

ASPHN Partnership Review - Existing/Current Partners - 2017

Association of State Public Health Nutritionists develops leaders in public health nutrition who strengthen policy, programs and environments making it possible for everyone to make healthy food choices and achieve healthy, active lifestyles.

Our vision Healthy eating and active living for everyone.

Our Goals outlined in ASPHN's 2017-2022 Strategic Plan are:

1. *Membership Engagement: Maximize membership engagement by promoting the value of ASPHN for members*
2. *Professional Development: Strengthen competencies of public health nutritionists through quality resources and professional development*
3. *Collaboration: Expand and deepen collaborations that maximize opportunities to address ASPHN priorities.*
4. *Policy: Create, influence and advocate for evidence-informed and best practice public health nutrition policies and practices*
5. *Internal Operations: Maintain sufficient organizational and financial resources to sustain continued association operations*

Partnership Review

Please send this form and all attachments to Shana Patterson, shana@asphn.org. Call Shana, 814-255-2829 ext 708, or your Collaboration Committee Ambassador, for any questions or assistance. If you prefer to conduct this survey online, please go to our [Survey Monkey Partnership Review Link](#).

1. **Name of Partner, Organization, Committee or Work Group:** **Action for Healthy Kids (AFHK)**
2. **Name of Liaison:** **Leslie Lewis**
3. **Date submitted:** **10/26/17**
4. **If the liaison completed this review with the assistance of a representative from the partner organization, please list:**
 - Name:**
 - Title:**
 - Position:**
 - Email address:**
 - Duration of time (working, participating in) the organization/committee:**
5. **Liaison Term (beginning date/end date of 2-year term): August 2013**
Note: The Liaison term is a minimum 2-year commitment, but the term can be extended.
6. **Is this liaison currently active with this partner organization or committee?**

Yes If yes, please explain/describe the extent of activity and involvement.
No If no, please explain/describe.

7. Is the liaison interested in continuing in this capacity for another two-year term?

Yes No if there are meetings would like to stay active

8. Did the liaison submit ASPHN Board reports? *Note: This is required unless otherwise indicated.*

Yes No If no, please explain: Monthly (12 reports)

- Quarterly (4 reports)
- Every six months (2 reports)
- Once this year
- Other (how many?)

9. Did the liaison submit reports to any other Committee or Council (for example, ASPHN's Policy Committee)?

Yes No

If yes, please indicate which committee/council _____ How often:

- Monthly (12 reports)
- Quarterly (4 reports)
- Every six months (2 reports)
- Once this year
- Other (how many?)

10. In what ways did the liaison represent ASPHN to this collaboration/partnership? Please be as specific as possible. (Please refer to/attach any reports, updates, meeting minutes or any other documentation that captures or reflects ASPHN promotion.) See Key Messages PPT (link). n/a

1. What was accomplished through this partnership (between ASPHN & the organization)? Please provide a brief description of the highlights and/or attach the reports that were submitted (mentioned above) during the current year. There has been little activity – received one email blast with logo update. There used to be a liaison meeting every year and not sure if not invited or was discontinued. Leslie has sent an email reminding them she is the ASPHN liaison.

11.

12. Is ASPHN involved in a project with this partner? If yes, and it is different than the response to question #10, please briefly describe. Indicate whether the project is time-limited or ongoing. NO

13. ASPHNs 2017-2022 Strategic Plan promotes the inclusion of the Levels of Collaboration (LOC) Scale to rate Partnerships. With this new procedure, all collaborations and partnerships must be reviewed in 2017 to

obtain baseline data. Moving forward, the LOC will determine what information will be included in the subsequent Partnership Reviews and Board Reports. Please refer to the [Collaboration Primer](#) for more detailed information, and [ASPHN Collaboration Resources section](#) for more in-depth resources.

Levels of Collaboration Scale Summary ⁴					
STAGES	NETWORKING 1	COOPERATION 2	COORDINATION 3	COALITION 4	COLLABORATION 5
RELATIONSHIP CHARACTERISTICS	Aware of organization	Provide information to each other	Share information and resources	Share ideas	Members belong to one system
	Loosely defined roles	Somewhat defined roles	Defined roles	Share resources	
	Little communication	Formal communication	Frequent communication	Frequent and prioritized communication	Frequent communication characterized by mutual trust
	All decisions are made independently	All decisions are made independently	Some shared decision making	All members have a vote in decision making	Consensus is reached on all decisions

4 Frey, B.B., Lohmeier, J.H., Lee, S.W., & Tollefson, N. (2006). Measuring collaboration among grant partners. American Journal of Evaluation, 27, 3, 383-392. Pg 387. Retrieved 12/12 http://ontheopoint.smartsimple.biz/files/237865/f95430/Frey_2006_Measuring_Collaboration_Among_Grant_Partners.pdf

14. What level of collaboration is this partnership currently at in relation to its partnership/interaction with ASPHN?

- Networking**
- Cooperation**
- Coordination**
- Coalition**
- Collaboration**

Please provide any additional notes necessary to describe/justify this LOC level:

15. Is this partnership helping to advance the priorities outlined in ASPHN’s strategic plan? Choose the priority that is most directly related to the project or association.

Check if nothing has changed since the last form was submitted. *If this box is checked the previously completed Partnership Review form must be attached*

#	2017-18 ASPHN Priorities	Directly	Indirectly	No	N/A
---	--------------------------	----------	------------	----	-----

1.	Support the association operations and have the capacity to achieve the mission and pursue the vision.			x	
2.	Provide a strong, proactive voice to advance national policies, initiatives, resources and programs that help states and localities effectively address issues related to nutrition and physical activity.		x		
3.	Promote the role and value of the public health nutritionists.			x	
4.	To make sure the healthy choice is the easy choice, elevate systems, policy and environmental change (e.g. behavioral economic strategies) as statewide and local strategies that promote nutrition and physical activity and prevent disease.		x		
5.	Achieve optimal well-being through healthy eating and active living among the maternal, infant, child and adolescent population, including those served by Title V/MCH Block Grant.				x
6.	Work to achieve health equity by making health equity a priority in programs.				x
7.	Develop resources that facilitate state-to-state sharing and that enable State Health Agencies to provide effective, visible leadership for healthy eating and physical activity, especially in communities with high rates of chronic disease.		x		
8.	Develop a multi-disciplinary, culturally competent, diverse workforce to address public health nutrition issues, and support robust educational preparation of public health nutritionists.			x	
9.	Provide guidance to members to develop and implement nutrition programs and services as part of the Affordable Care Act.			x	
10.	Assure access to public health nutrition data to help assess nutritional health status of populations, track impact of interventions, identify early-emerging, nutrition-related health concerns, and identify populations who are disproportionately impacted by low food access and nutrition-related health concerns.		x		
11.	Increase fruit and vegetable consumption, especially in communities with high rates of chronic disease.		x		
12.	Promote health by preventing obesity, especially in communities with high rates of chronic disease.		x		
13.	Reduce access to sugar-sweetened beverages and increase access to water, especially in communities with high rates of chronic disease.		x		
14.	Increase the incidence, exclusivity, and duration of breastfeeding.		x		
15.	Assure access to healthy food in all communities including the elimination of food insecurity and hunger and reduce food waste.		x		
16.	Increase physical activity and decrease physical inactivity, especially in communities with high rates of chronic disease.		x		

16. What is the level of involvement or time commitment required as the ASPHN liaison to this organization?
There is no consistent time commitment. Activities and events are on an as-needed basis.
17. Is there travel involved for in-person meetings? If so, what are the travel requirements? Is there funding available from the partner organization to reimburse for travel or activities? *No*
18. Do you recommend that ASPHN continue this partnership in 2017 - 2018? Provide additional reasoning if needed.
Yes No ASPHN should contact this group to see if they are still meeting and active. Leslie suggests Karen contact them
19. If you have attached supplementary documents as indicated in questions above, or will be sending documents via email to shana@asphn.org, please list them here:

Additional feedback from liaison:

1. Does the liaison have any questions or need more support from ASPHN? *ASPHN should contact this organization to see if they are active and have filed to contact the ASPHN liaison.*
2. Has the liaison attended a liaison training/update call? If no, please explain what has made it difficult to participate? *Has listened to orientation calls – suggestions for topics – goals, name change, frequency of calls, question-answer format*
3. Does the liaison have suggestions for future call topics?

Is there more that ASPHN could be doing to enhance this partnership? Again perhaps someone (Karen?) reach out to AFHK and remind them we have a liaison with them and the value of that
4. Any additional comments:

Date completed: 10/26/17

Completed by: Leslie Lewis