

South Dakota State Plan Update

Nutrition and Physical Activity
To Prevent Obesity and Chronic Diseases

2017

Year at a Glance

As reported by the 2016 Behavioral Risk Factor Surveillance System (BRFSS), **29.6%** of South Dakota adults are obese and **37.1%** of South Dakotans are overweight, equaling a combined percentage of **66.7%** or two-thirds of adults above the recommended healthy weight range.

According to the South Dakota Department of Health's 2016-2017 School Height and Weight report, **15.3%** of South Dakota 15-19-year-old students are overweight (85th-94th percentile), and **19.8%** of South Dakota 15-19-year-old students are obese (at the 95th percentile or above). For school-aged children, the percentage of students who are overweight during the 2016-2017 school year is **15.7%**. The percentage of obese school children remains similar to other years at **16.0%**.

The BRFSS reports **53.6%** of South Dakota adults meet the recommended 150 minutes or more of aerobic physical activity per week, but only **19.2%** meet both the aerobic and muscle strengthening guideline each week. According to the BRFSS, only **10.9%** of South Dakota adults report eating three or more vegetables per day, and just **57.6%** of South Dakotans eat at least one serving of fruit per day.

State Plan Overarching Goals

- ▶ Increase the percentage of South Dakotans who meet the physical activity recommendations.
- ▶ Increase the percentage of South Dakotans who consume at least five servings of fruits and vegetables a day.
- ▶ Decrease obesity in South Dakota.
- ▶ Decrease mortality from chronic diseases in South Dakota.
- ▶ Eliminate disparities in the burden of chronic diseases in South Dakota.



State Plan Priority Areas 2017: Goals & Strategies

GOAL I: Promote, support, and implement the adoption of food service guidelines/nutrition standards in priority settings (early care and education (ECE), local education agencies (LEA), worksites, communities).

Strategy I.2 Support an increase in the number of worksites adopting the healthier vending and snack bar model policy.

2017 UPDATE: Since the start of the Healthier Vending and Snack Bar Project, **49 worksites** have been trained on how to incorporate Munch Code using the SD Healthier Vending and Snack Bar Standards. Of those, 24 businesses and counting have already implemented a policy. Through work with McKeever Vending, 20 additional worksites in the Watertown area have been involved with the project.

Strategy I.4 Support an increase in the number of communities that implement nutrition policies.

2017 UPDATE: As a result of utilizing the SDSU Extension *Voices for Food: Food Council Creation Guide*, **two food policy councils** have worked with the food pantries in their communities to fully implement *My Choice*, a food pantry model guided by client choice. These policies have helped and will continue to help, limited-income individuals and families by providing access to nutritious foods and nutrition education, equipping them with both the knowledge and opportunity to make healthy food choices.

GOAL II: Increase access to healthy food & beverages.

Strategy II.2 Promote access to healthier food retail.

2017 UPDATE: SDSU Extension provided a **statewide training** to field staff on the University of Missouri Extension *Shop Healthy, Stock Healthy* program to increase access to healthy food items in retail settings as part of the SNAP-Ed and 1416 Centers for Disease Control & Prevention (CDC) grant efforts. The roll-out of the program began in January 2018, with a target goal of working with 11 grocery stores and 11 convenience stores across the state to implement the program. Two grocery stores implemented the Pick It, Try It, Like It healthy food retail program in 2017, with two exhibits also set up at Pow Wow celebrations to encourage access to healthier food items at these events.

Strategy II.9 Promote the consumption of water, milk, and 100% juice to replace consumption of sugar-sweetened beverages.

2017 UPDATE: Midwest Dairy provided **21 Fuel Up to Play 60 (FUTP60) grants** to schools to increase consumption of milk.

GOAL III: Improve nutrition quality of foods and beverages served or available in LEAs.

Strategy III.1 Promote availability of potable water throughout the day at no cost to students.

2017 UPDATE: A school wellness policy training was held by the SD Department of Education (DOE), Department of Health (DOH), and Child and Adult Nutrition Services (CANS) that covered policies on how to make fresh drinking water available during mealtimes in school food service areas at no cost to students. Instruction on model policy language for the provision of drinking water in schools that aligns with best practice recommendations was also covered. **Twenty-seven school personnel** representing **17 local education agencies (LEAs)** and **eight SDSU Extension field staff** attended the training.

The DOE and DOH school health program provided fact sheets in the resources section of the Good & Healthy SD Schools e-newsletter that featured CDC's *Increasing Access to Drinking Water in Schools*

Toolkit, Bridging the Gap's Improving Access to Drinking Water in Schools, and University of California Nutrition Policy Institute's Drinking Water in School. The newsletter is distributed to approximately **1,300 school/agency personnel.**

Strategy III.3 Advocate for programs that increase access to fruits and vegetable, low-fat dairy, and whole grains in LEAs.

2017 UPDATE: SDSU Team Nutrition focused on the Smarter Lunchrooms Movement. The Smarter Lunchrooms Movement is designed to provide schools with the knowledge and resources to build a lunchroom environment that nudges students towards selecting and eating nutritious foods. The Team Nutrition work plan activity is to provide training, technical assistance, and resources (to include sub-grants in the amount of \$1,000) to develop Smarter Lunchrooms in five school districts and to provide the school districts targeted technical assistance through a "Healthy School Advisor" or coach. With this, one school district was awarded the Smarter Lunchrooms sub-grant during the 2016-2017 school year, and **Crow Creek Schools have been awarded** a sub-grant for the 2017-2018 school year.

The opportunity for schools to obtain or replace food service equipment was provided by the 2017 Agriculture Appropriations Act. The funding can be used to purchase equipment to serve healthier meals that meet the updated meal patterns, with emphasis on more fruits and vegetables in school meals, improved food safety, and expanded access. Priority must be given to schools with 50% or more eligible free and reduced-price meals. The Child and Nutrition Services **awarded seven grants** and offered partial funding.

The Fresh Fruit and Vegetable Program (FFVP) provides all children in elementary schools with a high percentage of children eligible for free and reduced-price benefits with a variety of free fresh fruits and vegetables throughout the school day. It is an effective and creative way of introducing fresh fruits and vegetables as healthy snack options. FFVP also encourages schools to develop partnerships at the state and local level for support in implementing and operating the program. The per-student allocation is \$50-\$75 per year. As a result, **76 LEAs, 130 total sites, and 34,555 total students were affected.**

GOAL IV: Improve physical activity and screen time policies and practices in ECE settings.

Strategy IV.1 Support and promote SD Early Learning Guidelines.

2017 UPDATE: Department of Social Services (DSS) Division of Child Care Services completed revision of childcare guidelines that added birth to two-year-olds to the guidelines, which makes it a more comprehensive document. DSS Child Care Services also provided an online training highlighting the guidelines and is designing new curriculums focused on preschool children and infants.

Strategy IV.2 Offer training to ECE directors on policy development and implementation.

2017 UPDATE: Through the Physical Activity Technical Assistance (PATA) program offered through Sanford fitCare, programs are now offered in Mitchell, Yankton, and Vermillion to improve physical activity environments and implement policy.

GOAL V: Promote the adoption of physical education/physical activity policies in LEAs.

Strategy V.2 Promote, educate, and update the physical education/physical activity components of the local school wellness policy.

2017 UPDATE: The School Health Program provided a school wellness policy training focusing on the nutrition portion of a school wellness policy. Resources, tips, and fact sheets on the physical activity/physical education component were distributed to all participants. **Twenty-seven school personnel representing 15 LEAs and eight SDSU Extension field staff** were in attendance.

The Good & Healthy SD Schools e-newsletter featured USDA's Final Rules Guidance Document on School Wellness Policy; SHAPE America's Comprehensive School Physical Activity Programs (CSPAP) guidance document; CDC and SHAPE America's Strategies for Recess in Schools Toolkit in the resources section.

Strategy V.4 Support and increase LEAs participating in FUTP60.

2017 UPDATE: For the 2016-2017 school year, **45 total schools** participated in FUTP60. The Midwest Dairy Council and School Health Program provided program advisor training as a way to help schools meet their physical activity and nutrition goals. SDSU Extension field staff attended the training in order to provide technical assistance to schools within their geographic location. As a result, **29 school level staff** representing **14 LEAs, three FUTP60 coaches, and 13 SDSU Extension field staff** were in attendance.

GOAL VI: Implement high quality physical education and physical activity in K-12 schools.

Strategy VI.1 Promote CSPAP to include quality physical education and physical activity programming before, during, and after school, such as recess, classroom activity breaks, walk/bicycle to school programs, and intramurals.

2017 UPDATE: The school health program in the SD DOE and DOH presented at the 2017 SD Education Conference on two resources developed by the Centers for Disease Control and Prevention (CDC) and SHAPE America Comprehensive School Physical Activity Programs and Strategies for Recess in Schools.

A CSPAP is a multicomponent approach by which schools use all opportunities within a school day as a way for students to reach their recommended 60 minutes of physical activity per day. Recess can help students increase their daily activity and contribute to getting the recommended 60 minutes of physical activity each day. **Ten school-level personnel** representing **five LEAs** were in attendance.

Strategy VI.2 Support an increase in the amount of time students spend in moderate to vigorous physical activity during physical education class.

2017 UPDATE: The school health program utilized SHAPE America national trainers to conduct training on implementing the SD standards and grade-level outcomes for K-12 physical education. Having state physical education standards is an essential component of a high quality physical education program. **Forty elementary PE teachers and 35 secondary PE teachers** representing 37 LEAs were in attendance

GOAL VII: Promote and implement the adoption of physical activity in worksites.

Strategy VII.2 Support worksites to implement model physical activity policy.

2017 UPDATE: Since the initiation of the SD DOH's Steps to Wellness project, **40 worksites** have received training and technical assistance to enhance physical activity environments and implement policy to support active employees, which is an estimated **9,330 total employees**.

Strategy VII.4 Support comprehensive worksite wellness programs using evidence-based strategies.

2017 Update: The WorkWell program in the SD DOH awarded an additional **ten worksites** to support employees by implementing policy and environmental change that provide more comprehensive worksite wellness. These worksites targeted all regions of SD. The worksites ranges in size from 25-500 employees.

GOAL VIII: Increase adoption of healthy community design principles and access to places and spaces to be physically active in communities.

Strategy VIII.1 Support an increase in the number of communities that complete a community assessment.

2017 UPDATE: Crooks was selected as the community to participate in the 2017 Active Transportation Assessment Collaboration project, a unique collaboration between the DOH, SDSU, and one SD community each year. SDSU met with stakeholders, conducted built environment assessments, and presented final recommendations to the community. Crooks is actively considering the recommendations made by SDSU.

Lake Andes was chosen for the DOH Walk Audit Grant and chose schools as the focus of their efforts. Lake Andes completed several walk/bike to school surveys, bike rodeo events, walk safely trainings, and other activities. A unique collaboration was Lake Andes' partnership with the Mike Durfee State Prison, in Springfield, SD to provide 20 free bikes for school children.

In collaboration with Wellmark's Healthy Hometown Initiative, the community of Dell Rapids completed a walk audit designed to help the community understand and visualize how to provide a better environment to walk and bike.

Strategy VIII.5 Educate and promote healthy community design strategies at state and local meetings.

2017 UPDATE: Several SD cities and towns presented their community built environment assessment success stories at the America Walks National Walking Summit in St. Paul during September 2017. The biannual national conference hosted over 600 community advocates, non-profit representatives, government officials, and transit, health, and planning professionals to explore the creation and benefits of vital and vibrant communities. The Summit's exploration of walkability included not only physical health, but also the social, economic, and civic health of all members of a community.

GOAL IX: Increase access to breastfeeding friendly environments.

Strategy IX.1 Encourage worksites to adopt the Breastfeeding Support Model Policy.

2017 Update: DOH and SDSU Extension lead the Breastfeeding Friendly Business Initiative to encourage worksites across the state to take an online pledge to support breastfeeding customers and employees. At the end of 2017, **390 businesses** had taken the Breastfeeding-Friendly Business Pledge and hung a

4"x4" window cling stating *Breastfeeding Welcome Here!* Each worksite also received a kit that includes a variety of resources including the DOH Breastfeeding Support Model Policy.

Strategy IX.3 Promote access to professional and peer support breastfeeding.

2017 UPDATE: SD's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) started a program that allows clients to call or text a WIC Breastfeeding Peer Counselor to receive breastfeeding support and information. The program was piloted in the Davison County Community Health Services Office and has since expanded statewide to offer services to all SD WIC families.

GOAL X: Increase the use of community health workers (CHW) supporting chronic disease prevention.

Strategy X.2 Promote linkages between health facilities and community resources for adults with chronic diseases.

2017 Update: DOH and DSS combined efforts to further define CHW services in SD through a workgroup comprised of representatives from healthcare organizations, public health, Indian Health Service, and tribal communities. This workgroup developed three recommendations to inform the development of CHW services. This report summarized the recommendations credentialing model business case, background work, and workgroup meeting outcomes. DSS Medicaid is working on a state plan amendment to include reimbursement for services provided by a CHW.

Strategy X.3 Support efforts by healthcare providers to establish health homes and care coordination.

2017 Update: The Cardiovascular Collaborative has compiled resources, success stories, and examples of different team-based care models to serve as a reference for clinics as they look at implementing and/or improving use of team-based care in their facilities. A toolkit will be completed in 2018.

Strategy XI.3 Encourage chronic disease self-management referral into standards of care, care protocols, and other practices.

2017 Update: Better Choices, Better Health SD finalized a patient referral model policy and is working with providers across the state to implement. The resource is available on the Good & Healthy SD website.

Strategy XI.4 Promote physical activity education and prescription as a preventive and treatment-focused behavior among healthcare professionals.

2017 Update: **67 healthcare professionals** including MDs, physician assistants, certified nurse practitioners, chiropractors, and physical therapists have participated in SD's Park Prescription Project and prescribed exercise to their patients. The professionals comprise over 20 clinics and locations across the state. Over **4,850 prescription passes** to prescribe to patients have been distributed to healthcare professionals from DOH.

**South Dakota Department of Health
Office of Chronic Disease Prevention and Health Promotion**

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