

SDOH PSE RFGP -Work Plan Template

Dates:

Organization Name:

INSTRUCTIONS:

Use the following template to develop your workplan. This workplan will be used to define the scope of work for your efforts.

Strategy Selection: *Only check/complete and submit this workplan for those strategies you propose.*

Check each of the Strategies you plan to work on in the next year. Should you need to add, delete, or modify a specific strategy throughout the grant cycle, please revise your workplan and submit it with the assistance/approval of your Program Director.

☐ Community-wide Food Environment PSE

☐ Safe and Accessible Spaces for Physical Activity PSE

APPROVED BY: TDH Program Director: _____

Promoting a healthy community-wide food environment.

Performance Measures *(information to be tracked and reported on the monthly report form)*

Please report overall totals as well as data specific to any priority populations and counties/census tracts.

- Number and types of new or improved **plans and policies** for healthy, accessible food and/or other activities to create healthy food friendly communities. Can include relevant city, school district, zoning, transportation, or parks and recreation department policies/plans. By county, city, and zip code.
- Number and types of priority populations represented and impacted by SDoH project partners.
- Number, types, and locations of planning efforts at the community and county level related to food PSE strategies, changes, and adaptations.
- Number and types of sustainable PSE changes enacted or implemented related to healthy food access or availability issues.

Summary of Proposed Work

(Provide a brief description of your overall activities and interventions for this year, including how you will engage and reach priority populations.)

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Year 1:

Year 2:

Year 3:

Key Deliverables

(Describe what you expect to produce/accomplish during the contract year. Be sure that your work aligns with the performance measures for this strategy (see above). Write your key deliverables as short statements. *(Examples: Provide DSMES Toolkit for pharmacists; deliver provider education material package for DSMES referral.) *Add more rows if needed.*

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[illegible]

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Priority Populations & Counties		
Age	<input type="checkbox"/> 18 – 24 yrs <input type="checkbox"/> 25 – 39 yrs <input type="checkbox"/> 40 – 64 yrs <input type="checkbox"/> 65 yrs & older	
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male	
Race	<input type="checkbox"/> White/ Caucasian <input type="checkbox"/> Black/ African American <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> Asian	
Ethnicity	<input type="checkbox"/> Non-Hispanic or Latino <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Other:	
Other	<input type="checkbox"/> Low Socioeconomic Status <input type="checkbox"/> Current Smokers <input type="checkbox"/> Excessive Alcohol Consumption <input type="checkbox"/> < High School Education <input type="checkbox"/> Unstable Housing <input type="checkbox"/> Other:	
Diabetes Priority Counties Served:		
Cardio Priority Counties Served:		

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Increasing access to and awareness of safe and accessible spaces for physical activity.

Performance Measures (*information to be tracked and reported on the monthly report form*)

Please report overall totals as well as data specific to any priority populations and counties/census tracts.

- Number and types of new or improved **plans and policies** for physical activity-friendly districts, and/or other activities to create physical activity-friendly communities. Can include relevant city, school district, zoning, transportation, or parks and recreation department policies/plans. By county, city, and zip code.
- Number and types of priority populations represented and impacted by SDOH project partners.
- Number, types, and locations of planning efforts at the community and county level related to physical activity PSE strategies, changes, and adaptations.
- Number and types of sustainable PSE changes enacted or implemented related to physical activity access or availability issues.

Summary of Proposed Work

(Provide a brief description of your overall activities and interventions for this year, including how you will engage and reach priority populations.)

Year 1:

Year 2:

Year 3:

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Key Deliverables

(Describe what you expect to produce/accomplish during the contract year. Be sure that your work aligns with the performance measures for this strategy (see above). Write your key deliverables as short statements. *Examples: Provide DSMES Toolkit for pharmacists; Deliver provider education material package for DSMES referral.*) *Add more rows if needed.

Data Collection Plan

(Describe how you will collect data and information for each performance measure/key deliverable (see above); include the data sources used.)

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Timeline of Activities/Major Milestones (Describe key activities and steps necessary to accomplish your work plan for this strategy. These should relate directly to the performance measures and key deliverables for the strategy/intervention (i.e., doing these things will contribute toward “moving the needle” on the relevant performance measures.)		Start Date mm/dd/yy	Completion Date mm/dd/yy
Priority Populations & Counties			
Age	<input type="checkbox"/> 18 – 24 yrs <input type="checkbox"/> 25 – 39 yrs <input type="checkbox"/> 40 – 64 yrs <input type="checkbox"/> 65 yrs & older		
Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male		

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Race	<input type="checkbox"/> White/ Caucasian	<input type="checkbox"/> Black/ African American	<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Native Hawaiian/Other Pacific Islander	<input type="checkbox"/> Asian
Ethnicity	<input type="checkbox"/> Non-Hispanic or Latino		<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Other:	
Other	<input type="checkbox"/> Low Socioeconomic Status	<input type="checkbox"/> Current Smokers	<input type="checkbox"/> Excessive Alcohol Consumption	<input type="checkbox"/> < High School Education	<input type="checkbox"/> Unstable Housing
Diabetes Priority Counties Served:	<input type="checkbox"/> Other:				
Cardio Priority Counties Served:					