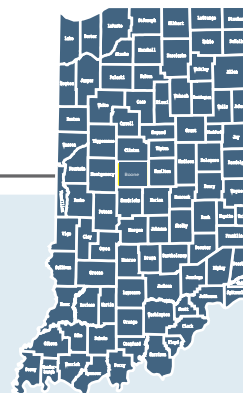


Child and Adult Care Food Program Mini CollN Project

By: Jessica Yoder, B.Ed., MPH



SUMMARY

There are an estimated 950,720 Hoosiers who are food insecure. Indiana has a food insecurity rate of 14.4%, compared to a US food insecurity rate of 13.4% (2017 Map the Meal Gap Report, from Feeding America). As of Spring, 2016, there were a total of 3,940 licensed, early childcare education centers and homes and registered ministries in Indiana and only 2,610 of them were enrolled or had pending enrollments in the Child and Adult Care Food Program (CACFP). This leaves 1,330 centers not enrolled in CACFP and are missing out on the crucial assistance and guidance on healthy eating that the Department of Education Office of Community Nutrition Child and Adult Care Food Programs provides.

The Indiana State Department of Health, Division of Nutrition and Physical Activity (DNPA) participated in the 2017 Pediatric Obesity Mini CollN (Collaborative Improvement & Innovation Networks) Prevention Quality Improvement State Collaborative led by the Association of State Public Health Nutritionists (ASPHN). The Indiana partnership consisted of Indiana Department of Education (DOE) Office of Community Nutrition, Child and Adult Care Food Program (CACFP), Early Learning Indiana, and DNPA. The aim of this collaborative was to support and enhance work on the 1305, Domain 2 strategy of improving nutrition and physical activity in early care and education (ECE) settings through a quality improvement process. Objectives were set forth, centered on improving retention among current CACFP enrollees in Indiana and encouraging providers not currently enrolled to seek information on participation.

CHALLENGE

When opportunities such as the Mini CollN arise, having a diverse group of stakeholders, all with differing work plans, can make focus a challenge. Getting all partners to commit equal amounts of time was challenging because other, more established work often came first.

The need for a comprehensive list of all ECEs and their CACFP status proved to be a challenge. A list of all ECEs from Family and Social Services Administration (FSSA) and a separate list of all ECEs participating in CACFP from DOE were requested. These two lists had never been combined before, so DNPA staff spent a considerable amount of time matching sites and eventually created a complete list of all ECEs in the state with CACFP status. This time consuming process showed the need for a more transparent and collaborative data sharing system among state agencies.

YOUR INVOLVEMENT IS KEY

For more information about the Indiana Child and Adult Care Food Program, visit <https://www.doe.in.gov/nutrition/child-and-adult-care-food-program>.

More information about DNPA can be found at <http://www.dnpa.isdh.in.gov>.

This project is supported by the State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity, and Associated Risk Factors and Promote School Health cooperative agreement (DP13-1305) in addition to the six-year Cooperative Agreement (6U58DP004102-05-02) between Nemours and the Centers for Disease Control and Prevention (CDC) which supports states in launching ECE learning collaborative focused on childhood obesity prevention.

"In addition to uncovering a lack of CACFP participation in some high need areas, the mini CollN project has offered insight into perceived benefits and barriers of the program. Beyond the uses for the mini CollN, this information will continue to inform our decisions on outreach approaches including strategy and messaging."

- Heather Stinson, Child Nutrition Specialist, IDOE

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SOLUTION

The most successful aspect of this project was creation of a cross-discipline collaboration. Team members were able to bring expertise on their own subject matter but also challenge each other to think of more innovative solutions to address the problem at hand. DNPA served as a leader in moving forward with action plan steps, DOE provided first-hand experiences with the CACFP enrollment process and Early Learning Indiana was able to connect the team to child care providers and inform on updated obesity prevention methods in the early child care setting.

Another objective in this project was to compile a list of current and pending CACFP enrollees and compare the list to all licensed childcare providers in the state of Indiana. Using ArcGIS, a state map was created to show all licensed child care sites, their CACFP status, and an additional layer showing low income and healthy food access. This map has helped inform the team of priority target areas for future outreach and technical assistance.

RESULTS

Using the PDSA Cycle, a purpose statement and focused plan were developed in order to move forward with some of the ideas presented in the Mini CollIN proposal. Team members learned from other states and identified specific challenges that their project would face in Indiana. Planned accomplishments would be tracked using an agreed upon evaluation process.

Data collection and creation of the ArcGIS map resulted in a list of 187 targeted ECEs in Indiana that were not enrolled in CACFP but also resided in food deserts. Of these targets, 101 were identified as licensed child care homes, 64 as registered ministries, and 22 as licensed child care centers. Next steps would require input from ECE partners on the existing CACFP outreach materials.

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Contact CDC

<http://www.cdc.gov/cdc-info/requestform.html>

Web site

<http://nccd.cdc.gov/nccdsuccessstories/>

The findings and conclusions in this success story are those of the author(s) and do not necessarily represent the official position of the funding agencies or the Centers for Disease Control and Prevention (CDC).

SUSTAINING SUCCESS

To ensure continuation of the momentum the Indiana team found as a result of the Mini CollIN training in Minneapolis, ISDH leadership would prove to be a sustaining factor in this project. Scheduling meetings, bringing new team members up to speed, and delegating of tasks helped keep the team focused. Additional partners were also brought onboard to fill the gaps that remained in the established plan.

Early Learning Indiana has been funded for the National Early Care and Education Learning Collaborative (ECELC) Project at a variety of levels since 2013 by Nemours. Because of their success, Indiana was given priority consideration for the Mini CollIN. This can aid in sustainability and position Indiana for continued and future funding due to the success.



Indiana State
Department of Health