WHAT WORKS PROJECT 14 IN MONTANA

### GOALS AND ACTIVITIES

The Fresh Food Initiative aims to increase residents' access to healthy food and local products.

Major activities include: The Helena Food Share Garden revitalization; distribution of locally grown food through the mobile farm stand; increasing nutritious food options through the Grocery Share program; securing healthy donations through the Grocery Rescue program; introducing healthy options in the Kid Packs like Kamut; SNAP cooking and nutrition classes with MSU Extension; holiday food distribution that includes fresh produce; distribution and marketing of locally grown specialty crops like lentils; incentives, such as crock pots, to encourage preparation and stretching of wholesome meals; a recipe board and product demonstrations to encourage healthy food consumption and cooking habits.

### POPULATIONS SERVED

Individuals and families in the Greater Helena Area who are in need of food assistance.

### MAJOR PARTNERS AND FUNDERS

Helena Food Share, Montana State University Extension, Helena Community Gardens, The Fresh Food Collaborative, 6th Ward Garden (Helena City Parks and Recreation), Montana Partnership to End Childhood Hunger, Timeless Seeds Inc., Lewis and Clark Brewing Co., The Ten Mile Creek Brewing Co., Big Sandy Organics, Wheat Montana, The Boy Scouts of America, Montana Conservation Corps, AmeriCorps Members, Helena Farmer's Market, St. Peter's Hospital, and all the area grocery stores

### MAJOR OUTCOMES

Increased fresh food donations from local grocers and growers.

Increased nutritious food options available through the Grocery Share program.

### INGREDIENTS FOR SUCCESS

Community engagement and collaboration is critical to all things we do at Helena Food Share. In regards to our Fresh Food Initiative, from our garden revitalization and growing our own food to partnering with local businesses to be able to purchase local products to offer on our shelves, it truly has been a community effort.

Having all interested parties at the table is key in the brainstorming phase and is important for steering the project, but it is imperative that one agency is willing to take the lead in coordinating the details. We listen to our customers and let their needs lead our Fresh Food Initiative.

### ADVICE FOR OTHERS

“Improving the community begins with knowing those you serve and building trust. Brainstorm with the community; involve them in the cause. People are motivated to collaborate when you find common and innovative intersections in each other's missions. We have found success by developing partnerships, working with a large volunteer force, and caring deeply about the people we serve.”

—Kim Dale and Kara Snyder, Helena Food Share



# WHAT WORKS IN MONTANA

PROJECT  
15

## Montana Healthy Food and Communities Initiative (MHFCI)

### GOALS AND ACTIVITIES

The MHFCI initiative aims to improve healthy food access and reduce childhood obesity.

**Activities include:** providing nutrition education to school staff, parents and students, developing and maintaining school gardens, connecting institutions to local producers, creating market opportunities for Montana farmers and ranchers, and engaging in food policy.

### POPULATIONS SERVED

Statewide training and outreach, with targeted efforts in Anaconda, Big Fork, Boulder, Bozeman, Butte, Columbia Falls, Crow Reservation, Ennis, Flathead Reservation, Hardin, Kalispell, Livingston, Missoula, Philipsburg, Polson, Red Lodge, Ronan-Pablo, and Somers.

Target populations include: low-income families and children who are eligible for free or reduced priced lunch and Supplemental Nutrition Assistance Program benefits and institutional food service staff and producers interested in local food procurement.

### MAJOR PARTNERS AND FUNDERS

National Center for Appropriate Technology (NCAT), Montana State University, Montana Team Nutrition, Montana Department of Agriculture, Montana Health Care Foundation, The Food Trust, U.S. Department of Agriculture, 24 Montana farmers markets, 13 Montana school districts, Crow and Flathead Reservation advocates, Montana Farm to School Leadership Team, and numerous community-based organizations

### MAJOR OUTCOMES

- Increased participation in farm to school programs
- Increased participation in SNAP (food stamps) by eligible households
- Increased awareness of the benefits of healthy food consumption
- Increased purchases of fresh food at local farmers markets by low-income families
- Increased purchasing of local foods by K-12 schools

### INGREDIENTS FOR SUCCESS

- Established shared goals, and a cross-sector leadership team committed to carrying out those goals.
- Engaged parents and community members in the development and revitalization of school gardens.
- Identified local champions and collaborated with them to design and implement program activities.

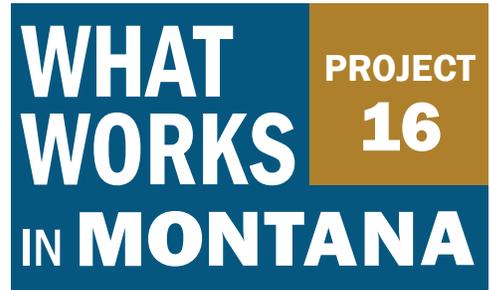
### ADVICE FOR OTHERS

“1) Changing cultures takes time and resources. For school environments we suggest considering at least a 4- to 6-year window. 2) Let the local school community determine what constitutes success, as it will look at least slightly different in every school. 3) Find a champion within the organization that can aid in creating change from the inside out. 4) Collaboration is key, find partners who are willing to share ideas, funding sources, successes, and perhaps more importantly, failures.”

— Al Kurki, National Center for Appropriate Technology (NCAT)



## River Valley Farmer's Market Expansion Project



### GOALS AND ACTIVITIES

This project, spearheaded by the Healthy Hardin Community Development Partnership, aims to increase access to local fresh food, promote local businesses, promote physical activity, support community engagement, provide health education, and connect families to needed services.

The River Valley Farmer's Market combines food sales with health promotion in a new way. Activities include fruit and vegetable vendors, baked goods, prepared healthy foods, arts and crafts, community health service representatives, immunizations, dental information, tobacco cessation services, learning and movement games for children, parent supportive activities, acceptance of Supplemental Nutrition Assistance Program (SNAP) benefits, and participation in the Double Your Dollars program. Walking is encouraged by closing the street to car traffic and allowing dogs.

The market is held in the evenings during the months of August and September.

### POPULATIONS SERVED

Residents of Big Horn County and Crow Reservation Area

### MAJOR PARTNERS AND FUNDERS

Big Horn Valley Health Center, Healthy Hardin Community Development Partnership (HHCDP), Rural Health Initiative, City of Hardin, First Interstate BancSystem Foundation, Big Horn Hospital Association, Big Horn County Health Department, Bighorn Industries, Lift Program Hardin School District Food Corps, Big Horn County Extension Office, Big Horn County Fair Board and City/County Planning Board, and Two Rivers Authority

### MAJOR OUTCOMES

In 2017, 24 vendors and public service providers participated. Attendance averaged 250 to 300 visitors a week.

### INGREDIENTS FOR SUCCESS

The project used data to inform planning in the following ways:

- The Healthy Hardin Community Development Partnership was formed as a direct result of the community health needs assessment conducted by the local hospital. The assessment identified several issues including high rates of obesity and diabetes and a lack of opportunities to be physically active.
- We regularly seek input from community members in planning and refining the event each year. After each market season, we conduct a phone survey with all vendors to gather feedback on logistics, outcomes, and suggestions for improvement.

### ADVICE FOR OTHERS

“Start with a core group of committed people who have successfully worked together in the past and are action-focused. It is easier to attract new energy to an established effort. Creating a shared vision takes time, passion, and a positive outlook.”

— Shelly Sutherland, Big Horn Valley Health Center



## Healthy Foods Financing Initiative Project (HFFIP)

# WHAT WORKS PROJECT 17 IN MONTANA

### GOALS AND ACTIVITIES

This project aims to increase the capacity of local and regional food systems to enable greater access to locally grown, healthy foods for residents living in the food deserts of rural communities on Native American Reservations in Montana, Wyoming, and North and South Dakota.

Project partners will work to develop policies and legal codes that can be adopted by tribal councils to allow local small businesses to sell produce to stores located within their reservation boundaries. A loan fund will provide potential financing for small business that will, in turn, also provide employment opportunities for at least 40 Native Americans.

### POPULATIONS SERVED

All of Montana's reservations are located in federally designated food desert areas. The project will initially target residents of Crow, Fort Peck, Fort Belknap, Northern Cheyenne, and Littleshell.

### MAJOR PARTNERS AND FUNDERS

**Main funder:** U.S. Department of Health and Human Services, Administration for Children and Families.

**Other partners:** Native American Development Corporation, Partners with Native Americans, Tribal Colleges, Tribal Community Members, Tribal Councils, Montana State University Extension Office, and other Reservation-wide agencies.

### MAJOR OUTCOMES

During the first year, developed necessary infrastructure for the project, including baseline measures and shared goals.

### INGREDIENTS FOR SUCCESS

Conducted a Food Assessment survey in impacted communities. Learned that community members were interested in gaining new knowledge about gardening, nutrition, cooking, and canning. Several residents were also interested in the development of a commercial kitchen to help incubate and grow more local businesses.

Communities are empowered by their own decision-making. One of the many ways we engaged the community was to facilitate community meetings and really listen to what the community wanted. The community members became the voice and main contributor to the overall success of the project.

### ADVICE FOR OTHERS

“Be sure to involve your community members as partners and key stakeholders.”

— Mitzi Racine, Native American Development Corporation



## Butte's Open Air Small Business Incubator

# WHAT WORKS PROJECT 18 IN MONTANA

### GOALS AND ACTIVITIES

The Butte Farmers Market and Open Air Small Business Incubator Program work in tandem to support entrepreneurs who have the potential to become viable storefront operations.

- The incubator program reimburses entrepreneurs' rent for up to three months (up to \$700 a month) upon presentation of their payment receipts.
- In addition to serving as a "test market" for local vendors, the farmer's market provides fresh produce and a social networking opportunity from May to October.

### POPULATIONS SERVED

Residents and vendors located in Butte and southwestern Montana

### MAJOR PARTNERS AND FUNDERS

Mainstreet Uptown Butte, Inc., Economic Mill Levy Fund, and local and regional vendors

### MAJOR OUTCOMES

- Participating vendors generate \$200,000–\$250,000 of commerce for vendors and surrounding businesses over a 20-week market season. Several have gone on to occupy vacant storefronts in the downtown area. This, in turn, has helped to improve the health and vitality of our business district.
- Provided increased opportunities for physical activity by creating a pleasant environment that encourages walking and bicycling past vendor tables.

### INGREDIENTS FOR SUCCESS

The key is to get to know vendors and learn their ambitions and business acumen. One must always be on the lookout for a business ready to make the move from being home-based to being a storefront operation. The incentives we offer, such as rental assistance, help to make this transition go more smoothly. Business owners win, property owners win, and we win by accomplishing our goal of getting viable businesses into previously vacant storefronts.

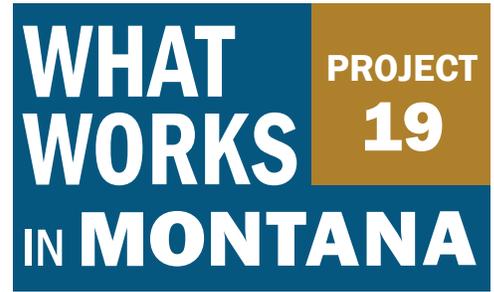
### ADVICE FOR OTHERS

"Street events, festivals and fairs can foster community and individual well-being. These activities bring residents out into the fresh air and into the company of their neighbors, which is a direct health benefit in a time of growing isolation and social media."

— George Everett, Mainstreet Butte, Inc.



## Pedlet



### GOALS AND ACTIVITIES

This project aims to improve walkability and increase business activity in downtown.

The pedlet is a movable structure that acts as a sidewalk extension beyond the existing curb line. It provides a buffer between traffic and restaurant outdoor seating, and provides safe passage for pedestrians. The structure is 40 feet long, 5 feet wide, and is ADA compliant.

### POPULATIONS SERVED

Montana residents who live, work, or shop in downtown Great Falls

### MAJOR PARTNERS AND FUNDERS

Great Falls Business Improvement District, Montana Main Street Program, NeighborWorks Great Falls City of Great Falls, Downtown Development Partnership of Great Falls

### MAJOR OUTCOMES

The pedlet has proven to be an economic driver. The participating business has added 30 seats and increased their staff by 5 to accommodate the new business that sidewalk dining has allowed. Revenues increased by 20 percent after installation.

Utilized creativity and placemaking concepts to design and implement the pedlet, which has helped to improve residents' perceptions of downtown.

Six additional businesses are on a wait list for a pedlet in 2018.

### INGREDIENTS FOR SUCCESS

Williness to think “outside the box” and engage private partners. Mighty Mo Brewing Company agreed to serve as the pilot and L'Heureux Page Werner donated hours to architectural design. Great Falls, MT is believed to be the second community in the nation to utilize this safe and effective alternative to a parklet (West Allis, Wisconsin was the first).

### ADVICE FOR OTHERS

“To finance a pedlet in your community, consider pursuing grant funds for placemaking. The Montana Main Street grant program and Montana Tourism grant program are possibilities. It could also be financed privately, or as a public/private partnership. Be sure to include appropriate signing for the pedlet, so that pedestrians are directed to walk through it, and not around it.”

— Joan Redeen, Great Falls Business Improvement District



## Northern Winds Recovery Center (Small Business Lending)

# WHAT WORKS PROJECT 20 IN MONTANA

### GOALS AND ACTIVITIES

This project aims to improve the health and wellness by providing culturally appropriate mental health and substance abuse recovery services. Examples include a Native American social skills assessment for adolescent patients, and a “Wellbriety” class—an Alcoholics Anonymous treatment model adapted for Native Americans that emphasizes wellness.

This native-owned business was financed by Montana Idaho Community Development Corporation, a community development financial institution (CDFI), which provides access to capital for businesses who fall outside of traditional bank requirements. In addition to providing loans for community economic development purposes, Montana Idaho CDC supports its borrowers by providing consulting, including bookkeeping, marketing, operational and legal advice, with the goal of bringing them into the financial mainstream as quickly as possible.

### POPULATIONS SERVED

The target population for the Northern Winds Recovery Center is the Blackfeet Reservation community, including the reservation area and surrounding counties. The Center serves an estimated 1,500 clients annually.

### MAJOR PARTNERS AND FUNDERS

Montana Idaho CDC, Child Protective Services, Child & Family Services, Family court, Indian Health Services, Browning Public Schools, the Blackfeet Tribe, and the Southern Piegan Health Center

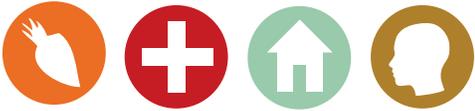
### MAJOR OUTCOMES

- Increased access to mental health and chemical dependency treatment in a community that faces provider shortages (Indian Health Services recently downsized by 60 percent).
- Addressed frequent barriers to receiving clinical care by providing rides to appointments, getting transportation to treatment facilities, and coordinating care with other services.

### INGREDIENTS FOR SUCCESS

Used CDFI financing to support the development of a native-owned business. The business owner could not secure financing from banks or local economic development corporations.

Used data to evaluate impact. Northern Winds Recovery Center is monitoring symptoms and doing basic quality of life evaluations. They are also working with the University of Montana to develop a way to evaluate effectiveness of specific treatments.



## Montana Health Justice Partnership

# WHAT WORKS PROJECT 21 IN MONTANA

### GOALS AND ACTIVITIES

The Montana Health Justice Partnership (MHJP) improves patient health by addressing health-harming legal needs of patients whose health solutions lay outside the boundaries of medicine. The Partnership integrates legal staff into health teams for matters such as moldy housing, family violence, and medical debt – which all negatively impact patient health.

**Activities include:** Train health and legal teams to work collaboratively to screen and refer patients for health-harming legal needs; provide legal advice and representation; and improve policies that impact community health.

### POPULATIONS SERVED

Patients who visit participating health centers in Havre, Libby, and Great Falls and migrant farm worker clinics in Billings, Dillion, Fairview and Lolo.

### MAJOR PARTNERS AND FUNDERS

Montana Legal Services Association, Montana Primary Care Association, Bullhook Community Health Center, Northwest Community Health Center, Community Health Care Center, Montana Ag Worker Health and Services, Montana Healthcare Foundation, Montana Justice Foundation, and Legal Services Corporation

### MAJOR OUTCOMES

The partnership steering committee developed a formal evaluation plan to evaluate project in its first year. Year 1 resulted in 366 patient referrals, 228 legal intakes, and 155 case referrals. Those assisted received an average of \$859 in economic benefits and 94 percent reported improved health.

### INGREDIENTS FOR SUCCESS

The MHJP consists of partners from different sectors who share the same mission and vision for their work. This makes collaborating easier since the partnership has communal goals. All partners invest money, staff, and office resources. The common goals have attracted support from foundations focusing on justice and health improvement.

The MHJP has also used technology to manage the project, collect data, and enable medical and legal partners to communicate more easily.

### ADVICE FOR OTHERS

“Success requires buy-in from all levels of partner staff; their feedback is important in order to develop an effective and sustainable partnership. Technology solutions can be worth the investment— collecting outcomes data is critical for evaluating impact and demonstrating value to partners and patients. A good data system can also help to reduce administrative burden.”

— Kallie Dale-Ramos, Montana Legal Services Association



## Adult Resource Alliance Care Transition Team of Yellowstone County

### GOALS AND ACTIVITIES

This project aims to decrease utilization of emergency and hospital services in Yellowstone County by providing wraparound services for residents who are “super-utilizers” of emergency room and hospital services.

The Care Transition Team receives client referrals from Billings Clinic, St. Vincent Healthcare, and RiverStone Health. They conduct home visits and develop individualized care plans that aim to decrease stressors brought on by frequent illness, gain access to resources in the community, communicate with their healthcare team, and create the ability to better tolerate life circumstances.

Team members begin by managing their clients’ individual care needs and work towards graduation with the client managing their own daily needs. Services provided by team members may range from education on health and safety to assistance with finding new housing.

### POPULATIONS SERVED

Individuals living in Yellowstone County with five or more Emergency Department admissions and two or more hospital admissions in a rolling six month period.

### MAJOR PARTNERS AND FUNDERS

**FUNDERS** Adult Resource Alliance, Billings Clinic, St. Vincent Healthcare, Healthy by Design, RiverStone Health, Montana Department of Health and Human Services, Montana Healthcare Foundation, Mountain-Pacific Quality Health Foundation, Robert Wood Johnson Foundation, and Centers for Medicare & Medicaid Services.

The planning team for this project was convened by Healthy By Design and funded by the Montana Healthcare Foundation and Mountain Pacific Quality Health.

# WHAT WORKS IN MONTANA

PROJECT  
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### MAJOR OUTCOMES

Several clients have shown a decrease in or cessation of emergency room and hospital visits. Clients are now contacting their primary care physician office prior to going to the emergency department for non-emergencies. Communication across organizations and offices has improved. Many clients have powerful individual stories of how the team helped them find stability.

### INGREDIENTS FOR SUCCESS

The unity and shared vision by all three major healthcare organizations in the community was a key factor.

The planning committee consistently had vice-president-level representation at the table when the pilot was being designed, which allowed for real-time collaborative decision-making.

A variety of data measures are being used to demonstrate impact and evaluate needs and gaps: admissions, admission avoidance, chronic conditions, Z-code data, intervention type, and time spent with clients.

### ADVICE FOR OTHERS

“Be creative. No two individuals or circumstances are alike once they are outside of the hospital walls. Take the time to really listen to the person and their thoughts about the reason for their current state – all too often, they just want to be heard.”

— Jennifer Hough RN, MSN, CCRN, Adult Resource Alliance

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## Active Living Wayfinding System

# WHAT WORKS IN MONTANA

PROJECT  
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### GOALS AND ACTIVITIES

The Active Living Wayfinding System aims to create greater health equity by connecting residents of all ages, ability and incomes to opportunities that support healthy food consumption and physical activity.

**Activities:** Created a wayfinding system and communications plan, hosted a healthy communities design workshop, and conducted a demonstration project to educate decision-makers with the goal of area-wide adoption.

### POPULATIONS SERVED

Residents of the Greater Helena Area, with a special emphasis on low-income households, seniors, and people with disabilities.

### MAJOR PARTNERS AND FUNDERS

Lewis and Clark Public Health, Western Central Chapter of American Planning Association, City of East Helena, Helena Downtown Business Improvement District, Montana Independent Living Project, Helena Parks and Recreation Department, Bike Walk Helena/Bike Walk Montana, YMCA, Youth Connections, Helena Food Share, Non-motorized Travel Advisory Council, Prickly Pear Land Trust, Helena Indian Alliance, Montana Department of Transportation, Helena City Engineering Department, Montana State University Extension Services SNAP Education, Exploration Works, Helena Tourism Bureau, University of Montana Disabilities and Health Program, and Montana State University Rural Health Institute, American Planning Assoc. and Am Public Health Assoc., National Assoc. of Chronic Disease Directors

### MAJOR OUTCOMES

- Brought together public health and community planning concepts. Addressed a need identified in the Greater Helena Area Long Range Transportation Plan.
- Engaged more than 50 community organizations and 1,000 individuals in the development of this project.
- Developed signage that is accessible to people with disabilities, including those with low vision.

### INGREDIENTS FOR SUCCESS

Used Centers for Disease Control (CDC) Behavioral Risk Factors Surveillance System (BRFSS) data, Youth Risk Behavior Survey data, and Montana Prevention Survey data to establish baseline population health indicators; will track changes over time.

Received technical assistance from the National Center on Health, Physical Activity and Disability (NCHPAD), University of Montana Disabilities and Health Program, Montana State University Rural Health Institute, Nutrition and Physical Activity.

Community partners provided strong planning, leadership and financial support by including the Active Living Wayfinding System in their own budgets and being willing to serve as spokespersons for the project around town.

### ADVICE FOR OTHERS

“Having representation from entities in the private, public and nonprofit sectors gave the project credibility and suitability. Get community representatives involved from the outset, and give them meaningful, valued and defined roles. Ensure that people are not brought on as an afterthought. Think beyond the usual stakeholders, so that the outcome is usable by the broader community”

— Karen Lane, Lewis and Clark Public Health

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## Promoting a Culture of Health in Workplaces

# WHAT WORKS PROJECT 24 IN MONTANA

### GOALS AND ACTIVITIES

The goal is to improve the health of Montana employees through worksite wellness programs, ensuring that they have access to healthy food, beverages, breastfeeding support, physical activity, tobacco-free environments, tobacco cessation opportunities, and insurance coverage for clinical preventative services.

Local health educators across Montana are contracted out of health departments to work with at least three worksites to implement worksite wellness programs. Health educators use seven benchmarks developed by the Wellness Council of America (WELCOA) to assess worksite wellness programs and advise on how to strengthen programs. Worksites receive intensive online training and resources available 24/7 through WELCOA Institute, about creating or enhancing worksite wellness initiatives.

### POPULATIONS SERVED

Employees at worksites throughout Montana and their communities.

### MAJOR PARTNERS AND FUNDERS

Montana Department of Public Health and Human Services Chronic Disease Prevention and Health Promotion Bureau, Centers for Disease Control and Prevention

### MAJOR OUTCOMES

In 2017, 13 local health educators were working with 35 worksites ranging in size from 12 to 1,200 employees.

### INGREDIENTS FOR SUCCESS

Committed, strong, supportive and aligned leadership at worksites is essential to developing strong wellness programs. Companies with senior-level support have healthier employees and better working environments. WELCOA provides valuable resources for training and worksite campaigns. Contractor work is tracked through quarterly deliverables. Based on these data, contractors may receive additional training, mentoring, or other resources as needed.

### ADVICE FOR OTHERS

“Work to ensure that company leadership is on board and involved in the process.”

— Sara Murgel, Montana Cancer Control Program Manager, CDPHP Montana Cancer Control Program



## IPHARM - Improving Health Among Rural Americans

# WHAT WORKS PROJECT 25 IN MONTANA

### GOALS AND ACTIVITIES

The aim of this project is to increase access to preventative health care services for rural and frontier Montanans.

IPHARM provides health screening services, serves as rural ambulatory care practice site for health professional students, and also provides geriatric wellness education and testing. Service sites include community health centers, urban Indian health clinics, senior centers, community health fairs, employer screening events, reservation areas, migrant worker health clinics, and Hutterite colonies.

### POPULATIONS SERVED

Residents of rural Montana statewide who lack geographic or financial access to preventative health screening. Staff have traveled to Helena, Libby, Huntly, Troy, Dillon, Lincoln, Ennis, Dutton, Stanford, Big Timber, Libby, Yaak, Missoula, Butte, Rocky Boy, Browning, Fort Peck, Florence, Chinook, Polson, and many other communities.

### MAJOR PARTNERS AND FUNDERS

University of Montana College of Health Professions and Biomedical Sciences, Skaggs School of Pharmacy, School of Physical Therapy and Rehabilitation Science, School of Social Work, School of Physical Therapy and Rehabilitation Science, Montana State University School of Nursing, Native American Center of Excellence, Missoula Urban Indian Health Center, Montana Food Bank Network, Montana Geriatric Education Center, and HRSA

### MAJOR OUTCOMES

- This program is the only known program in the United States that utilizes health professional students and university faculty to travel to communities in need of these services.
- Provides preventative screening to thousands of residents each year in more than 50 communities.

### INGREDIENTS FOR SUCCESS

Utilized student volunteers. Pharmacy and other health professional students who grew up in rural communities have been great ambassadors. It is very rewarding going to communities where students grew up and watching the mutual pride between the student and community.

Collected evaluation data. We distribute outcome cards and satisfaction surveys to clients who have abnormal results during our screening events and have received many positive comments regarding our program

### ADVICE FOR OTHERS

“Community engagement is vital to success.”

— Donna Beall, University of Montana College of Health Professions and Biomedical Sciences