

**Association of State Public Health
Nutritionists (ASPHN) 2022-23 Farm to
Early Care and Education Capacity
Building Grant
(CABBAGE)**

INFORMATION PACKET



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ASPHN's Farm to ECE grantee programs are supported by the Centers for Disease Control and Prevention (CDC) of the United States (U.S.) Department of Health and Human Services (HHS) as part of cooperative agreement number NU380T000279 (total of 2,295,000). CABBAGE is an ASPHN's Farm to ECE grantee program, which is funded by the Division of Nutrition, Physical Activity and Obesity (DNPAO)/ National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) /CDC/HHS. The contents of this resource are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, DNPAO/NCCDPHP/CDC/HHS, or the U.S. government.

Year 3 CABBAGE Background

CABBAGE Background

With funding from CDC DNPAO and in collaboration with National Farm to School Network (NFSN), ASPHN is offering a technical assistance (TA) and funding opportunity for Racial and Ethnic Approaches to Community Health (REACH) recipients to learn about and initiate Farm to ECE programs with a health equity focus. The goal of this opportunity, called CABBAGE, is to increase the quality of local ECEs and increase access to healthy food and environments for young children. ECEs, which include child care centers, family child care homes, pre-kindergarten classrooms, and Head Start/Early Head Start programs, present an important opportunity for healthy early childhood development and obesity prevention.

To achieve this goal, Year 3 CABBAGE will maintain support for the current 4 REACH recipients' building local Farm to ECE engagement, develop supporting partnerships, identify areas to address equity, and increase the number of ECEs conducting sustainable, comprehensive Farm to ECE.

Comprehensive Farm to ECE initiatives are ECEs within your priority population that:

- purchase and serve local foods;
- grow edible gardens (indoors or outdoors); and
- embed nutrition and agricultural information into the content of the ECE programming.

The most sustainable, comprehensive Farm to ECE initiatives are those that are supported by strong partnerships, include equity as a central tenet in the work, and have ECE provider participation.

Partner Organizations Supporting CABBAGE

ECEs are priority settings for the CDC's obesity prevention efforts in the US. CDC is supporting the CABBAGE TA and funding opportunity focused on Farm to ECE as an effective way to teach healthy habits at a young age, and in the long term, reduce health inequity. [CDC's DNPAO](#) is partnering with [ASPHN](#) to administer and lead CABBAGE.

ASPHN is a nonprofit membership organization, building national and state leadership on food and nutrition policy, programs, and services. ASPHN's vision is healthy eating and active living for everyone. To achieve this vision, ASPHN works to strengthen nutrition policy, systems, and environments for all people. This has included focused work, since 2018, on improving ECEs through the advancement of Farm to ECE state partnerships and

programs. ASPHN is fortunate to have the assistance of the National Farm to School Network (NFSN) on all Farm to ECE work. ASPHN and NFSN are valuable organizations for Farm to ECE stakeholders who want to find resources, advocate for policy change, and network to learn from their peers. In addition, ASPHN receives guidance from diverse experts in the field that participate in the ASPHN Farm to ECE Advisory Committee (appendix II).

Advantage of Farm to ECE

Farm to ECE has many benefits, which can impact not only the children in an ECE but also the ECE providers, children's families, and community. These benefits include:

- increased access to and consumption of fresh local produce;
- long-term influence on children's eating habits;
- participation in experiential learning;
- understanding of farming and ecology;
- positive associations with the outdoor;
- local economic development;
- and advancing equity in ECE and food systems.

Published studies have documented Farm to ECE's association with children's increased new food acceptance, fruit and vegetable consumption, knowledge of farming and food, and parent engagement (Hoffman et al., 2017; Shedd et al., 2018; SNAPEd Toolkit and National Farm to School Network, 2018). These studies and others affirm that early childhood is an ideal time to introduce Farm to ECE (Baidal & Taveras, 2012). Birth to five years of age is a developmental time period when new food acceptance is critical and most malleable (Birch, 1999; Mennella & Trabulsi, 2012; Ventura & Worobey, 2013). Early childhood is also a time when habit development and interventions have lasting impacts on long term wellbeing and health (Campbell et al., 2014; Wen et al., 2012). Therefore the return on investment on early childhood health interventions is a potent justification for Farm to ECE (Campbell et al., 2014; Heckman, J., 2011; Reynolds et al., 2011).

As described, comprehensive Farm to ECE programs encompass a set of activities that include 1) purchasing and serving local foods in the ECE setting, 2) growing edible gardens indoors or outdoors, and 3) embedding agriculture, food, health or nutrition education into the content of the ECE programming. Farm to ECE initiatives within all of these activities can adapt to diverse ECE types, capacities, and resources. ECE sites can buy locally farmed foods from different sources including farmers' markets, grocery stores, co-ops, food hubs, or directly from producers. Foods offered in meals, snacks or taste tests may include local produce, eggs, meat, grains, or dairy. ECE sites, even those with limited space, can develop their own garden, indoors and/or outdoors. The garden provides hands-on learning and produce for meals, snacks, or taste tests. ECE sites can incorporate nutrition-based curriculum or activities that include learning about agriculture, local food

producers and foods, healthy eating, and the value of supporting local agriculture. Farm to ECEs can provide experiential learning opportunities in addition to garden-based learning, with live or virtual trips to visit farms or related agricultural businesses.

Equity and Farm to ECE

Farm to ECE can also play a role in addressing equity. Farm to ECE can support health and educational equity by increasing access to healthy foods, beneficial and positive outdoor environments, experiential learning opportunities, and quality ECEs. Farm to ECE local food purchasing practices can also drive equity in food systems by creating new markets for small producers, producers of color, and producers from historically marginalized groups. Additionally, Farm to ECE can be a way to increase family engagement, agency, and connection to their child's education and the local food system.

COVID-19 and Farm to ECE

Farm to ECE has particular relevance in the context of the current health crisis. Coronavirus disease 2019 (COVID-19) laid bare the inequities in our food and ECE systems. ECE providers struggled during the pandemic to maintain their livelihoods while still trying to provide families and young children nurturing support. At the same time, providers and families may not have had access to healthy food. Farm to ECE can help make the policy requirements for ECE providers that arose during and post-COVID-19 a little easier with the opportunities it provides for physically distancing, outdoor time, and healthy learning activities. Farm to ECE can also help support local food systems by connecting ECEs to local food producers. Enhancing connections with local food producers and ECEs can also increase the access ECE's children, families, and staff have to local, healthy foods (Oppenheim & Stephens, 2020).

Year 3 CABBAGE Structure, Benefits & Expectations

The CABBAGE is a TA opportunity for REACH teams to learn more about Farm to ECE, model Farm to ECE programs at the local and state level, and how other REACH teams are advancing Farm to ECE in their priority populations. CABBAGE TA will use some components from a Collaboration Innovation and Improvement Network (CoIIN) (Gloor, P., 2006), which have proved valuable in other public health programs. A CoIIN is a group of self-motivated people with a common vision that share information and innovative ideas through networking. In the CABBAGE, participants will network within their own REACH Farm to ECE teams, with other teams, and national experts. This is fostered through monthly webinars and discussions that explore best practices and lessons learned.

Monthly CABBAGE events will enable teams to learn and track progress together toward shared benchmarks. Like a CoIIN, CABBAGE will use a logic model called a driver diagram to help teams identify and tailor the steps to Farm to ECE success.

CABBAGE Structure: Driver Diagram

A driver diagram is a structured logic model used with CoIINs. A driver diagram organizes information on proposed activities so the relationships between the aim of the project and strategies to be tested are clear.

A typical driver diagram has 3 components – a) aim statement, b) primary drivers, and c) secondary drivers. A fourth column of strategies are the tools to achieve the drivers listed. A driver diagram can be partnered with a QI tool, such as a Plan Do Study Act (PDSA) cycle to maximize its usefulness. Using QI tools, the drivers, and change ideas or strategies can be empirically tested.

Key Components of the Driver Diagram include:

Aim statement: A written, measurable, and time sensitive statement of the expected results of an improvement process.

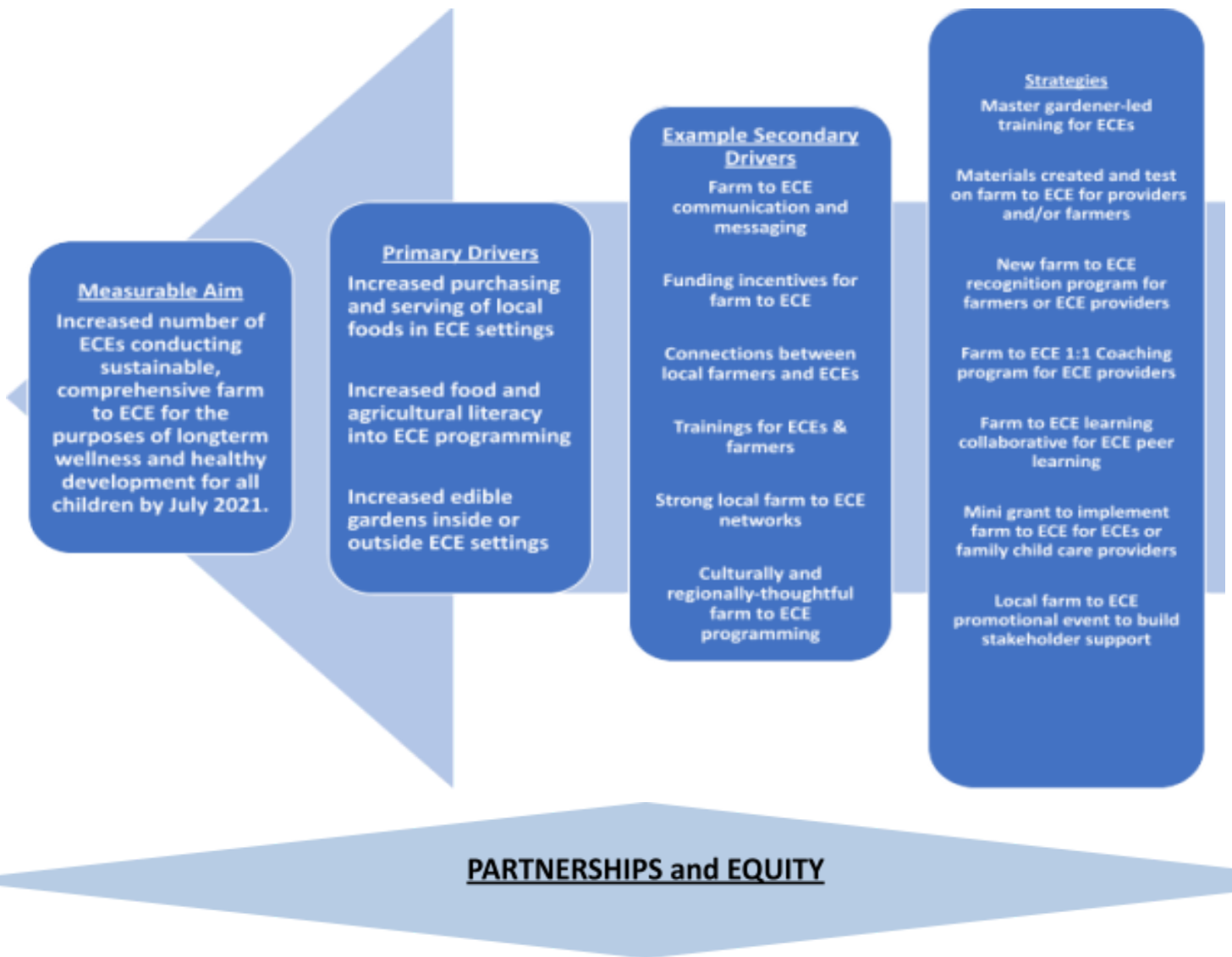
Primary Drivers: A set of high-level factors that need to be influenced to achieve the desired outcome. These are straightforward statements rather than numeric targets.

Secondary Drivers: Specific projects and activities that contribute to at least one primary driver. They should be necessary and (collectively) sufficient to achieve the aim.

Change strategies are actionable changes that can be tried out on the system of interest to realize the aim statement. Change ideas should be demonstrable and specific.

CABBAGE is a component of a larger project, the goal of which is to increase the proportion of children 0-5 years of age who have access to healthy ECE environments. CABBAGE is focusing on addressing this goal and this is reflected in the CABBAGE driver diagram below (Figure 1).

Figure 1: ASPHN 2021-23 CABBAGE Driver Diagram



CABBAGE Structure: Quality Improvement (QI) Tools

The CABBAGE driver diagram creates a roadmap for the work that will be done in CABBAGE. To create a supportive TA framework for REACH recipients, CABBAGE will also include other CoIIN trademarks, such as:

- collaborative learning:

- common benchmarks;
- being a “cyber-network” – working together via technology, primarily;
- improvement through PDSAs cycles
- innovation through rapid and on-going communication across all levels;
- team environment invites contributions from all members

One tool that may be used in their CABBAGE will be the QI tool, PDSA cycles. PDSA Cycles are a series of steps done in sequence to learn and gain knowledge for the continual improvement of a process (figure 2) (Deming, 2000; Langley, 2009). In the CABBAGE, PDSA cycles will help REACH Farm to ECE teams innovate and learn together. Teams will learn more about this process during the CABBAGE kick-off sessions. Example PDSA materials and tools about PDSA cycles are included in the appendices.

Figure 2: PDSA Cycles Steps - Plan, Do, Study Act are a series of steps done in sequence to learn and gain knowledge to improve public health projects (Deming, 2000; Langley, 2009).



Year 3 CABBAGE Benefits

In Year 3, REACH recipients can anticipate similar benefits to previous project years with some small changes, including the possibility to receive more funding if needed and a paid-for in-person meeting in December, 2022. Year 3 activities, TA and funding is, as always, pending ASPHN's notice of award from the Centers for Disease Control and Prevention for the CABBAGE.

Specific benefits will include:

- Project funding – budgets can be written for minimum of \$5,000 and maximum \$7,500.
- Travel funding for 4 individuals to travel to an in-person Farm to ECE learning session*
- Expert technical support
- Networking with other localities, organizations and experts
- Learning about Farm to ECE, including ECE and food systems
- Expanded capacity to improve local ECE environments and food economies
- Resources for teaching children and their families about food and local agriculture
- Ways to support the local economy by connecting food producers to ECEs

*Travel funds are provided directly from ASPHN and are separate from project funding. All participants will be reimbursed directly and in accordance with [ASPHN's Travel Policy](#).

Year 3 CABBAGE Team Partner Suggestions

Awarded REACH recipient teams are recommended to have or create Farm to ECE teams with the following individuals.

- A representative from the city or county health department or agency
- A food system representative from the city or region (e.g., farmer, food hub, caterer)
- An early childhood partner (e.g., ECE provider, a CACFP sponsor organization)
- A public health nutritionist who is an ASPHN member or member-eligible*
- A community member(s) from the areas CABBAGE work will be focused on (e.g., parents/families, child care providers, neighborhood volunteers)

*One person may fulfill multiple roles. If there is no access to a public health nutritionist or an ASPHN member, ASPHN will help make connections to state-level ASPHN representatives during the application process.

Year 3 CABBAGE Team Expectations

CABBAGE teams will be expected to do the following, during the project period, September, 2022 to July 31, 2023:

- Four (4) attendees at the ASPHN Farm to ECE in-person Learning Session December 5-8,

2022. Travel will be covered for the 4 attending team members

- Join quarterly CABBAGE Networking Calls [via zoom](#)
September 27, 2022, January 24, 2023, April 25th, 2023 and July 25, 2023 at 2-3pm ET
- Join the Monthly Farm to ECE webinar series, every 3rd Tuesday of the month, [via zoom](#)
- Access the [Farm to ECE Basecamp site](#) and Farm to ECE newsletter for resources
- Request TA from CABBAGE program managers as needed.

CABBAGE Team Lead(s) Expectations

One to three team members can be designated CABBAGE team lead or co-leads. Team leads or co-leads will be expected to do the following during the project period:

- Be the point of contact between ASPHN and the larger CABBAGE team.
- Meet monthly with ASPHN and NFSN CABBAGE program managers to discuss progress.
- Host and facilitate regular team meetings.
- Participate in CABBAGE quarterly networking calls and share updates on efforts.
- Complete all requested ASPHN surveys on CABBAGE programming and/or efforts.
- Ensure [ASPHN membership](#) dues are paid for 2023. Contact [Emia](#) with questions.

CABBAGE Application Expectations

- Review the Year 3 Information Packet and [Year 3 Application](#). Contact [Emia](#) with questions.
- At time of application, submit a CABBAGE Year 3 plan and PDSAs (minimum of 2)
- Work with team fiscal lead to create a budget and budget narrative aligned with Year 3 work plan. Budget can be between \$5,000 to 7,500 in requested funds.
- Show agency support for your effort by having supervisors sign-off on the [partnership form](#) (Not required for all team members, just co-leads).
- Submit Year 3 Application September 2, 2022 by COB to [Emia](#).
- Indicate on the partnership form which team members will participate in the December 5-8, 2022 In Person Learning Session in Washington, DC. Expenses will be covered for 4 required attendees.

Appendices

Appendix I: Farm to ECE Resources

General Resources

[NFSN: Farm to ECE landing page](#)

[Vision and Key Strategies for Advancing Farm to ECE](#)

[Getting Started with Farm to Early Care and Education](#)

[Local Procurement for Child Care Centers and Local Purchasing for FCC Homes Michigan](#)

[State University CRFS: Local Foods for Little Eaters: A Purchasing Toolbox for CACFP](#)

[Georgia Organics: Getting Started: Georgia Farm to ECE Guide](#)

[Growing Minds: Farm to Preschool Toolkit.](#)

[USDA: Farm to CACFP](#)

Equity and Farm to ECE Resources

[NFSN: Racial and Social Equity Assessment Tool for Farm to School Programs and Policy](#)

[Pennsylvania Ready Set Grow: Farm to Early Care and Education Racial Equity Framework](#)

[Center for Social Inclusion: Building the Case for Racial Equity in the Food System](#)

[Center for Law and Social Policy: Anti-Racist Approach to Supporting ECEs COVID-19 & Beyond](#)

COVID 19 and ECE Resources

[CDC: COVID-19 resources and guidance for Schools and Child Care Programs](#)

[ASPHN: COVID 19 Resources](#)

[NFSN: COVID 19 Resources](#)

[ASPHN and NFSN: Significance of Farm to ECEs in the Context of COVID-19](#)

Example Strategic Plans or Road Maps

[Alabama Farm to ECE Network: Strategic Plan 2019-2021](#)

[Georgia Farm to Early Care and Education Overview and Strategy \(2021-2025\) NFSN:](#)

[Guidance for Farm to ECE Planning](#)

Farm to ECE Example Curricula

[USDA: Grow It, Try It, Like It](#)

[Harvest of the Month](#)

[NFSN: Catalog of Farm to ECE curricula](#)

[Using The Creative Curriculum® for Preschool to Support Farm-to-ECE Models](#)

General Early Childhood Healthy Eating and Active Living Resources

[CDC: Childhood health in ECEs](#) [CDC Opportunities for Action](#) & [Spectrum of Opportunity](#)

[ASPHN Website](#)

[Build Initiative: Health, Equity and Young Children](#)

[NRC: Achieving a State of Healthy Weight](#)

Appendix II: Advisory Committee Members

The Association of State Public Health Nutritionists (ASPHN) is the administrative lead for this project and would like to thank the ASPHN Farm to ECE Advisory Committee. The advisory committee includes experts in Farm to school/ECE programming, maternal and child health, program evaluation, CoIIN processes and public health. These committee members volunteer their time to support the organization and implementation of CABBAGE.

Linda Jo	Doctor	Program Officer	W.K. Kellogg Foundation
Carrie	Dooyema	Early Childhood Team Lead	Division of Nutrition, Physical Activity and Obesity (DNPAO), Obesity Prevention and Control Branch, CDC
Jennifer	Garner	Assistant Professor of Food and Nutrition Policy	College of Medicine's School of Health and Rehabilitation Science and the John Glenn College of Public Affairs, The Ohio State University
Diane	Golzinski	CDC Grants Manager	Association of State Public Health Nutritionists (ASPHN)
Reynaldo	Green	Vice President	Quality Care for Children
Jill Carlson	Groendyk	Consultant	Sift Consulting, LLC and FairShare CSA Coalition
Diane	Harris	Team Lead and Health Scientist	DNPAO, Obesity Prevention and Control Branch, CDC
Claire	Heiser	Team Lead	DNPAO, Obesity Prevention and Control Branch, CDC
Everett	Jackson	Public Health Advisor	DNPAO, Obesity Prevention and Control Branch, CDC
Gabrielle	Mnkande	Public Health Advisor	DNPAO, Obesity Prevention and Control Branch, CDC
Emia	Oppenheim	Nutrition Consultant	ASPHN
Karen	Probert	Executive Director	ASPHN
Kate	Reddy	Health Scientist	DNPAO, Obesity Prevention and Control Branch, CDC

Margaret	Smith	Executive Director	The Common Market Texas
Marsha	Spence	Graduate Program Director and Associate Professor	Public Health Nutrition Graduate Program, The University of Tennessee
Diona	Williams	ECE Director/Owner and Early Childhood Education Professor	Outback Learning and Tribal Community College, Tohono O'odham Nation
Sophia	Riemer	Farm to ECE Program Manager	National Farm to School Network (NFSN)

Appendix III: PDSA Templates

PDSA WORKSHEET

Plan Do

Act Study

Team Name: _____

Date of test: _____ Test Completion Date: _____

Overall team/project aim: _____

What is the objective of the test? _____

PLAN:
Briefly describe the test:

How will you know that the change is an improvement?

What driver does the change impact?

What do you predict will happen?

PLAN	Person responsible (who)	When	Where
List the tasks necessary to complete this test (what)			
1.			
2.			
3.			
4.			
5.			
6.			

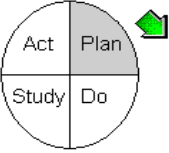
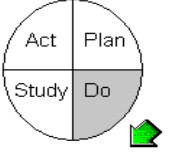
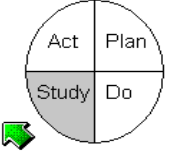
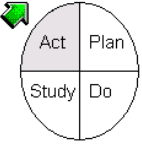
Plan for collection of data:

DO: Test the changes.
Was the cycle carried out as planned? Yes No
Record data and observations.
What did you observe that was not part of our plan?

STUDY:
Did the results match your predictions? Yes No
Compare the result of your test to your previous performance:
What did you learn?

ACT: Decide to Adopt, Adapt, or Abandon.
Adapt: Improve the change and continue testing plan.
Plans/changes for next test.
Adopt: Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability.
Abandon: Discard this change idea and try a different one.

www.fda.gov/oc/ohrt/pdsa-worksheets/plan_y.doc

Cycle #1	Start Date:
Meeting # - date	End Date:
Objective of Cycle	___Collect Data to Develop a Change___ Test a Change* ___Implement a Change** Short Objective of the Cycle:
Plan 	Questions: 1. ? a. Prediction: 2. ? a. Prediction: 3. ? a. Prediction: 4. ? a. Prediction:
Note: *For Test reference p. 96 of <i>Improvement Guide for Testing Checklist</i> **For Implementation Cycle reference p. 136 of <i>Improvement Guide for Implementation Checklist</i>	Test/Implementation Plan: What change will be tested or implemented? How will the change be tested or implementation be conducted (consider small scale early)? Who will run the test or implementation? Where: When will the test or implementation take place? Collect Data Plan (Usually required for all PDSA cycles): What information is important to collect? Why is it important? Who will collect the data? Who will analyze the data prior to Study? Where will data be collected? When will the collection of data take place? How will the data (measures or observations) be collected?
Do: 	Observations: Record observations not part of the plan: Did you need to modify the original Plan? If so, how? Begin analysis of data (graph of the data, picture)
Study 	Questions: (copy and paste Questions and Predictions from Plan above and add Results. Complete analysis of the data. Insert graphic analysis whenever possible.) 1. ? a. Prediction: b. Learning (Comparison of questions, predictions, & analysis of data.): 2. ? a. Prediction: b. Learning: New Issues: Summary:
 Act	Describe next PDSA Cycle; New Questions to Answer/Decisions made/Action to be taken 1.
Ad Hoc Contributors	Recognize subject matter experts and others who have contributed to the learning

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