

TCNY/2020

# ACTION PLANNING PROCESS



# PLANNING PARTNER MANUAL



DECEMBER  
2016

## ABOUT THE AUTHOR



Hester Street Collaborative (HSC) empowers residents of underserved communities by providing them with the tools and resources necessary to have a direct impact on shaping their built environment. We do this through a hands-on approach that combines design, education, and advocacy. HSC seeks to create more equitable, sustainable, and vibrant neighborhoods where community voices lead the way in improving their environment and neglected public spaces.



# TAKE CARE NY 2020

## PLANNING PARTNER MANUAL

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WITH FRIENDLY NEIGHBORS  
FOR ALL AGE GROUPS

• Social Cohesion  
• Lowest Rates of

• Garbage on the streets  
• Green Space (Playgrounds)

• The quality of Housing  
• Safe sidewalks  
• ↓ Heart Disease related deaths

• Local Markets  
• Cops  
• Police Censor

• No smoking  
• Violence  
• Physical Assaults  
• Drives  
• Hospital Cares

Education

• Not the same thing  
• Not the same thing  
• Not the same thing

• Child care  
• Career Stress  
• Housing Affordability  
• Safety

People are Healthier  
in mind body  
spirit.  
Education  
Incarceration

People  
Social cohesion  
one person talking  
Church  
A place where  
get in

# INTRODUCTION

## Congratulations on being selected as a Take Care New York (TCNY) Planning Partner!

The Department of Health and Mental Hygiene (DOHMH) and Hester Street Collaborative (HSC) are excited to work with you over the next five months to develop a Health Action Plan for your community using a participatory process.

This Manual will serve as a guide and resource throughout the process and we hope that you continue to refer to it over the course of five months. We anticipate that the materials and resources may be refined and/or improved as we work with each of you and learn about the issues and particularities in each individual community.

This guide is meant to provide an overview of the program, process, tools and outcomes expected from each Planning Partner. It is organized into the following chapters:

1. **Program and Grant Context:** Provides an overview of the program, grant and funding streams
2. **TCNY Action Planning Process:** Explains the goals and timeline of the TCNY action planning process
3. **Community Planning Toolkit:** Provides an overview of what is expected of you through each step of the process, along with information and tools that you can use for each step of a community-driven planning process
4. **Event Planning 101:** Provides information on recommended steps that you should take in advance of a community engagement event, along with tips and suggestions

We look forward to your feedback in ensuring that the materials can best serve your needs.

# PROGRAM & GRANT OVERVIEW

## CONTEXT

The Affordable Care Act was passed by Congress and then signed into law by the President on March 23, 2010. On June 28, 2012 the Supreme Court rendered a final decision to uphold the health care law.

In addition to expanding access to health insurance for all Americans, the Affordable Care Act (ACA) works to address factors that influence health – housing, education, transportation, the availability of quality affordable food, and conditions in the workplace and the environment. By concentrating on the causes of chronic disease, the Affordable Care Act aims to shift the focus from sickness and disease to measures that improve wellness and helps move the nation from a focus on sickness and disease to one based on wellness and prevention.

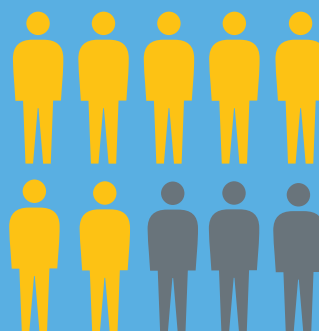
As part of the focus on prevention, the ACA established a Prevention and Public Health Fund that expands and sustains the resources and capacity to prevent and manage disease, as well as provide states and communities the resources they need to promote healthy living. New York State is a recipient of these resources<sup>1</sup>.

<sup>1</sup> Building Healthier Communities by Investing in Prevention <http://www.hhs.gov/healthcare/facts-and-features/fact-sheets/building-healthier-communities-by-investing-in-prevention/index.html>

## EACH YEAR



ALMOST 1 OUT OF EVERY 2 ADULTS HAS  
AT LEAST ONE CHRONIC ILLNESS



7 OUT OF 10 DEATHS AMONG AMERICANS  
ARE FROM CHRONIC DISEASES



ALMOST 1 IN EVERY 3 CHILDREN  
IS OVERWEIGHT OR OBESE WHICH  
PREDISPOSES THEM TO CHRONIC DISEASES



IN AFRICAN AMERICAN AND HISPANIC  
COMMUNITIES, 4 OUT OF 10 CHILDREN ARE  
OVERWEIGHT OR OBESE

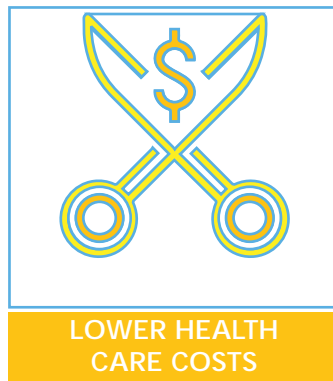
Data Source : [www.hhs.gov](http://www.hhs.gov)



## PROGRAM PARTNERS

In December 2014, the New York State Department of Health selected the Fund for Public Health in New York City (FPHNY) to lead the New York City Population Health Improvement Program (PHIP) in partnership with the New York City Department of Health and Mental Hygiene (DOHMH), the United Hospital Fund (UHF) and the New York Academy of Medicine (NYAM).

The PHIP promotes health equity as well as the “Triple Aim” of:



DOHMH is seeking to achieve the Triple Aim by engaging communities and residents all around New York City, as well as cross-sector leadership in strategic health planning.

Building on one of the core goals of the PHIP to generate broad community and stakeholder participation, DOHMH created a broad multi-phased process called Take Care New York.

## WHAT IS HEALTH EQUITY?

“Health equity is attainment of the highest level of health for all people. Achieving health equity requires valuing everyone equally with focused and ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities” (Centers for Disease Control and Prevention). These disparities “adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; or other characteristics historically linked to discrimination or exclusion.” (Nancy Krieger, PhD, Harvard School of Public Health)<sup>2</sup>

<sup>2</sup> CDC definition, found here: [www.cdc.gov/healthequityguide](http://www.cdc.gov/healthequityguide)

# ACTION PLANNING PROCESS

## ABOUT TAKE CARE NEW YORK

Take Care New York is the City's blueprint for giving all New Yorkers the chance to live a healthier life.

In the Fall of 2015, DOHMH released Take Care New York 2020 (TCNY 2020)<sup>3</sup> which outlines targets to achieve by the year 2020. Unlike previous Take Care New York Plans, TCNY 2020 looks at both traditional health factors such as blood pressure, obesity and asthma, as well as social factors, like how many people in a community graduated from high school or go to jail, realizing that there are deep inter-dependencies between health and social factors.

## A MULTI-PHASED PROCESS

In order to reach the goals set forth in the TCNY 2020, DOHMH has created a multi-phased community engagement process with the aim of mobilizing community members and partners to advocate for and/or implement interventions that will help the City achieve the health targets outlined in TCNY 2020.



<sup>3</sup> Take Care New York 2020: Every Neighborhood, Every New Yorker, Everyone's Health Counts  
<https://www1.nyc.gov/assets/doh/downloads/pdf/tcny/tcny-2020.pdf>



## BUILDING OFF PRIOR WORK: PHASE 1

Phase 1 was conducted in Fall and Winter of 2015-2016. It consisted of a community engagement process through Community Consultations in dozens of neighborhoods across five boroughs. More than 1,000 New Yorkers participated in these discussions and an online questionnaire about TCNY 2020 goals and local priorities. At these public Community consultations the following happened:

### PHASE 1



DOHMH leaders shared information about TCNY 2020 with community members



DOHMH engaged communities in a visioning discussion



Community members were asked to rank the 23 issues outlined in TCNY 2020 Report



DOHMH followed up within a month of consultation in each of the communities by sending participants the ranking results (i.e. the top health issues for their neighborhood)

## PHASE 2 OVERVIEW

Phase 2 builds upon the results of the Phase 1 consultations and this is where each of your organizations come in. This process will take over five months. During Phase 2, eight Planning Partners will develop local plans to help achieve the TCNY 2020 objectives by:

### PHASE 2



Convening community members to review their community health data and prioritize 1 TCNY 2020 **objective from the top objectives identified in Phase 1**



Assessing local resources and opportunities to promote health and identify potential locally-implementable interventions for the selected objective



Convening community members to select 1-2 interventions for action, while taking into account cultural acceptability in the neighborhood, feasibility, impact among others



Creating a local plan for action for advancing 1-2 interventions

# PROJECT PARTNERS

## ROLES



Lead agency and prime contractor

## RESPONSIBILITIES

- Provide a summary of community input received during Phase 1 of the TCNY community engagement process
- **Provide Community Health Profiles and other local health data** that will be useful for the Planning Partner
- Provide information about relevant programming/policies of sister City agencies that might be helpful
- Provide talking points and presentation materials for community convenings



Technical Assistant Provider

- Provide training, standard operation procedures and tools for the TCNY Planning Partners
- Orient Partners to the process through a introductory workshop
- Provide technical assistance to TCNY Planning Partners throughout the duration of their action planning process through coaching and ongoing support
- Support the planning of community convenings
- Provide information and opportunities for funding and partnership
- Support Planning Partners in the creation of applications of additional grants or resources to implement their action plans

## TCNY PLANNING PARTNERS

Each Planning Partner will be responsible for leading the planning process in their geographic area within NYC. The remainder of this manual provides further information on the timeline and resources for each Planning Partner to draw from during this process.



Characterizing Indicators

- Interpretive research (what is what?)
- Descriptive research (what is what?)
- Qualitative research (what is what?)

# TCNY PLANNING PARTNERS



A



## Northwest Bronx Community and Clergy Coalition

<http://northwestbronx.org/>

The Northwest Bronx Community and Clergy Coalition (NWBCCC) is a grassroots, member-led organization that has worked to transform the communities of the Northwest Bronx since 1974. Our mission is to unite diverse people and institutions to work for economic democracy and racial justice through intergenerational community organizing.

Allison Manuel, Lead Community Organizer  
[allison@northwestbronx.org](mailto:allison@northwestbronx.org); 718-584-0515

B



## Sunset Park Health Council d/b/a NYU Lutheran

<http://www.lutheranhealthcare.org/Main/LutheranFamilyHealthCenters.aspx>

Sunset Park Health Council d/b/a NYU Lutheran Family Health Centers (NYU LFHC) is a **federally qualified health center system with the mission to improve the health of underserved communities** by delivering high-quality, culturally-competent health care and human services. Serving over 110,000 people each year, NYU LFHC strives to improve health outcomes by empowering individuals and families with the skills they need to affect change within the community.

Michelle Currie, Director of Community Benefit Evaluation  
[Michelle.currie@nyumc.org](mailto:Michelle.currie@nyumc.org); 347.377.5572

C



## Washington Heights CORNER Project

<http://www.cornerproject.org/>

The Washington Heights CORNER Project provides low barrier harm reduction services, health care, support service referrals, training and employment opportunities to individuals who are poorly served elsewhere in Northern Manhattan and the Northern Bronx due to the barriers they face related to addiction, mental health and homelessness.

Kailin See, Associate Director of Outreach and Prevention Services  
[kailin@cornerproject.org](mailto:kailin@cornerproject.org); 212-923-7600 x121

D



## Jewish Community Council of Greater Coney Island

<http://www.jccgci.org/>

Jewish Community Center of Greater Coney Island's mission is to improve the quality of life of vulnerable people of all backgrounds, stabilize neighborhoods in our south Brooklyn community and throughout the city and to empower low-income New Yorkers to maximize their potentials. We develop and continually improve exemplary citywide and locally-focused services address the city's need for: comprehensive after-school programs; supportive services to frail elderly; educational and workforce development programs for disengaged youth, poor immigrants and under-employed adults; comprehensive after-school programs; improved housing; evidence-based efforts to reduce gun violence; and technical assistance to strengthen the capacity of **other nonprofit agencies**.

Beryl Williams (external consultant)

[berwillia@aol.com](mailto:berwillia@aol.com); 718-449-5000 x2269 (Special Assistant to ED)

## Public Health Solutions

<https://www.healthsolutions.org/>

E



Public Health Solutions (PHS) implements innovative, cost effective, and population based community health programs, conducts research on public health issues, and provides services **to other nonprofit organizations to address public health challenges**. PHS programs focus on a range of public health issues, and direct services reach close to 80,000 individuals and families annually throughout NYC.

Poulette Brewster, Program Manager, Healthy Start

[pbrewster@healthsolutions.org](mailto:pbrewster@healthsolutions.org) ; 718-704-5079

## Rockaway Waterfront Alliance

<http://www.rwalliance.org/rwa/>

F



Rockaway Waterfront Alliance is a community-based organization dedicated to empowering residents of underserved communities in the Rockaways to play a role in the determination of their neighborhoods. We provide enriching programming that instill individual and civic respect for nature and contribute to advancing the Peninsula's physical, economic and social sustainability.

Anastassia Fisyak, Planning and Development Associate

[anafisyak@gmail.com](mailto:anafisyak@gmail.com) ; 631-312-4100

## Project Hospitality

<https://www.projecthospitality.org/>

G



It is the mission of Project Hospitality, Inc. to reach out to community members who are hungry, **homeless or otherwise in need in order to work with them to achieve their self-sufficiency** — thereby enhancing the quality of life for our community. Project Hospitality seeks to realize its mission both by advocating for those in need and by establishing a comprehensive continuum of care that begins with the provision of food, clothing and shelter and extends to other services which include health care, mental health, alcohol and substance abuse treatment, HIV care, education, vocational training, legal assistance, and transitional and permanent housing.

Terry Troia, Executive Director

[tetroia@projecthospitality.org](mailto:tetroia@projecthospitality.org)

Robin Howald, PHIP Director

[robin.b.howald@gmail.com](mailto:robin.b.howald@gmail.com)

## Staten Island Partnership for Community Wellness

<http://www.sipcw.org/>

H



SIPCW is an organization established to improve the health of the Staten Island community. Through collaboration and a multi-disciplinary approach, we identify current or emerging health needs and mobilize a community-based response.

Jody Stoll, Project Manager, Partnerships to improve Community Health (PICH)




























[jody@sipcw.org](mailto:jody@sipcw.org); 718-226-0258



# TCNY TOP PRIORITIES

Northwest Bronx Community and Clergy Coalition	 OBESITY	 CHILD CARE	 HIGH SCHOOL GRADUATION	 HOUSING
	 VIOLENCE	 SMOKING	 SUGARY DRINKS	 TEEN PREGNANCY
Sunset Park Health Planning Council d/b/a NYU Lutheran	 OBESITY	 SMOKING	 SUGARY DRINKS	 HIGH SCHOOL GRADUATION
	 TEEN PREGNANCY	 PHYSICAL ACTIVITY	 UNMET MEDICAL NEEDS	
Washington Heights CORNER Project	 PHYSICAL ACTIVITY	 OBESITY	 UNMET MEDICAL NEEDS	 HOUSING
	 HIGH SCHOOL GRADUATION	 AIR QUALITY	 NEW HIV CASES	 UNMET MENTAL HEALTH NEEDS
Jewish Community Council of Greater Coney Island	 CHILD CARE	 AIR QUALITY	 HIGH SCHOOL GRADUATION	 SMOKING
	 PHYSICAL ACTIVITY	 OBESITY	 HIGH BLOOD PRESSURE	



Public Health Solutions	 HIGH SCHOOL GRADUATION	 HIGH BLOOD PRESSURE	 SMOKING	 BINGE DRINKING
	 CHILD CARE	 UNMET MEDICAL NEEDS	 SUGARY DRINKS	
Rockaway Waterfront Alliance	 UNMET MEDICAL NEEDS	 VIOLENCE	 BABY-FRIENDLY HOSPITALS	 HIGH SCHOOL GRADUATION
	 UNMET MENTAL HEALTH NEEDS	 SUGARY DRINKS	 HIGH BLOOD PRESSURE	 SMOKING
Project Hospitality	 OBESITY	 UNMET MENTAL HEALTH NEEDS	 UNMET MEDICAL NEEDS	 VIOLENCE
	 SMOKING	 AIR QUALITY		
Staten Island Partnership for Community Wellness	 OBESITY	 UNMET MENTAL HEALTH NEEDS	 UNMET MEDICAL NEEDS	 VIOLENCE
	 SMOKING	 AIR QUALITY		

# COMMUNITY ENGAGEMENT GUIDING PRINCIPLES



**Create easily accessible and understandable graphics and visual tools**



**Be transparent about project parameters and constraints; Clearly define opportunities for input**



**Follow an iterative process: Stakeholders and decision makers are partners throughout**



**Community input informs design and research considerations**



**Be expansive and inclusive in outreach and engagement**



**Create partnerships within the community, reach people where they are: markets, churches, libraries, schools**



**Ensure that participants have the information and inspiration they need to engage in a meaningful way**



**Develop evaluation criteria with community residents at the beginning of the process and use throughout**

# COMMUNITY PLANNING TOOLKIT



## HOW TO USE THE TOOLKIT

The Community Planning Toolkit is meant to serve as a resource throughout the TCNY 2020 action planning process and we hope that you continue to refer to it.

This toolkit provides an overview of the TCNY 2020 Action Planning process, outcomes expected from each TCNY Planning Partners, and the tools and resources to help you get it done.

This toolkit is not a one-size-fits-all model of how to facilitate a meaningful community engagement process.

We encourage you to customize and adapt the tools and activities included in this toolkit based on your local expertise of how to best serve your community.

## PROCESS

AUG - SEPT 2016	SEPT - OCT 2016	OCT - NOV 2016	NOV - DEC 2016
<b>A. PRIORITIZE OBJECTIVES: CONVENING #1</b>	<b>B. RESEARCH &amp; ASSESS LOCAL RESOURCES</b>	<b>C. SELECT INTERVENTIONS: CONVENING #2</b>	<b>D. CREATE A PLAN OF ACTION</b>
<p>Convene community members and local stakeholders</p> <p>Review local health data</p> <p>Prioritize 1 key health objective</p>	<p>Assess existing local resources and assets</p> <p>Identify potential interventions to address key health objective</p>	<p>Convene community members and local stakeholders</p> <p>Decide on 1-2 intervention(s) to pursue</p>	<p>Write a plan of action to implement the chosen intervention(s)</p> <p>Submit action plan to DOHMH</p>

- Community engagement event
- Action plan development and research



# PRIORITIZE OBJECTIVES: CONVENING #1

## GOALS

- **Review the top community identified TCNY 2020 objectives and associated health data**
- **Ensure that stakeholders have an understanding of local health data**
- **Collectively prioritize 1 actionable health goal from the list of top TCNY objectives**
- **Discuss selection criteria for Convening #2**

## OVERVIEW

In the first stage of the TCNY 2020 community engagement process, you will design tools and activities to engage community members at Convening #1. The goals are to review local health data, gather local knowledge from the community, collaboratively select 1 TCNY objective to advance for the action plan, and discuss important criteria for evaluating interventions. A sample set of tools and techniques have been developed to provide guidance on how to facilitate breakout groups to accomplish the goals of Convening #1. We will also provide talking points and presentation materials by early September before the first convening.

## TASKS & TIMELINE

Activity	Recommended Timeframe
<ul style="list-style-type: none"><li>• Review TCNY 2020 objectives and related local health data</li></ul>	August 18 - September 8
<ul style="list-style-type: none"><li>• Prepare for Convening #1 (refer to Event Planning 101 for steps)</li></ul>	August 18 - September 15
<ul style="list-style-type: none"><li>• <b>Host Convening #1 and prioritize 1 actionable health goal</b></li></ul>	<b>September 15 - October 2</b>
<ul style="list-style-type: none"><li>• Report back findings from Convening #1</li></ul>	September 20 - October 10

The following engagement tools and suggested steps will help facilitate a guided discussion leading to the selection of 1 TCNY objective.

# TOOLS & RESOURCES

## 1. HEALTH DATA REVIEW GRID















Begin by walking people through the top TCNY 2020 objectives and the local health data on the first worksheet, pointing out the relationship between objectives and corresponding health indicators. Answer any questions about the objectives and key health data, then ask participants about their personal experience.

*We will provide you with a version of Worksheet 1 below that is tailored to your community.*

### Discussion Questions:

- Does the health data presented resonate with you?
- Is there any local knowledge missing that should be considered?
- Are you dealing with this issue? Do you know family, friends or community members that are dealing with this issue?

*A note taker should record comments and main discussion points on the Worksheet 1. Participants may also write down comments on Post-Its and post to worksheet in space provided.*

TAKE CARE NEW YORK 2020 ORIENTATION WORKSHOP		
1 REVIEW CITYWIDE HEALTH OBJECTIVES & DATA		
TOP OBJECTIVES	NATIONAL Vs. CITYWIDE HEALTH DATA	YOUR EXPERTISE & EXPERIENCE
 <b>OBESITY</b> Decrease percentage of adults who are obese	 35% U.S. adults are obese  25% NYC adults are obese	
 <b>AIR QUALITY</b> Decrease disparities in air quality between neighborhoods	 8.8 Annual average of micrograms of fine particulate matter per cubic meter (mcg/m3)  8.6 Annual average of micrograms of fine particulate matter per cubic meter (mcg/m3)	
 <b>UNMET MENTAL HEALTH NEED</b> Decrease percent of adults who did not get needed mental health treatment	 684 Rates of psychiatric hospitalizations in NYC per 100,000 adults	
 <b>PHYSICAL ACTIVITY</b> Increase percent of high school students who meet physical activity recommendations	 23% U.S. adults reported any physical activity in the last 30 days  77% NYC adults reported any physical activity in the last 30 days	
 <b>SMOKING</b> Decrease percent of adults who smoke, especially among high school graduates	 10% U.S. adults are current smokers  15% NYC adults are current smokers	

*Sample Health Data Review Grid*



# TOOLS & RESOURCES

## 2. PRIORITIZATION BULLSEYE

Use Worksheet 2 to prioritize one TCNY objective to move forward with.

Ask participants to consider both the local health data and the stories they have heard around the table before choosing their priorities. Give each participant a set of stickers with the top objectives. Have participants individually rank the objectives in order of importance, placing their most important objective in the innermost circle of the worksheet.

Facilitator should lead conversation on trade-offs and community priorities while the note taker records main points on flip chart.

**Tip:** To avoid voting blocs or a group of people who are motivated by a specific common concern causing them to vote together, you can assign participants from the same organization/affiliation to different small groups during sign-in.



*Prioritization activity in Action*

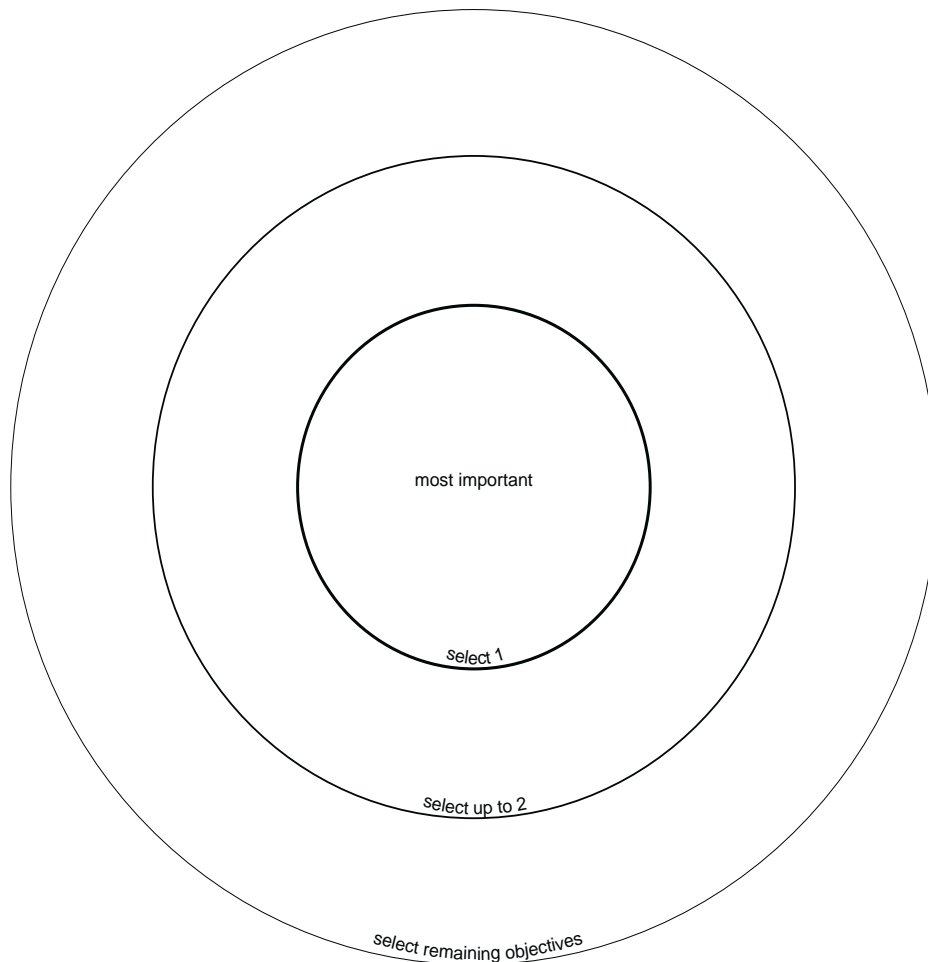


# TOOLS & RESOURCES






TAKE CARE NEW YORK 2020 ORIENTATION WORKSHOP

## NEW YORK CITY PRIORITIES

**2** Rank your city's top TCNY 2020 Objectives in order of importance using the bull's eye diagram.



**3** Count the total number of each TCNY 2020 Objective in the inner circle (most important) and record below.

OBESITY	AIR QUALITY	UNMET MENTAL HEALTH NEED	PHYSICAL ACTIVITY	SMOKING
				
_____	_____	_____	_____	_____
total #	total #	total #	total #	total #

*Sample Prioritization Bullseye*

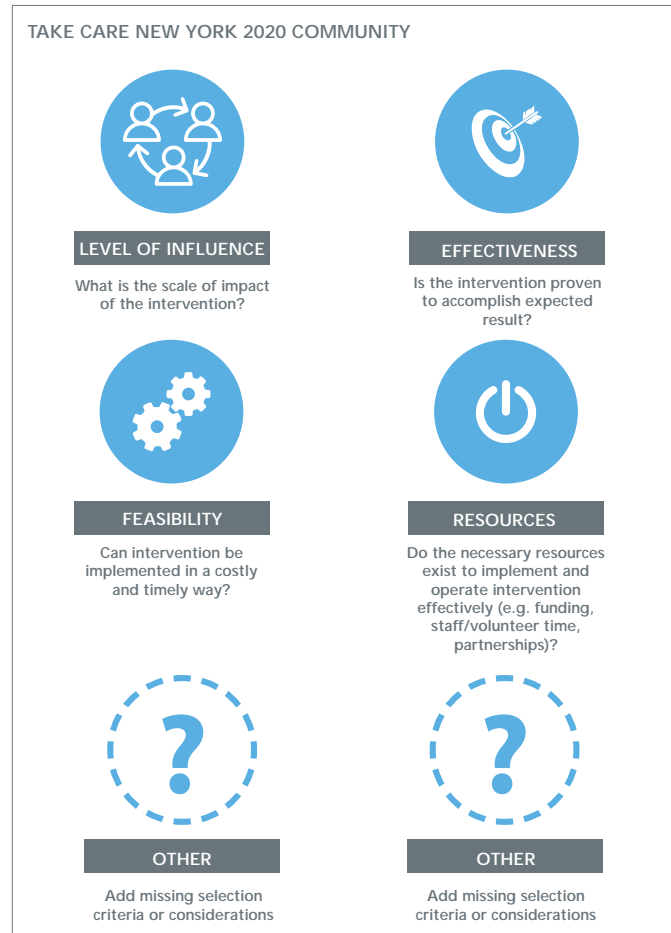
# TOOLS & RESOURCES

## 3. SELECTION CRITERIA

After this convening, you will research locally implementable interventions that address the key objective that the community selected at this convening. Then at Convening #2, community members will have the opportunity to evaluate these interventions and select 1-2 interventions to advance. It is therefore important to develop criteria for how you will determine which intervention to prioritize in tandem with the community from the onset.

Following the bullseye exercise the facilitator will walk through a list of evaluation criteria to find out which of the selection criteria or factors matter most to community members when assessing the different intervention options. Participants should also be encouraged to add any missing criteria to the list.

The facilitator will lead discussion around the selection criteria and capture the main takeaways (i.e. top evaluation criteria that participants were most concerned with) on flip chart paper for report back.



*Sample of Selection Criteria*

# TOOLS & RESOURCES

## 4. REPORT BACK

In the report back, 1 or 2 people from each table will present their group's main takeaways and the top objective to rest of the groups. At the end of the report back, the facilitators will add up all of the small group's top objectives and the one that has the most nominations will be the key TCNY 2020 objective around which the Planning Partner will plan for action. Planning Partner will then announce the results and explain next steps.



*Small Group Discussion Report Back*

## 5. DOCUMENTATION

We encourage you to document the process including the convenings with an eye for capturing stories and anecdotes from participants in creative ways through video, photos and/or stations/poster boards/booths. You will be able to use the documentation and recordings to not only summarize key findings from the convenings but also, to tell a compelling story of health in your community from a deeply personal perspective, which may prove to be a powerful tool for grant applications.

Simple and effective techniques to capture community stories include using a smart phone to record 30-second to 2-minute videos and/or to take pictures.

Other examples include setting up poster boards posted on the wall with an open statement such as, "The biggest health challenge that I've faced is...", where people can fill in the rest of sentence and having an interview booth.

### TIPS FOR CAPTURING STORIES

1. Download an app if using smart phone that guides you through interviewing and recording people such as the free one from StoryCorps ([storycorps.me](https://storycorps.me)).
2. Post video clips or pictures to social media (e.g. Instagram, Twitter, etc.) with hastags and tags so you can easily sort through and share them. Please include #TCNY2020
3. Provide variety of storytelling tools so people can share their health stories in multiple ways - from drawing and writing, to telling their stories and being interviewed.
4. Capture, document and report back all the community input you've solicited in a timely and transparent way so that participants feel heard and that their time was well spent.
5. Be clear and upfront about why you are collecting stories and how they will be used.

# TOOLS & RESOURCES

MY FAVORITE PARK STORY IS:

MY PARK IS:

MY BOROUGH IS:

place photo here

**people make parks.**  
A JOINT PROJECT OF  
hester street collaborative  
PARTNERSHIPS  
for PARKS  
City Parks  
New York City Department of Parks and Recreation



*Example of Storytelling Tool (Park Stories sheet). People wrote their story/memory on pre-designed sheets and had their photo taken with a digital instant camera. The sheet with their photo was hung on the wall for everyone to read.<sup>4</sup>*



*Example of Storytelling Tool (Wish Objects). Participants were asked to write / draw their big idea vision on something that represents the project. Examples are thought bubbles, river of wish fish (for a waterfront park), paper lanterns, etc.<sup>5</sup>*

<sup>4</sup> [www.peoplemakeparks.org/tools/](http://www.peoplemakeparks.org/tools/)



# TOOLS & RESOURCES



*Example of Storytelling Tool (Park Stories). Participants shared memories and stories about their neighborhood park and its connection to their lives and neighborhood. Stories then helped designers understand the park and community in a personal way. People had opportunity to record their stories with an interviewer. Community members could listen to the recordings.<sup>5</sup>*

<sup>5</sup> [www.peoplemakeparks.org/tools/](http://www.peoplemakeparks.org/tools/)



# RESEARCH & ASSESS LOCAL RESOURCES

## GOALS

- Research local assets, resources & opportunities for action
- Review proven and promising interventions
- Identify potential interventions that could be implemented locally
- Identify potential partnerships & collaborate with stakeholders

## OVERVIEW

Following the selection of the TCNY 2020 objective, you will research and gather information about local assets and opportunities that can be leveraged to help you achieve your community's top health priority. Specifically, you will identify existing programs, initiatives and projects to tap into as well as community-based organizations and other local stakeholders who you can potentially partner with on the planning and implementation of health interventions.

By the end of this stage, you will develop and submit to DOHMH for approval, a shortlist of five to eight interventions with the most potential to be effective and you will work with local stakeholders to identify opportunities for implementing the potential interventions.

## TASKS & TIMELINE

Activity	Recommended Timeframe
<ul style="list-style-type: none"><li>• Research and document local resources, assets and initiatives underway</li></ul>	October 3 - October 10
<ul style="list-style-type: none"><li>• Review potential interventions drawing from the Interventions Reference Guide and other research that address the TCNY 2020 objective selected in Convening #1</li></ul>	October 3 - October 10
<ul style="list-style-type: none"><li>• Create a list of potential interventions that will address the selected health objective</li></ul>	October 10- October 21
<ul style="list-style-type: none"><li>• Using selection criteria developed with feedback from Convening #1, create a short-list of 5- 8 potential interventions. Share shortlist with DOHMH for approval</li></ul>	October 10- October 21
<ul style="list-style-type: none"><li>• Reach out to key stakeholders, organizations and institutions that could serve as partners and resources for the shortlisted interventions</li></ul>	October 17- October 25



# TOOLS & RESOURCES

Hester Street Collaborative in partnership with Pratt Institute's Spatial Analysis and Visualization Initiative (SAVI) developed Asset Mapping Guidelines to help you identify assets by geographically and/or conceptually mapping all the neighborhood- and community-based assets, resources, and opportunities in your study area.

The Asset Mapping Guidelines, SAVI Asset Mapping Trainings & Materials, and the Interventions Reference Guide are tools designed to help you determine which of the existing opportunities and potential interventions are the most strategic to pursue.

Asset mapping is a tool used to inventory the resources or assets available to a specific neighborhood or community. Asset mapping involves identifying the community assets, human capital, cultural and institutional resources, and relationships and partnerships that can promote community development. It focuses on the capacity of a community to take action to realize a well-defined objective rather than on the community's needs and problems.

Asset mapping is designed to promote connections or relationships between individuals, between individuals and organizations, and between organizations and organizations to build their capacity and mobilize stakeholders and residents to take action.

In the remainder of this section, we have laid out step-by-step instructions on how to do asset mapping and how to build off these assets to develop locally implementable strategies.

## 1. BRAINSTORM THE FORCES THAT INFLUENCE HEALTH OUTCOMES

in your community to understand the underlying causes and their impacts.

**Reach out to local stakeholders** such as residents, CBOs, faith-based organizations, educational institutions and health care providers to identify forces such as trends, factors, or events that are or will influence your community's selected objective.

Through research, focus groups, interviews, conversations and brainstorming sessions,

uncover the environmental, regulatory, behavioral and social determinants that influence your community's health and the barriers to reaching positive health outcomes in your neighborhood.

You may also refer to the **Interventions Reference Guide** to come up with the barriers and impacts associated to each of the TCNY 2020 Health Objectives.

**Take sodium intake as an example**, if we think about the factors related to high sodium intake we may come up with lack of nutrition education and standards, poor quality food options, marketing of high sodium products, and fast food restaurants. Some impacts of high sodium intake include high blood pressure, stroke, and heart

disease. These are the forces that you will seek to change through the interventions you will develop in the later steps.

**Tip:** Talking to community members and a diverse range of local stakeholders could give you insights into the nuances, cultural perspectives and unique aspects of your community's health and why sodium intake, or other indicator, is such a big issue in your community. Stakeholders might also have creative ideas for how to address the health issue that you would have never thought of.

**Tip:** Don't forget to review and mine the findings and stories from Convening #1 for insights and ideas!

# TOOLS & RESOURCES

## 2. IDENTIFY THE TYPES OF ASSETS YOU WANT TO LOOK FOR

that have the potential to be part of the solution in order to help you decide what datasets you should look for.

Once you discover the underlying causes of your top health priority and their impacts, you will have a better sense of the types of community assets that will be the most effective at mitigating the causes or impacts. You will want to search for existing resources with the most leveraging potential.

Refer to the **Sample Assets, Resources & Opportunities of Action** in the callout box to help you come up with your list of asset types.

**Continuing with sodium intake as an example**, the types of neighborhood assets that might combat high sodium intake may include: healthy eating options like community gardens, farmer's markets and FRESH zones; community facilities like school-based health centers; and physical activity opportunities that might combat heart disease like recreation centers, parks, and commercial gyms.

Working with this list of asset types, you can now look for more specific data on each.

### SAMPLE ASSETS, RESOURCES & OPPORTUNITIES FOR ACTION

1. Schools, hospitals, and other institutions that can dedicate time or resources to support health interventions
2. Buildings, parks, & other infrastructure that can be designed to promote health living or used for health-promoting activities
3. Community-building, educational, or other health-promoting programs; or services, cultural, or faith-based organizations that have capacity to implement such programs in the future
4. Local businesses that can sponsor intervention activities or implement organizational policies to promote health
5. Time or skills made available by volunteers and staff
6. Social groups or networks that can mobilize to support a proposed intervention
7. Public comment periods, hearings, or other opportunities to provide input on proposed policies/programs/etc.

# TOOLS & RESOURCES

## 3. COLLECT DATA ON ASSETS

by using the list of asset types to guide and focus your data research.

There is an overwhelming amount of information and data online so we highly recommend completing the previous brainstorming steps before diving into data collection.

Some suggestions on how to go about collecting information are listed below. These can be used in combination or individually. However, we suggest that you use them in combination.

**2.1 Take a Walking Survey** of your study area to map, collect and confirm information about resources.

For example, if your priority is sodium intake, you might do a walking survey of the neighborhood to identify the location of community gardens or

other asset related to your health objective. You may also discover on your walking survey that your neighborhood has other assets that you were not aware of, such as vendor carts selling health foods.

**2.2 Ask Local Stakeholders** and community-based organizations about potential opportunities and community resources.

You may want to form an advisory planning committee who you can consult with throughout the asset mapping process.

**2.3 Gather Information from Convening #1** about potential local assets, opportunities and partnerships that participants may have mentioned in the small group discussions.

**2.4 Online Data Collection** is available through various open data portals to help you find information about local assets.

For example, if you want to gather a list of school-based health centers in your district, there are free online resources where you can search for that type of information. See **List of Data Resources** on the next couple of pages for information about online directories and asset mapping tools/techniques that can help you do environmental scans of your community and collect a comprehensive list of assets.

Please also refer to the **Appendix** section for the **Asset Mapping Training Materials** we provided at the SAVI Asset Mapping Trainings in October. Data Guides for each TCNY Objective were also provided at the trainings that you may also refer to.

**Tip:** Stay organized and track all the online data sources you have visited in a tracking spreadsheet. In the spreadsheet, include a brief description of the dataset and the source link so that you can easily refer back to your research. See example below.

Resource Topic	Resource Title	Description	Link	Data Accessibility View	Download	Access Difficulty	File type	Data Quality Scale
General Open Data	NYC Open Data Portal	Contains most open data available for NYC	<a href="https://nycopendata.org/">https://nycopendata.org/</a>	Data Portal	Yes	Easy/Medium to Hard	various	NYC
	NYC NYCcityMAP	NYCcityMap is New York City's online map portal. The application provides a wealth of information including the locations of schools, day care centers, senior centers, libraries, hospitals, subways, and more, as well as links to Web sites for these facilities.	<a href="http://maps.nyc.gov/dott/nycitymap/">http://maps.nyc.gov/dott/nycitymap/</a>	Explorable Map	No	Easy	n/a	NYC
	OASIS Map							
	Data2Go							
	NYC SPEED							
	Pratt Center Data Portal	Ready, easily available census datasets and major community elements	<a href="http://prattcenter.net/neighborhood-data-portal/">http://prattcenter.net/neighborhood-data-portal/</a>	Explorable Map	No	Easy	n/a	NYC
	NYC DCP Public Facilities	Data providing the location, type and capacity of public and private community facilities in New York City, including schools, parks, libraries, public safety, day care, foster care, special needs housing, and health and mental health facilities and programs.	<a href="https://www1.nyc.gov/site/planning/data-maps/open-data/open-data-from-refer.aspx">https://www1.nyc.gov/site/planning/data-maps/open-data-from-refer.aspx</a>	Data Portal	Yes	Medium	txt, shp	NYC
Health	NYC DOH Community Health Survey	The Community Health Survey (CHS) includes self-reported data from adults, years 18 and older.	<a href="https://a816-healthtopi.nyc.gov/enquiry/CHS/CHS30index.html">https://a816-healthtopi.nyc.gov/enquiry/CHS/CHS30index.html</a>	Data Portal	Yes	Medium	pdf, xls	NYC - United Hospital Fund Boundaries

Sample Data Research Tracking Spreadsheet

# TOOLS & RESOURCES

## LIST OF DATA RESOURCES

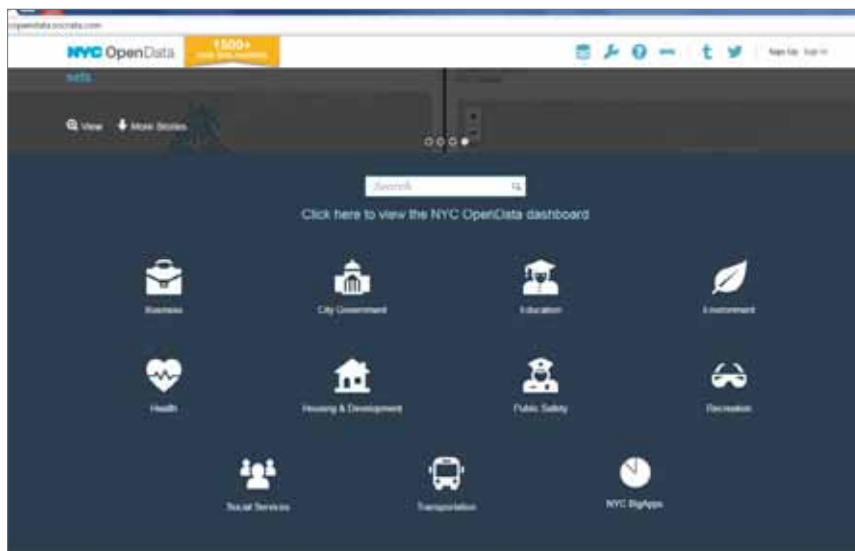
- 1. NYC Environment & Health Data Portal**  
A tool for exploring environmental and health data from NYC.  
[a816-dohbesp.nyc.gov/IndicatorPublic/](http://a816-dohbesp.nyc.gov/IndicatorPublic/)
- 2. NYC DOH EpiQuery**  
EpiQuery provides data on the health of New Yorkers from a variety of sources, including surveys, surveillance data, and vital records (births and deaths).  
[a816-healthpsi.nyc.gov/epiquery/](http://a816-healthpsi.nyc.gov/epiquery/)
- 3. NYC Citizen's Committee for Children**  
Many indicators around demographics, housing, health, education, and welfare for school aged children. Data available by county, CD, and sometimes school district or UHF.  
<http://data.cccnewyork.org/>
- 4. NYCityMap**  
New York City's online map portal provides a wealth of information including the locations of schools, day care centers, senior centers, libraries, hospitals, subways, and more, as well as links to Web sites for these facilities.  
[maps.nyc.gov/doitt/nycitymap/](http://maps.nyc.gov/doitt/nycitymap/)
- 5. NYC Open Data** (featured on next page)  
[data.cityofnewyork.us/](http://data.cityofnewyork.us/)
- 6. Census Reporter**  
Makes U.S. Census Bureau statistics easier to access. Place profiles and comparison pages provide a friendly interface for navigating data, including visualizations for a more useful first look.  
[censusreporter.org](http://censusreporter.org)
- 7. Health Information Tool for Empowerment** (featured on next page)  
[www.hitesite.org/](http://www.hitesite.org/)
- 8. Data2Go**  
Can look at several demographic indicators in NYC and compare community districts.  
[data2go.nyc](http://data2go.nyc)
- 9. Furman Center**  
Yearly reports by borough and community district with demographic and housing comparisons.  
[furmancenter.org/](http://furmancenter.org/)

# TOOLS & RESOURCES

## NYC OPEN DATA

NYC Open Data is an online portal where you can access thousands of sets of public data generated by various New York City agencies and other City organizations.

The data sets are available in a variety of machine-readable formats and are refreshed when new data becomes available. Data is presented by category, by City agency, or by other City organization. Descriptions of the data, the collection method, and other contextual material, called metadata, make the data sets easier to understand and use. **Tip:** Use search and not the predetermined categories.



## HEALTH INFORMATION TOOL FOR EMPOWERMENT

The Health Information Tool for Empowerment (HITE) is an online directory offering information on more than 5,000 health and social services available to low-income, uninsured, and underinsured individuals in the NY area. HITE helps people connect to vital community services quickly and easily. Information is available in the following categories: Dental & Optical, Financial Assistance, Health Care & Medicine, Immigrant Support, Mental Health & Substance Abuse, School, Youth & Family Services, Social Services, Transportation, and Wellness & Prevention.

HITE's resource directory can help organizations to connect patients and clients to local services, as well as to complete community needs assessments, identify local partners, and other activities to meet program requirements, streamline operations, and improve care for NY's neediest residents.



# TOOLS & RESOURCES

## 4. RECORD DATA ON ASSETS IN A SPREADSHEET

to create a community assets database using Excel, Google Spreadsheet or other program (see example below).

You may also want to add a field in the asset collection spreadsheet to describe possible impacts and opportunities for each asset.

The more detail you include at this step the easier it will be down the road when you start connecting existing community resources and opportunities to potential interventions.

## 5. SIMPLIFY & CATEGORIZE LIST

of all the assets. When simplifying, consider the assets that have the most potential to be leveraged to help you reach your TCNY objective and that are most relevant to your community.

Submit simplified spreadsheet of assets to DOHMH to review and provide feedback on assets.

DOHMH will also be providing a list of resources on existing programs from different city agencies as well as other resources to help you identify opportunities.

## 6. MAP LOCATION OF ASSETS

using color-coded labels for each asset based on categories (e.g. Social Services, Cultural & Recreational Programs & Facilities, Health Services, Schools, etc).

You may use any method of spatial mapping and visualization you would like but we suggest CARTO Mapping or Google Maps' My Maps feature.

This is an optional step and only recommended if you find it helpful to visualize information geographically and spatially.

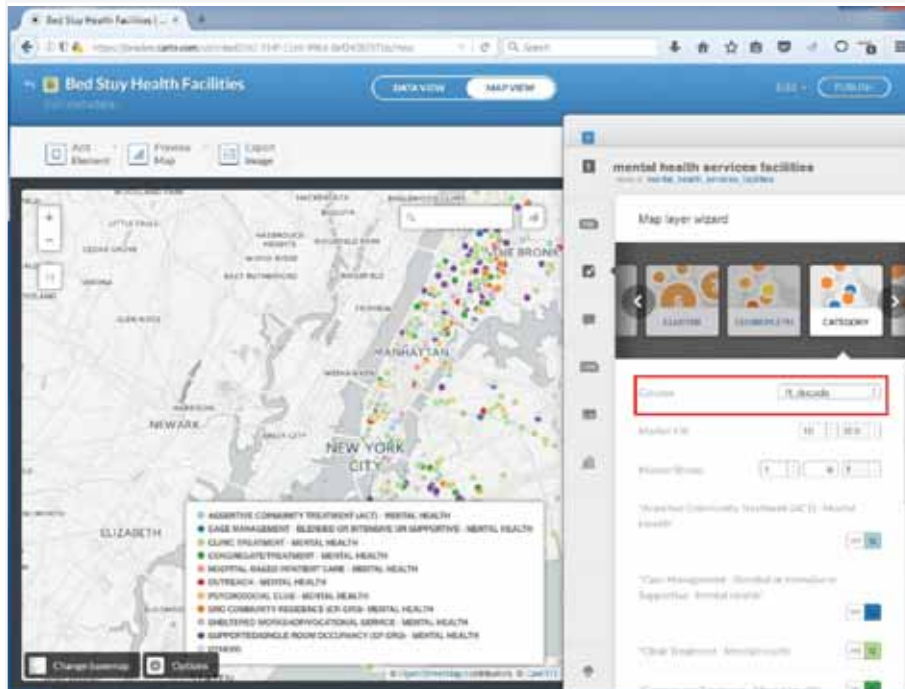
For guidance on how to use CARTO, please refer to **Appendix 2: Tutorial on Mapping Community Facilities in CARTO** provided by SAVI's Asset Mapping Trainings.

1	Category	Type	Name	Description	Address	Zip	Cross St 1	Cross St 2	Contact Person	Website	Data Source
2	Food Access	Green Market	Fort Greene Park Green Market	Cash, EBT/Food Stamps, Debit/Credit, WIC Vegetable & Fruit checks & FMNP coupons accepted.	Washington Park		Dekalb	Willoughby		<a href="https://www.grownyc.org/greenmarket/brooklyn/fort-greene">https://www.grownyc.org/greenmarket/brooklyn/fort-greene</a>	NYCityMap
3	Education	School based health center	PS 256	Bed Stuy Family Health Center	114 Kosciuszko St	11216					DOE: <a href="http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm">http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm</a>
4	Education	School based health center	George E. Wibecan	Bed Stuy Family Health Center	794 Monroe St	11221					DOE: <a href="http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm">http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm</a>
5	Education	School based health center	Boys and Girls High School	NYU Lutheran Family Health Centers	1700 Fulton St	11214					DOE: <a href="http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm">http://schools.nyc.gov/Offices/Health/SBHC/SBHC.htm</a>
6	Recreation	Recreation Center	Herbert Von King Cultural Arts Center	Recreation Center	670 Lafayette	11216				<a href="https://www.nycgovparks.org/facilities/recreationcenters/B088/schedule#Center">https://www.nycgovparks.org/facilities/recreationcenters/B088/schedule#Center</a>	<a href="https://www.nycgovparks.org/bigapp/DPR_RecreationCenter_001.xml">https://www.nycgovparks.org/bigapp/DPR_RecreationCenter_001.xml</a>
7	Education	Community gathering	Cle's Barber Shop		355 Franklin Ave	11238					Google
8	Education	Community gathering	Men's Best Haircut		499 Franklin Ave	11238					Google
9	Education and Fitness	Community center	Bed Stuy Restoration	SingleStop social services, including benefits screening, financial, career counseling, tax assistance (during tax season), and information and referrals on nutrition and mobile markets.	1368 Fulton St	11216				<a href="http://www.restorationplaza.org">http://www.restorationplaza.org</a>	HITE
10	Education	Mobile market	City Harvest		6 east 32nd St	10016				<a href="http://www.cityharvest.org">http://www.cityharvest.org</a>	HITE

*Sample Asset Spreadsheet*



# TOOLS & RESOURCES



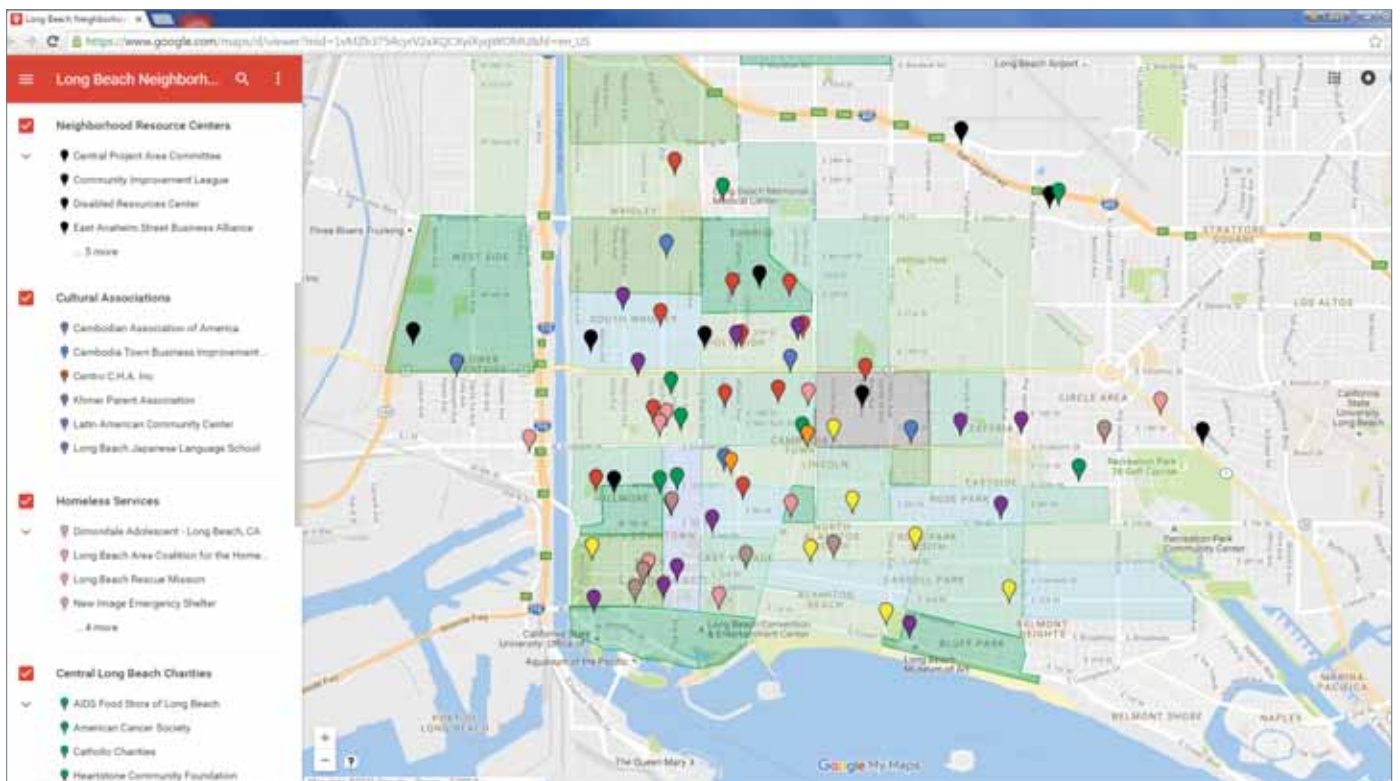
## CARTO WEB MAPPING

[carto.com/](https://carto.com/)

CARTO is an open, powerful, and intuitive platform for discovering and predicting the key insights underlying the massive location data in our world.

With CARTO, you can map the information in your asset tracking spreadsheet by creating points on a map.

There is also spatial data (e.g. GIS shapefiles) that can easily be connected to your CARTO map.



*Example of Google Maps' My Maps Feature*

# TOOLS & RESOURCES

## 7. REVIEW PROVEN, PROMISING & INNOVATIVE INTERVENTIONS

from the **Interventions Reference Guide**. You may choose to select or refine interventions from the Guide.

The aim is to identify the most strategic interventions that can be leveraged given the existing resources and assets that you have identified in the previous steps.



*Sample of Interventions Reference Guide*

## 8. BRAINSTORM IDEAS FOR INTERVENTIONS

that could be implemented locally. We encourage you to think outside the box to come up with innovative and creative solutions to your health issue.

Take stock of the existing assets in your community, and think through the opportunities that exist for partnerships and that are “low hanging fruit”. Get inspired by examples in the **Interventions Reference Guide** and/or from other sources.

Build on your previous brainstorming sessions to develop list of innovative solutions. Consider the causes and barriers that contribute to the negative health outcomes and think through what strategies and interventions might help to address those underlying factors.

For example, if your objective is to increase teens graduating on time, and you discover through Convening #1 and stakeholder interviews that unplanned pregnancies among high school students is a major barrier, you may brainstorm interventions that also address unplanned teen pregnancies.

## 9. ENGAGE KEY STAKEHOLDERS & ORGANIZATIONS

in brainstorming sessions, action planning and eventually in the implementation of the health intervention(s). This may include working with local officials, hospitals, businesses, faith-based organizations, or other community-based organizations.

For example, you may want to ask local businesses about sponsorship programs or wellness policies/activities that they currently or could implement in the future.

## 10. MATCH ASSETS TO INTERVENTIONS

to narrow down interventions to a shortlist.

The purpose of making connections between existing assets and potential interventions is to help you prioritize the most strategic interventions.

For example, you could direct volunteer time (community asset) to appropriate interventions based on skill sets, interests and durability of the volunteers.

**Tip:** These steps are not meant to be prescriptive and can happen simultaneously or any order. You may actually find that as you match assets to interventions it will spark ideas for new interventions or opportunities.

Refer to “Hitching a Ride” example.

## TOOLS & RESOURCES

## EXAMPLE OF MATCHING EXISTING ASSETS TO AN INTERVENTION: HITCHING A RIDE<sup>7</sup>

Your health priority is to decrease number of people not getting needed mental health. During the environmental scan of your community (e.g. asset mapping) you noted that there are numerous mental health centers but limited public transit options and low car ownership rates, which might be contributing to the problem.

You have reached out to a local workforce organization to learn that many community residents are finding employment as drivers for ride-sharing companies like Uber and Lyft. You realize that you could capitalize on the fact that there are both many mental health care providers and ride-share drivers in your neighborhood.

You brainstorm intervention ideas that could leverage these community resources and remember reading an article in the Atlantic about local hospitals partnering with Uber and Lyft to get patients to checkups. In some cases, hitching a ride with one of these companies is covered by Medicaid or other insurance plans. You're inspired and propose implementing a similar intervention in your community to address the unmet mental health issue by collaborating with local hospitals and Uber or Lyft to get residents who don't have access to transportation to appointments when they might have not been able or willing to prior to intervention.

<sup>7</sup> <http://www.theatlantic.com/health/archive/2016/08/hospitals-are-partnering-with-uber-to-get-people-to-checkups/495476/>

You have reached out to a local workforce organization to learn that many community residents are finding employment as drivers for ride-sharing companies like Uber and Lyft. You realize that you could capitalize on the fact that there are both many mental health care providers and ride-share drivers in your neighborhood.

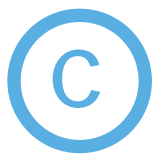
<sup>7</sup> <http://www.theatlantic.com/health/archive/2016/08/hospitals-are-partnering-with-uber-to-get-people-to-checkups/495476/>

## 11. SUBMIT SHORTLIST OF 5-8 INTERVENTIONS

to DOHMH for approval in spreadsheet template provided.

[illegible]

### Sample of Interventions Spreadsheet



# SELECT INTERVENTIONS: CONVENING #2

## GOALS

- **Determine and define criteria for selecting interventions**
- **Research and create decision-making grid or other tool to facilitate community discussion**
- **Facilitate community-driven process to select 1-2 locally implementable intervention(s)**
- **Report back from Convening #2**
- 

## OVERVIEW

Now that you identified a short list of 5-8 interventions, you will plan a second community convening to solicit their input and feedback, and to collectively decide on 1-2 interventions to advance for the Action Plan.

Prior to the convening, you will compile and research additional information on each of the short-listed interventions based on a set of selection criteria that incorporates community input from Convening #1. Using this selection criteria, Partners are advised to create a decision making grid that can be used as a discussion tool at Convening #2. Some of the columns in grid will be filled in by you prior to convening and other columns will be discussed in small groups at convening.

At Convening #2, you will facilitate a structured-decision making process through which community members will collectively decide on 1-2 interventions to advance from the list of approved locally-implementable interventions.

We have developed a sample set of tools and techniques for Convening #2, which you can choose to use or refine.

## TASKS & TIMELINE

Activity	Recommended Timeframe
• Compile information on short-listed interventions	October 17- October 28
• Prepare for Convening # 2 (refer to Event Planning 101 for steps)	September 30- October 28
• <b>Host Convening #2 and select 1-2 implementable interventions</b>	<b>October 24- November 18</b>
• Report Back from Convening #2	October 30 - November 29







# TOOLS & RESOURCES

## 1. PRE-CONVENING: SELECTION CRITERIA

First determine attributes for each intervention based on the selection criteria such as the ones listed below. Selection criteria are a set of standard measures that assess the trade offs and value of different options.

Add or refine selection criteria based on your knowledge of what works best and what are the most important factors to consider for your community.

For each category define a set of questions that you would want to ask about the potential intervention. Use research and your stakeholder outreach to answer these questions for each intervention.

This list can include, but is not limited to the following criteria and questions.

- **Level of Influence:** What will be the impact of this intervention? Will it influence individual behavior, influence social norms, create a physical

change or change policies?  
*Refer to the description of the Level of Influence on next page when evaluating the reach of the intervention's impact.*

- **Effectiveness:** Is there evidence that supports how effective this particular intervention could be at achieving desired outcome? Is it proven, promising, emerging or an innovative idea?  
*Refer to the description of Categorizing the Effectiveness of Interventions on this page.*
- **Feasibility:** How much will the intervention cost? How long will it take?
- **Resources:** What are the available and potential resources to support this intervention? Are there funding streams available? Are there organizations that are willing to partner to implement the interventions? How much staff and volunteer time is required to implement? What skills are required and do they exist in the community?

## 2. PRE-CONVENING: DECISION-MAKING GRID

Once you have finalized your selection criteria and answered the questions, develop a decision-making grid as a tool to facilitate the selection of the intervention during the breakout group activity at Community Convening #2.

Part of creating the decision-making grid will be looking at the relative merits of each of the selected interventions in order to provide a basis of comparison. There will be some fields that you will fill in prior to the convening, and others that will be filled in at the meeting by community members.

A decision-making grid is a technique to use when making an informed decision. It is a useful tool when you are faced with having to select one option out of many good options with many factors to take into consideration.

When possible, use easy to understand and accessible icons

### CATEGORIZING THE EFFECTIVENESS OF INTERVENTIONS<sup>8</sup>

Category	How Established
Proven	Peer review via systematic or narrative review
Promising	Written program evaluation without formal peer review
Emerging	Ongoing work, practice-based summaries, or evaluation works in progress
Innovative	New and interesting idea without documented evidence of effectiveness

<sup>8</sup> <http://www.healthypeople.gov/2010/hp2020/advisory/pdfs/EvidenceBasedClinicalPH2010.pdf>

# TOOLS & RESOURCES

and graphics to represent how each intervention rates according to the selection criteria.

The purpose of using visual graphics is to convey information in a digestible way to as broad a range of people with varying backgrounds and levels of English comprehension, so that they can meaningfully participate in the activity.

An example of a Decision Making grid is provided on the following page.

## 3. AT CONVENING: SMALL GROUP DISCUSSIONS

At Convening #2 and during small groups discussions, we recommend that a facilitator at each group walk through the shortlist of interventions and the decision-making grid to describe the selection criteria and how the interventions were rated.

After answering questions about the grid, the facilitator will move on to the discussion part of the activity where community members will have the opportunity to give input on the interventions, share local

expertise and examples, and come up with ideas for how to implement the intervention.

It is recommended that a Facilitator Guide with prompting questions is provided to all those that are leading these discussions

### *Discussion Questions:*

- Do you have any comments or questions about each of the interventions and the selection criteria?
- Is there some additional feedback or information that you would like to add to the selection criteria?
- What are some challenges and opportunities you foresee in implementing the intervention in your community?
- Do you know about other similar programs or resources that might be relevant?

All comments and ideas should be recorded by note taker in the space provided on the worksheet or on chart paper. Participants can also write on Post-Its.

Once the grid is filled out, the facilitator will ask participants to internally review and weigh all the factors they discussed for each intervention.

Each participant will get a sticker and asked to 'vote' by placing sticker next to chosen intervention.

## 4. AT CONVENING: REPORT BACK

In the report back, 1 or 2 people from each table will present their group's main takeaways and the tally of votes for each of the interventions. They will also share some points of discussion. The total votes for each intervention will be tallied to result in the top 1-2 interventions that will be documented in the Action Plan.

Remember to document the convening and capture stories!

## LEVELS OF INFLUENCE<sup>8</sup>

Individual/Behavioral Level: any intervention designed to influence individual behavior

Social/Community Level: any intervention designed to influence social norms and community resources

Environmental Level: any intervention designed to influence the physical and built environments

Policy Level: any intervention intended to influence the legal/regulatory environment

# TOOLS & RESOURCES

FILLED IN PRIOR TO CONVENING

COMMUNITY FEEDBACK  
AT CONVENING

TAKE CARE NEW YORK 2020 COMMUNITY CONVENING #2 - SAMPLE WORKSHEET

## BEDFORD STUYVESANT - BROOKLYN COMMUNITY DISTRICT 12 - TOP SOLUTION VOTE

COMMUNITY HEALTH PRIORITY: <b>SODIUM INTAKE</b> TCNY 2020 Goal: "Decrease average daily intake among adults"								
IDEAS	IMPACT	PROOF IT WORKS	COST & TIME	AVAILABLE RESOURCES	CHALLENGES	OPPORTUNITIES	SUGGESTIONS	YOUR VOTE!
Enact and enforce middle school nutrition standards				 List resources			• Build advocacy support among partner associations	 4 Total votes
Provide nutrition education at local community gardens and a shopping tour at local supermarket to buy healthy food on a budget				 List resources		• Partner with local schools too so that they can build a nutrition education program into their curriculum and use the community gardens as an onsite learning lab	• Combine this idea with the one above!	 7 Total votes
Partner with local convenience store to increase healthy food availability				 List resources	• Bodegas owners might not be interested in doing this especially if there's an additional cost to providing healthier food			 2 Total votes

### LEGEND

#### WHAT ARE YOU TRYING TO IMPACT?

Individual Behavior



Policy



Community



Built Environment



#### IS THERE PROOF THAT THE INTERVENTION WORKS?

Yes



Some



None yet



#### HOW MUCH WILL IT COST AND HOW LONG WILL IT TAKE?

Low Cost / Short Time



Medium Cost / Medium Time



High Cost / Long Time



#### ARE THERE RESOURCES AVAILABLE TO HELP MAKE IT HAPPEN?

A lot of resources



Adequate resources



Not a lot resources



Sample Decision Making Grid

# TOOLS & RESOURCES

RPA TRAINING + SOLUTIONS  
PROPOSAL: RECLAIM PLACES OF PRODUCTION

PROPOSED SOLUTIONS	IMPACTS		CHALLENGES	IDEAS/TWEAKS	DOES IT WORK FOR YOU/YOUR COMMUNITY?
<p>These solutions were proposed by:</p> <p><input type="radio"/> Regional Plan Association <input type="radio"/> Community Organization <input type="radio"/> YOU</p>	+	-	What are some challenges you foresee in implementing this solution?	How could this solution be more effective?	
<p>1 Expand the definition of a "production activity." <i>Understand skill sets + jobs sets gap.</i></p>	<p>QUALITY</p> <p>UP</p> <p>CURRENTLY DEFICIENT?</p>	<p>COST!</p> <p>CONTRIBUTION</p> <p>SAFE CHANGES</p>	<p>WHAT ABOUT...?</p> <p>DEVELOP - GROWTH - EXPANSION - SUPPORT</p> <p>CHANGING PROPORTION</p> <p>WHY TO NOT WANT?</p>	<p>DOES IT...? QUALITY...? QUANTITY...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>IMAGINE...? UP...? DOWN...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>CONSTRUCT...? TIME...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>GOOD...? BAD...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>MAKE...? CLEAN...? IS A...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>DRILL...? HAVING...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>LESS...? TIME...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>TO...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>SUSTAIN...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>JOBS...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>TECH...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>LOCAL...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>MAKE...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>STRENGTHEN...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>WHAT...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>WOULD...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p> <p>TECHNICAL...? LOCATION...? TIME...? FLEXIBILITY...? FUTURE...? SUPPORT...?</p>	<p>DOES IT WORK FOR YOU/YOUR COMMUNITY?</p>
<p>2 Relax brownfield clean-up requirements. <i>MAKE SURE THE JOBS IS DONE - TAKE SURETY OF WHAT IS UNREPAIRABLE</i></p>					
<p>3 Establish criteria to guide the re-development of industrial sites.</p>					
<p>4 Expand legislation to allow municipalities to get control of abandoned buildings (ex. NJ's Abandoned Properties Rehabilitation Act). <i>Account + Community Development Network of NJ</i></p>					
<p>5 Use NY's Brownfield Opportunity Area (BOA) program as a model for community-based planning and re-development.</p>					
<p>6</p>					

KEY

IMPACTS

CHALLENGES

REGIONS

CT U NJ HV



*Decision-Making Grid & Activity in Action*



# CREATE A PLAN OF ACTION

## GOALS

- Develop and document the plan of action for advancing 1-2 interventions
- Identify methods for securing resources needed for the intervention(s)
- Submit written action plan to DOHMH

## OVERVIEW

In the final stage of the TCNY 2020 process, you will compile all the information and planning work you have done up to this point into a written action plan. An action plan describes the ways in which an organization will use strategies to meet its objectives. For this project that means describing the action steps you will take to implement the intervention(s) which will help achieve the community-identified TCNY 2020 objective.

The key to preparing an effective action plan is to be concise, clear and concrete about:

- **Why** you are taking action (i.e. objectives & measurable outcomes)
- **What** specific action steps are you going to take (i.e. activities)
- **Who** is responsible for completing each action step (i.e. staff & partnerships)
- **When** are the action steps going to get done (i.e. timeline)
- **Where** you will take action
- **How** you will get it done (i.e. funding & resources)

We have developed a template that you can follow when you develop your action plan.

## TASKS & TIMELINE

Activity	Recommended Timeframe
• Develop a draft plan of action for advancing the selected interventions, including methods for securing resources, and submit to DOHMH.	Draft Due December 9
• Incorporate DOHMH feedback and submit a Final Written Plan of Action to DOHMH	Final Due December 16



# ACTION PLAN TEMPLATE

<b>TCNY 2020 Objective</b>	Enter here the TCNY 2020 objective your community seeks to address.			
<b>Intermediate Objectives</b>	Describe the measurable end-products of your intervention. Objectives should be SMART: specific, measurable, achievable, realistic, and time-framed. Specify the data source you will use to monitor progress (or your plan to develop a measurement system if necessary) and the frequency with which the data will be collected.			
<b>Background</b>	Document the type of intervention you are advancing. Cite any evidence-base for the intervention. You may also choose to provide a link to any program sites as applicable.			
<b>Action Plan</b>	<p>Outline the steps you will take to achieve each objective. The activities are the “how” portion of the action plan. It is best to arrange activities chronologically by start dates. Place each activity in a separate row and add as many rows as you need to the template. For each step in the plan, include:</p> <ul style="list-style-type: none"> <li>• Timeline (Start and end date for each activity)</li> <li>• Resources required (Examples: funding, staff time, space needs, supplies, technology, equipment, and key partners.)</li> <li>• Lead person/organization (Identify by name the key person who will initiate the activity, provide direction for the work, and monitor progress.)</li> <li>• Output or outcome (the direct, tangible and measurable results of the activity, such as a product or document, an agreement or policy, number of participants)</li> </ul>			
<b>Step</b>	<b>Timeline</b>	<b>Resources</b>	<b>Lead</b>	<b>Output or outcome</b>
<p>Methods for securing the resources required for implementation of the above action plan steps:</p> <ul style="list-style-type: none"> <li>• If funding is needed to support staffing or other implementation resources, indicate how you plan to secure the funding</li> <li>• If access to a specific asset is required for implementation, such as use of a community space for a specific program, indicate how you will gain access to that asset</li> </ul>				

# EVENT PLANNING 101

## PLAN



- ☐ Confirm an event location, date and time (refer to Venue Selection Checklist on next page).
- ☐ Create an event budget and discuss how to spend or raise funds.
- ☐ Discuss who you want to attend the event and what strategies you'll use to reach them.
- ☐ Refine toolkit materials as necessary so they are specific to your community.

## OUTREACH



- ☐ Do your research. Make sure you know the socio-economic and demographic make-up of the community so you can ensure you are being inclusive in your outreach strategy (refer to Outreach Strategy Checklist in following pages).
- ☐ Find other community partners who can help organize, outreach, and/or assist with the event.
- ☐ Post flyers around the neighborhood.
- ☐ Send flyers to local newspapers and blogs.
- ☐ Post event to social media and send out e-blasts.



## PREPARE



## HOST!



## DEBRIEF

- ☐ Create a staffing plan for the event: include facilitators and note takers for each table, an MC, people to staff sign-in tables and to float around the room.
  - ☐ Arrange for any necessary language translation, childcare and food & refreshments.
  - ☐ Print all event materials: posters/worksheets, sign-in sheets, agendas, and building signage.
  - ☐ Hold a facilitator training meeting or call to make sure everyone staffing the event understands their roles and the run of show.
- ☐ Set up tables, chairs, and event-related support materials.
  - ☐ Have ready your sign-in sheets and pens for when people arrive.
  - ☐ Take photographs and/or video throughout to document the event and capture community stories.
  - ☐ Be flexible! If the materials are not producing a productive discussion, adjust your facilitation style.
- ☐ Thank everyone who pitched in for their time and effort!
  - ☐ Debrief with facilitators, note takers, partners and TA Provider to discuss what worked well and what could be improved upon. Think about effectiveness of community outreach, lessons learned and recommendations for next event.



# EVENT PLANNING 101

## VENUE SELECTION CHECKLIST

Questions to ask

- ☐ What is the capacity of the venue? Will it accommodate the number of people that we expect?
- ☐ What is the rental fee? Does it fit within our budget?
- ☐ Is the venue available during the time slot that we need it for? Be prepared with multiple options!
- ☐ Is the venue centrally located in order to ensure maximum participation? How much signage will be required for people to find it?
- ☐ Are there subway stations, bus stops or bike parking facilities in the vicinity?
- ☐ Are the entrances, room and restrooms ADA accessible ?
- ☐ Does the air-conditioning/ heat work effectively? Will there be fans?
- ☐ Is food consumption and catering allowed within the premises?
- ☐ How many tables and chairs will we need? What is the shape and size of the tables? Does the venue have tables that we can use or do we need to rent them?
- ☐ Does the room have A/V Equipment? This includes a projector, a screen/wall to project on, controllable lights to darken the room, extension cords, a sound system and a mic.
- ☐ Will there be someone to help us set the space up? Do we need to meet with them in advance?
- ☐ Who will be our main point of contact to finalize plans for the venue and make bookings?
- ☐ Take pictures and make a rough layout with some basic measurements! This will help you plan the arrangement for tables, chairs, childcare, food, sign-in table and activities in advance.

# OUTREACH STRATEGY CHECKLIST

## Points to remember

- ☐ Work with community-based organizations as outreach partners to organize and promote workshop through email lists, social media outlets and membership networks.
- ☐ Remember to target outreach to non-English speaking populations, Tenant Associations, senior citizens etc.
- ☐ Use building-to-buildings flyers, mailers, face-to-face interactions in order to spread the word far and wide.
- ☐ Provide transportation to workshop venue or ensure that public transportation is available.
- ☐ Keep workshops less than 3 hours long , especially during a week night.
- ☐ Provide child care and food/refreshments.
- ☐ Provide simultaneous translation for every non-English community whose participation you expect for opening remarks, presentation, report back and wrap up. For facilitated small group tables, ensure that there are separate tables for each language.
- ☐ Provide all print and presentation materials in multiple languages.
- ☐ In addition to large format meetings, facilitate small, targeted meetings in multiple languages, at different times of day.
- ☐ Hold meetings in residences, schools, libraries, public spaces and community centers.
- ☐ Recruit volunteers to help with distributing flyers or take the help of any partner organizations that may have greater capacity.
- ☐ Table at events that you think are relevant in the week or month prior to the event.



# APPENDIX 1

## TRAINING SCENARIO FOR ONLINE DATA COLLECTION: SODIUM INTAKE (DEVELOPED BY SAVI<sup>1</sup> FOR ASSET MAPPING TRAININGS)

Let's first think about sodium intake and what health conditions are related to high sodium intake (think fast food, restaurants, not drinking enough water, high blood pressure, stroke, heart disease). These are what we want to impact via interventions.

- Then we'll think about neighborhood assets that might combat sodium intake:
  - Healthy eating options:
    - Community gardens
    - Farmers markets
    - FRESH zones
  - Community facilities:
    - Schools (including those with school-based health centers)
    - Health Centers
    - HITE directory
    - ACCESS NYC locations that offer health services
    - Locations of NYC DOH public health office locations
  - Physical activity opportunities that might combat heart disease, stroke risk, etc:
    - Recreation Centers
    - Parks
    - Commercial gyms
  - What else can we look at?:
    - What community groups work on health in their catchment area?
    - Think about interventions – how can we be creative?

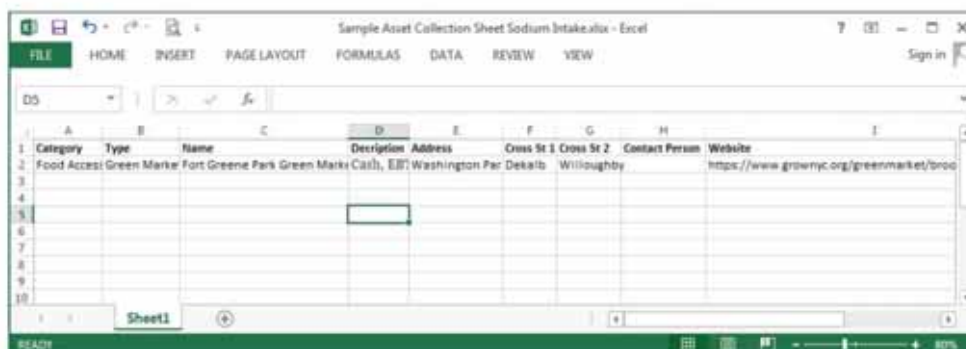
Now that we've thought about possible datasets, let's choose some and pull data. From the above list, I'm going to look at:

### 1. Farmers markets/green markets

If we Google farmer's markets in NYC we get two results of interest:

1. GrowNYC .pdf map: <https://www.grownyc.org/files/gmkt/map.pdf>
2. NYC Open Data list: <https://data.cityofnewyork.us/Business/2012-NYC-Farmers-Market-List/b7kx-qikm/data>

Neither one is very easy to use. However, DoITT's NYCity MAP allows us to zoom in to find markets close to us and click on them for more information. We can transfer this information over to our tracking spreadsheet.



## 2. Schools with school-based health centers

We can Google “school-based health centers NYC” and we find that the top result is actually quite helpful.

If we click the link that appears (as seen below), the DOE webpage opens with a link to a list of school-based health centers:

[School-Based Health Centers - New York City Department of Education  
schools.nyc.gov/Offices/Health/.../SBHC.htm](https://schools.nyc.gov/Offices/Health/.../SBHC.htm)

New York City Department of Education

The Office of School Health (OSH), a collaborative effort between the New York City Department of Education (DOE) and the New York City Department of ...

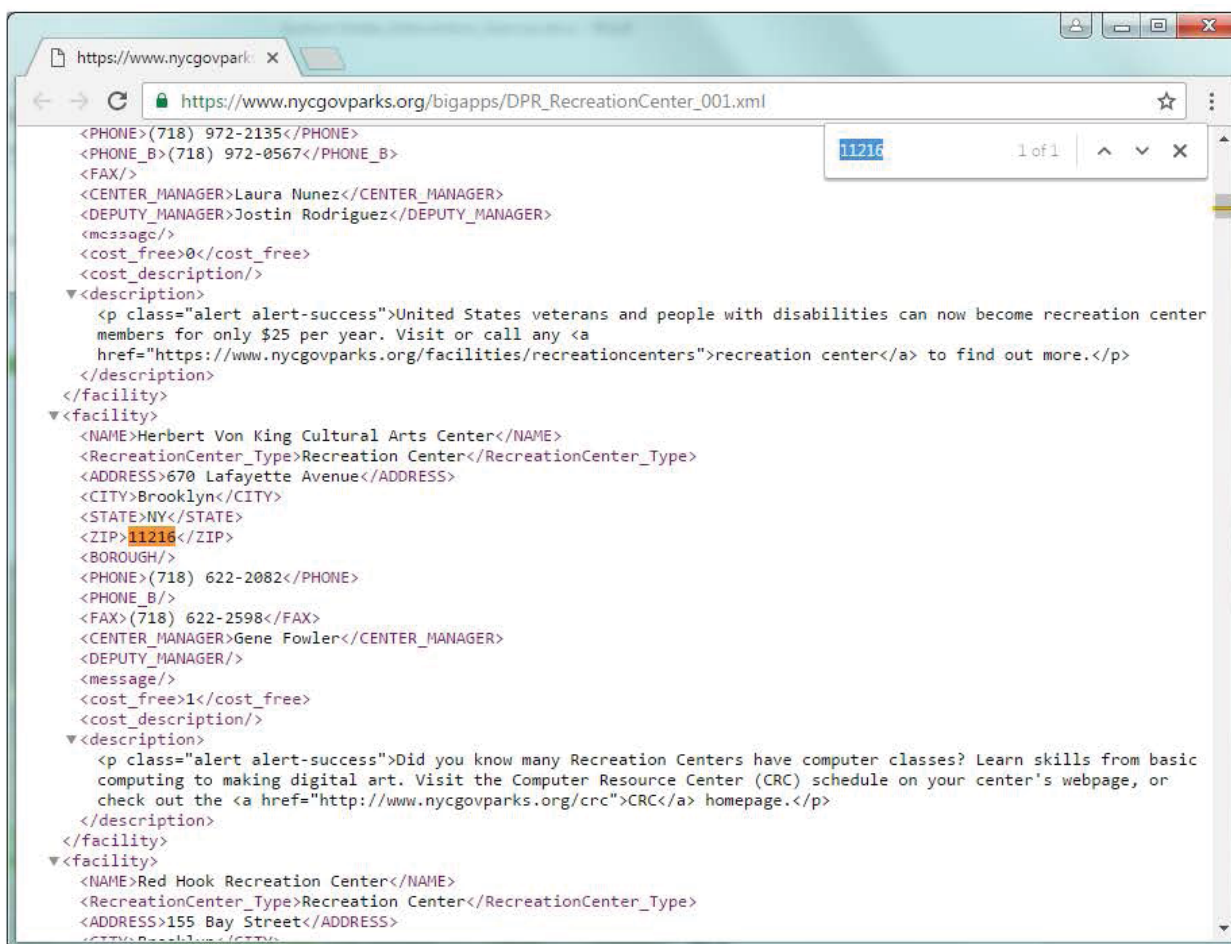
If we open the Excel sheet we can search for schools in our zip codes of interest. Don't know which zip codes are in your catchment area? You can Google a zip code map. You can search for zip codes in the Excel sheet by click on the zip code column and then clicking and holding the “Ctrl” and clicking the “F” key. You can then add the health centers to your spreadsheet.

School Count	Campus	DEN	School Name	Grade Level	Building Address	City	Zip	City Dis	School Dis	Health Center
1	Francis Scott Key Campus	10K412	Brooklyn Community High School of Communication, Arts, and Media	High	300 Wiloughby Avenue	Brooklyn	10205	36	13	Bedford-Stuyvesant Family Health Center
1		10K506	HS 536 Peace Academy	Middle						
1		10K510	Brooklyn High School for Leadership and Citizenship Service	High						
1		10K510	P.S. K363-Cos L. Cox School Annex	Middle						
1	George E. Vibesian Campus	10K254	PS 054 Samuel C. Blanes	Elementary	195 Sanford Street	Brooklyn	10205	36	13	Bedford-Stuyvesant Family Health Center
1		10K256	PS 256 Benjamin Banneker	Elementary	194 Kossuth Street	Brooklyn	10216	36	13	Bedford-Stuyvesant Family Health Center
1	George E. Vibesian Campus	10K303	George E. Vibesian	Elementary	794 Morris Street	Brooklyn	10221	41	84	Bedford-Stuyvesant Family Health Center
1		10K372	Excellence City Charter School	Elementary						
1	Norman Thomas Campus	10K403	P.S. M094	K-8	525 West 44 Street	New York	10036	3	2	Bellevue Hospital
1		10K405	PS 051 Dixie Home	Elementary						
1	Norman Thomas Campus	10K403	Murray Hill Academy	High	111 East 53rd Street	New York	10016	2	2	Bellevue Hospital
1		10K403	Manhattan Academy for Arts and Leadership	High						
1		10K403	Urbey Center for Urban Technologies	High						
1	Thomas Jefferson Campus	10K370	Benjamin Banneker Academy	High	79-77 Clinton Avenue	Brooklyn	10205	35	13	Brooklyn Plaza Medical Center
1		10K302	PDNY High School For Fine Arts And Life Sciences	High						
1		10K304	High School For Civil Rights	High						
1	Thomas Jefferson Campus	10K304	High School For Civil Rights	High	400 Pennsylvania Avenue	Brooklyn	10207	42	13	Bromwell Multi-Service Family Health
1		10K307	The Performing Arts And Technology	High						

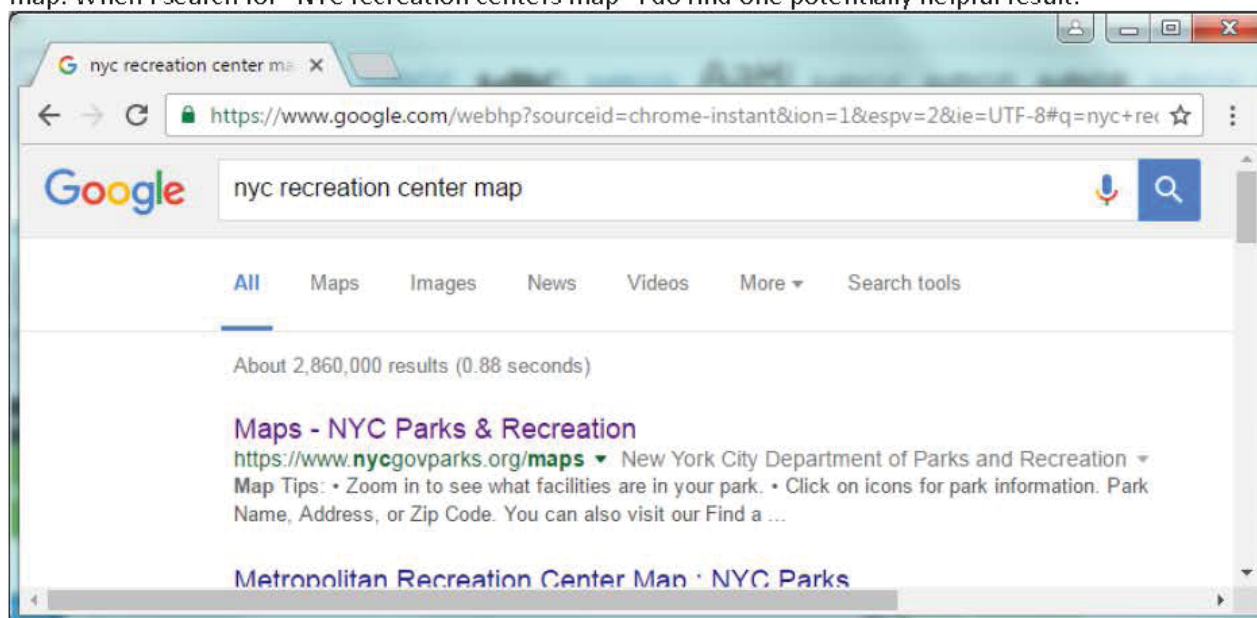
If you want to map the above information, the CARTO tutorial will teach you how to create a point on a map. Also, there is spatial data that can show these facilities on a map which will also be taught in the CARTO tutorial.

## 3. Recreation Centers

We searched around looking for a map of recreation centers in NYC but we didn't find one. So, we have two options. We can search again on NCY Open data but we only find a link to an .xml. That's okay because we can use Ctrl+F again to search for our zip code:

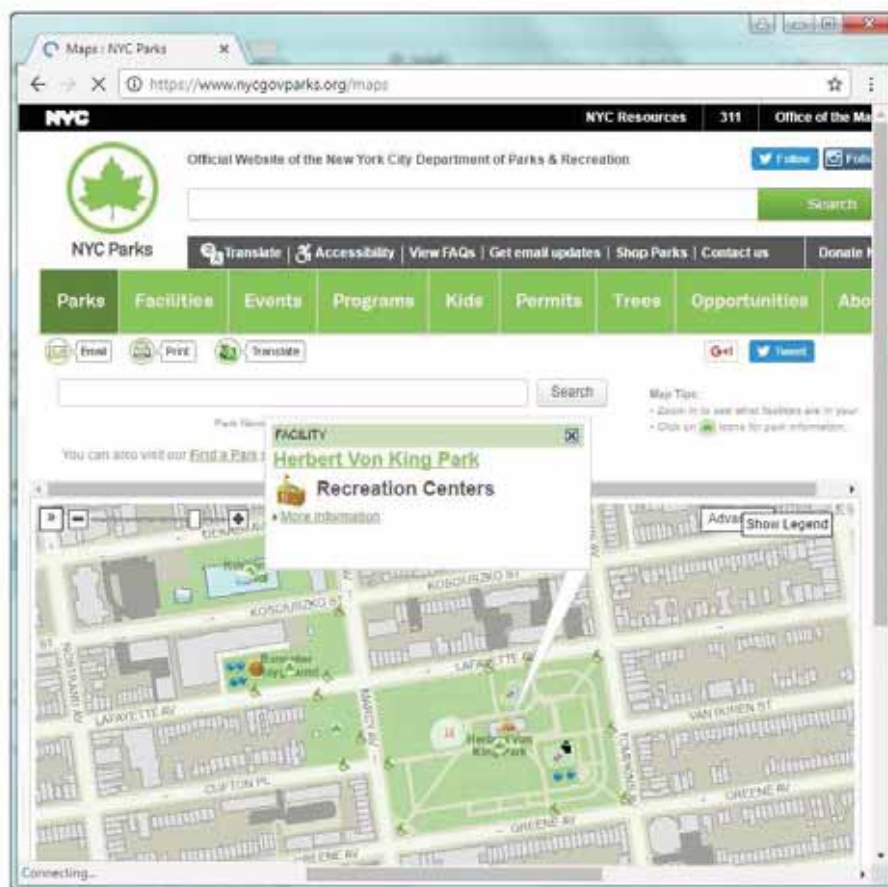


We do get a result that we can add to our spreadsheet. But, I'm going to try to search one more time for a map. When I search for "NYC recreation centers map" I do find one potentially helpful result:





If we click that link, you'll see a map that you can zoom in on. It not only shows you recreation centers but also other potential recreation activities at each site. Additionally, you can click on the link to go to the facility's webpage for more info about activities. Given the list of activities they have, perhaps they can host a nutrition event or cooking class.



Herbert Von King Cultural Center

Center Schedule Computer Resource Center Schedule

Center Schedule

Previous 7 days Next 7 days

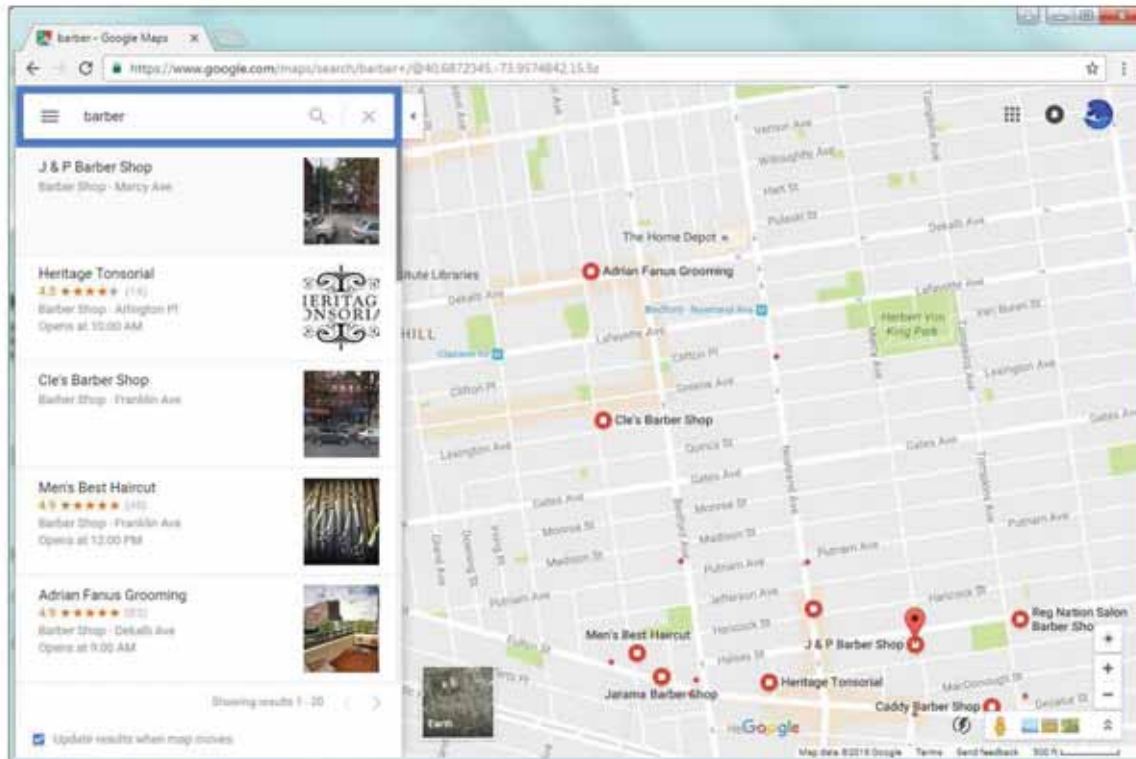
★ indicates the program does not require senior membership

Monday 10/17	Tuesday 10/18	Wednesday 10/19	Thursday 10/20	Friday 10/21	Saturday 10/22	Sunday 10/23
<b>Building Hours</b> Closed	<b>Building Hours</b> 10:00 a.m. - 6:00 p.m.	<b>Building Hours</b> 10:00 a.m. - 6:00 p.m.	<b>Building Hours</b> 10:00 a.m. - 6:00 p.m.	<b>Building Hours</b> 10:00 a.m. - 6:00 p.m.	<b>Building Hours</b> 10:00 a.m. - 6:00 p.m.	<b>Building Hours</b> Closed
	10:30 a.m. - 11:30 a.m. Tai Chi with Adult, Senior	10:30 a.m. - 2:00 p.m. Ceramics with Adult, Senior	10:30 a.m. - 2:00 p.m. Ceramics with Adult, Senior	10:30 a.m. - 2:00 p.m. Ceramics with Adult, Senior	12:30 a.m. - 3:00 p.m. Advanced Ceramics Adult, Senior	
	11:00 a.m. - 1:00 p.m. Ceramics with Adult, Senior	10:30 a.m. - 11:30 a.m. Tai Chi with Adult, Senior	10:30 a.m. - 11:30 a.m. Tai Chi with Adult, Senior	10:30 a.m. - 11:30 a.m. Tai Chi with Adult, Senior	12:30 a.m. - 4:30 p.m. Art, Camera, and Fun Adult, Senior, Teen	
	1:30 p.m. - 3:00 p.m.	1:30 p.m. - 4:00 p.m.	1:30 p.m. - 4:00 p.m.	1:30 p.m. - 4:00 p.m.		

If you want to map the above information, the CARTO tutorial will teach you how to create a point on a map. Also, there is spatial data that can show these facilities on a map which will also be taught in the CARTO tutorial.

#### 4. Barber shops and beauty salons

Barber shops, beauty salons and nail salons often have a community of regulars and, in partnership with community-based organization, may offer an opportunity for education outreach. We can simply Google them and copy the addresses over to our spreadsheet:



But, this can take quite awhile. There's a great resource you can access through the public library called ReferenceUSA which contains business listings. To use it, you just need a library code and to look up the business code, or NAICS code, for the industry you want to search. I Googled, "NAICS code barber" and found that the code is 812111 (the code for beauty salons is 812112 and nail salons is 812113). Getting the data isn't hard but takes lots of steps. We have provided a .pdf with tips for using ReferenceUSA.

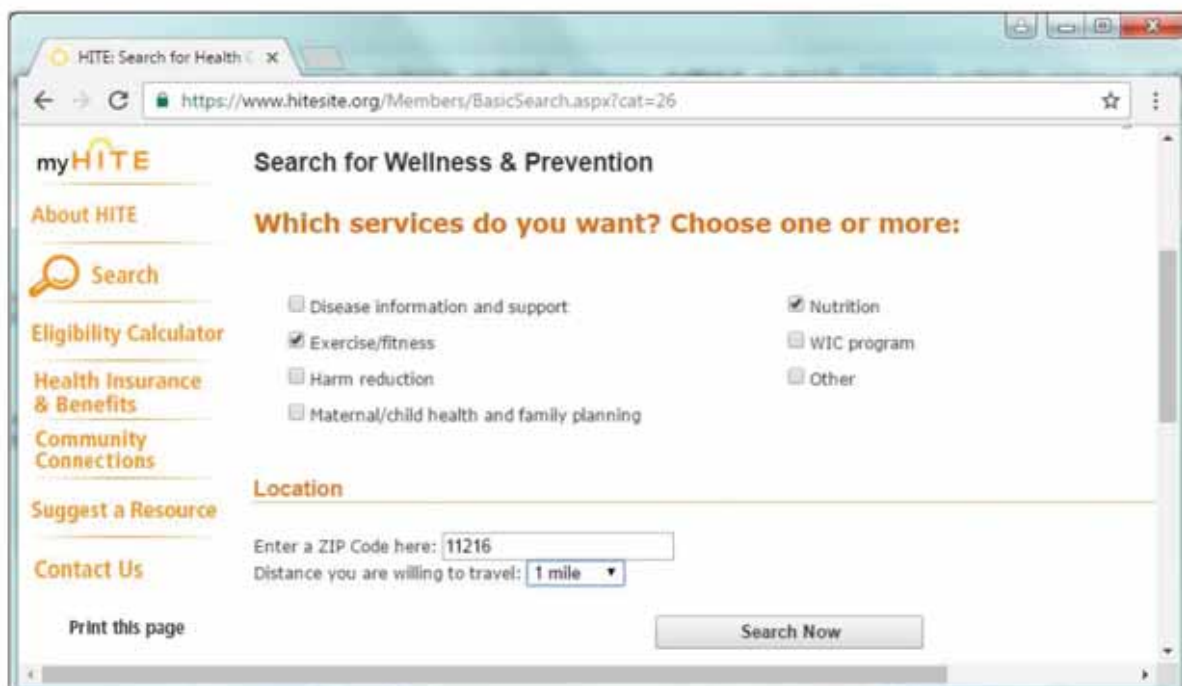
#### 5. HITE directory

The Health Information Tool for Empowerment (HITE) is an amazing resource. For our sodium intake example, let's see what health and social services might be available around nutrition. On the main screen, click on the Search button in the left column and this screen will appear.





Then click Wellness and Prevention. On the screen that opens, let's narrow our search to Exercise/fitness and Nutrition, put in zip code 11216 and set our search radius at one mile.



You'll get a slew of potential resources to explore and you can add any relevant findings to your spreadsheet.

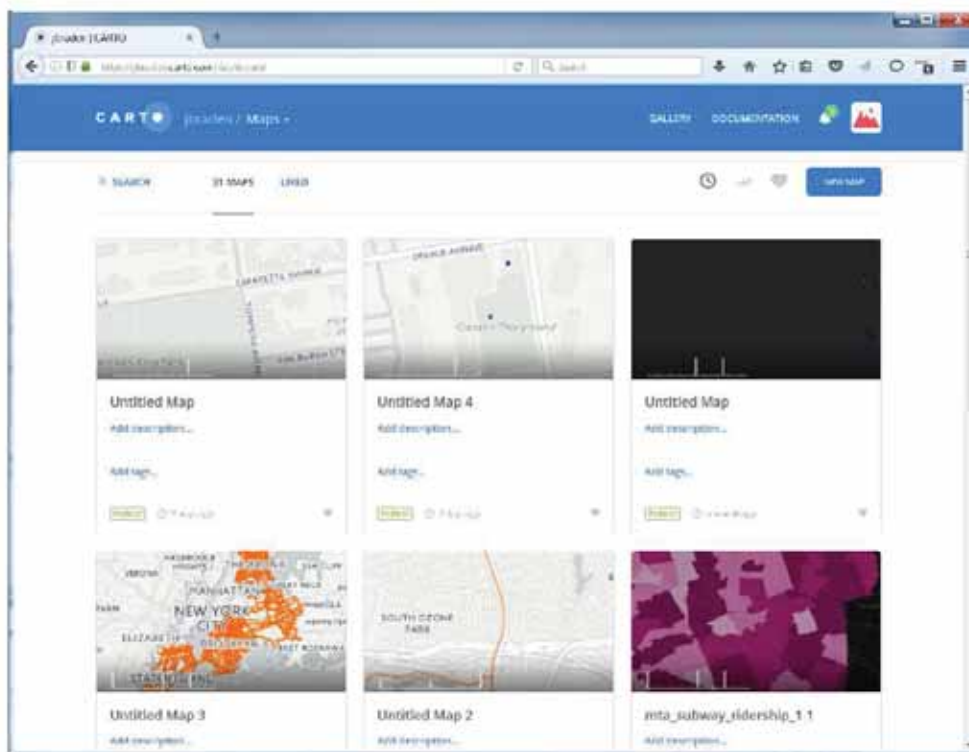
# APPENDIX 2

## CARTO WEB MAPPING TUTORIAL: COMMUNITY FACILITY SCENARIO (DEVELOPED BY SAVI<sup>1</sup> FOR ASSET MAPPING TRAININGS)

First, create a free account at <https://carto.com/signup>

To log in again later, go here: <https://carto.com/>

When you log in, it will usually take you to your home page for maps which will look like this after you've made some maps:

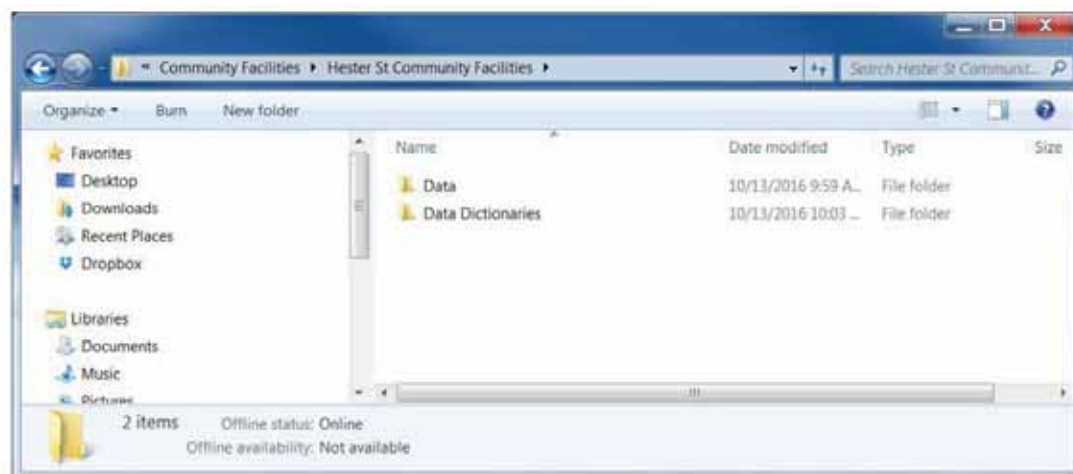


In the upper left, you'll see your username and then the word Maps and a dropdown arrow. If you click the dropdown arrow, it will take you to your Data page. As you add spatial layers to CARTO, they will appear here.

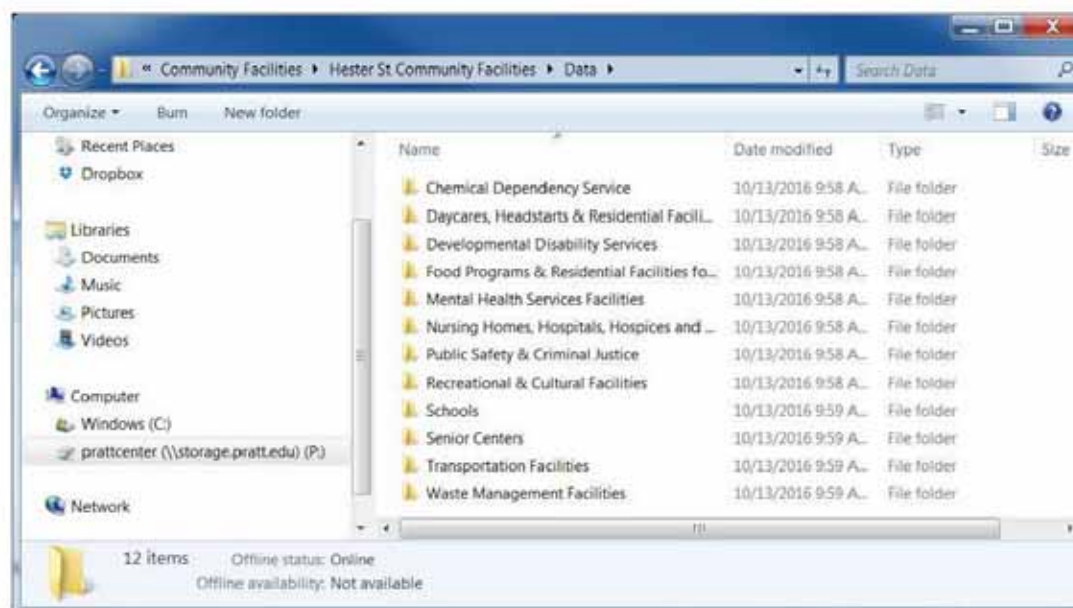
The icon in the upper right will show you your account information and how much space you have left.

### Mapping Community Facilities Data from NYC DCP:

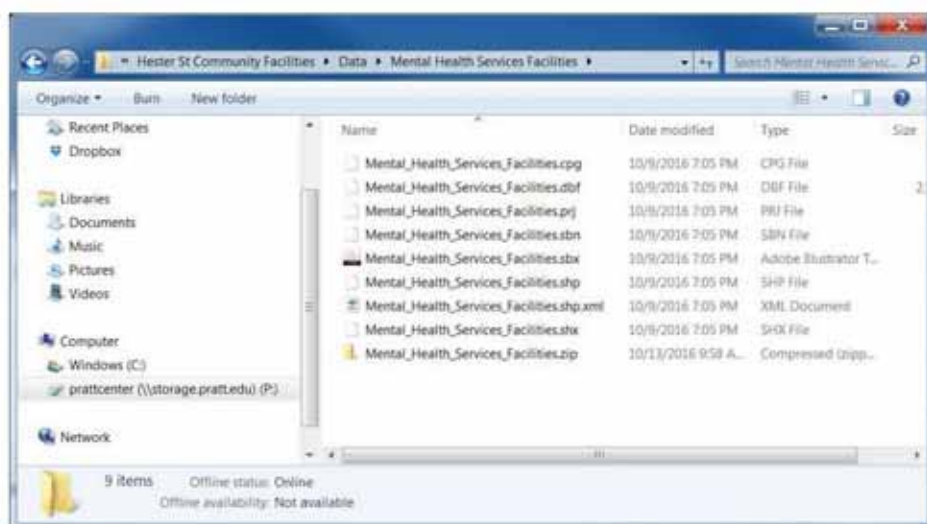
We provide a .zip file of data. Unzip the file and place the data on your computer or external drive.



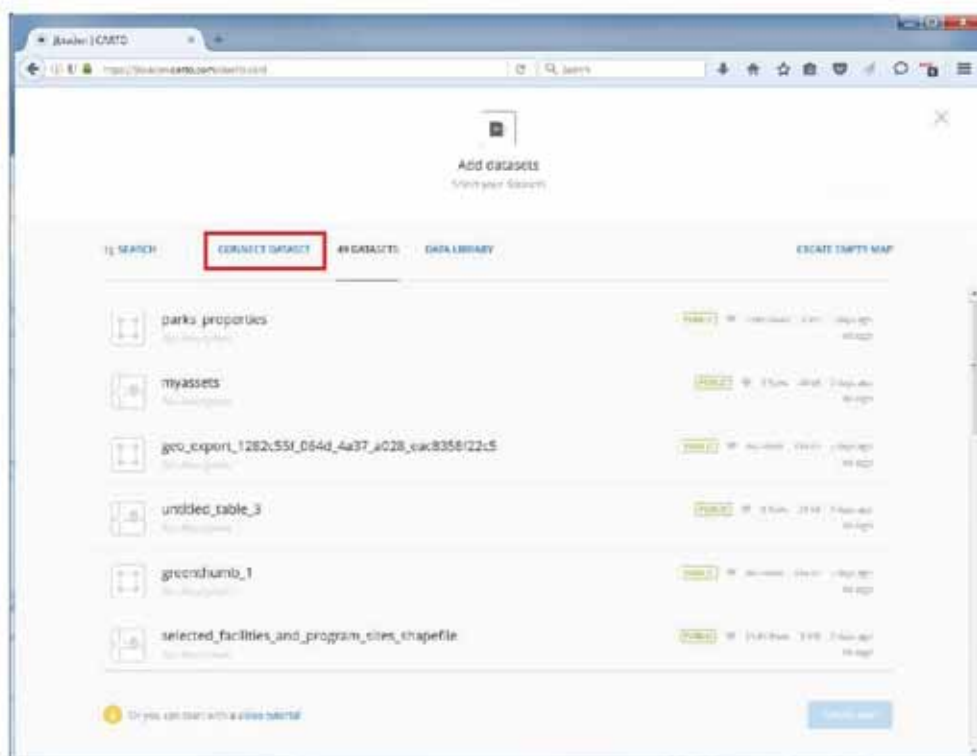
The spatial data (shapefiles) are in the Data folder. To use in CARTO, you have to upload the .zip file.



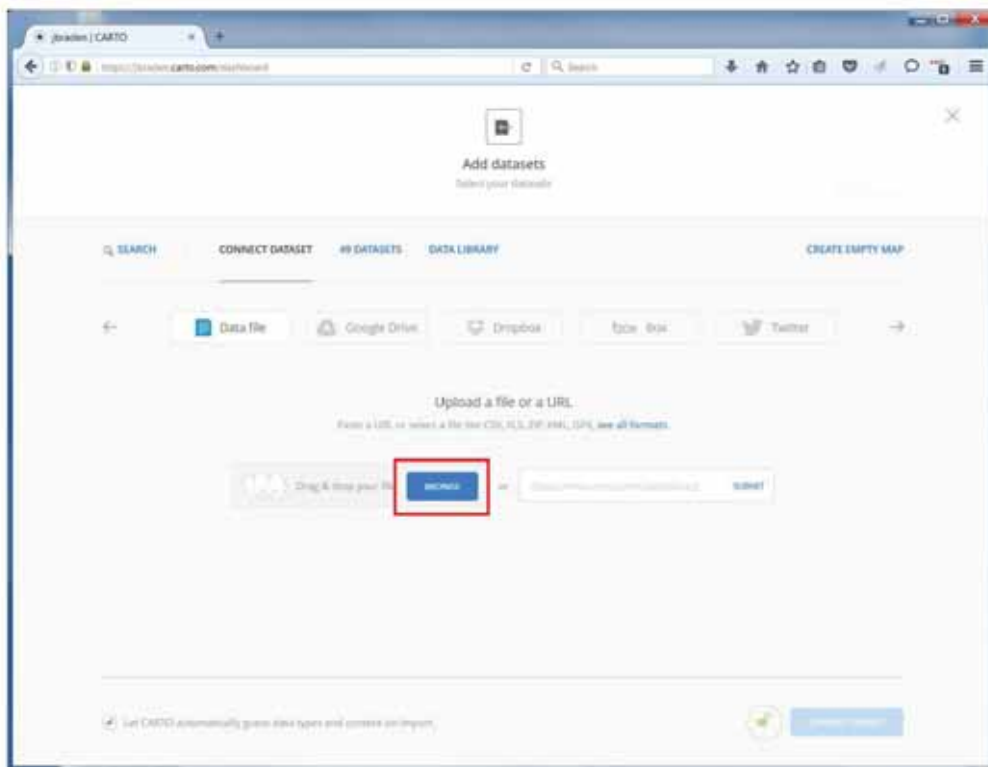
For example, here's the data in the Mental Health folder. All the individual files are the components of a GIS shapefile. We have zipped these files for you to upload to CARTO:



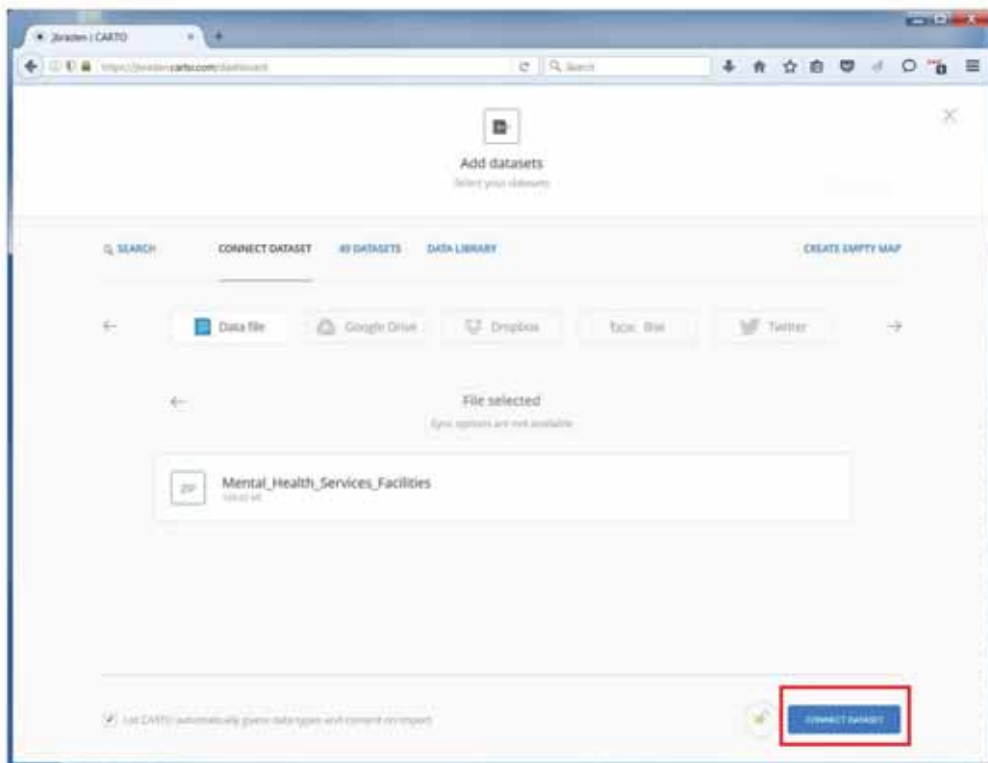
Go back to CARTO: From your Maps page, click on New Map in the upper right. It will take you to a page where you can add data. Click on Connect Dataset.



On the Connect Dataset screen, click the browse button and navigate to the folder location of the .zip file spatial data that you want to map:

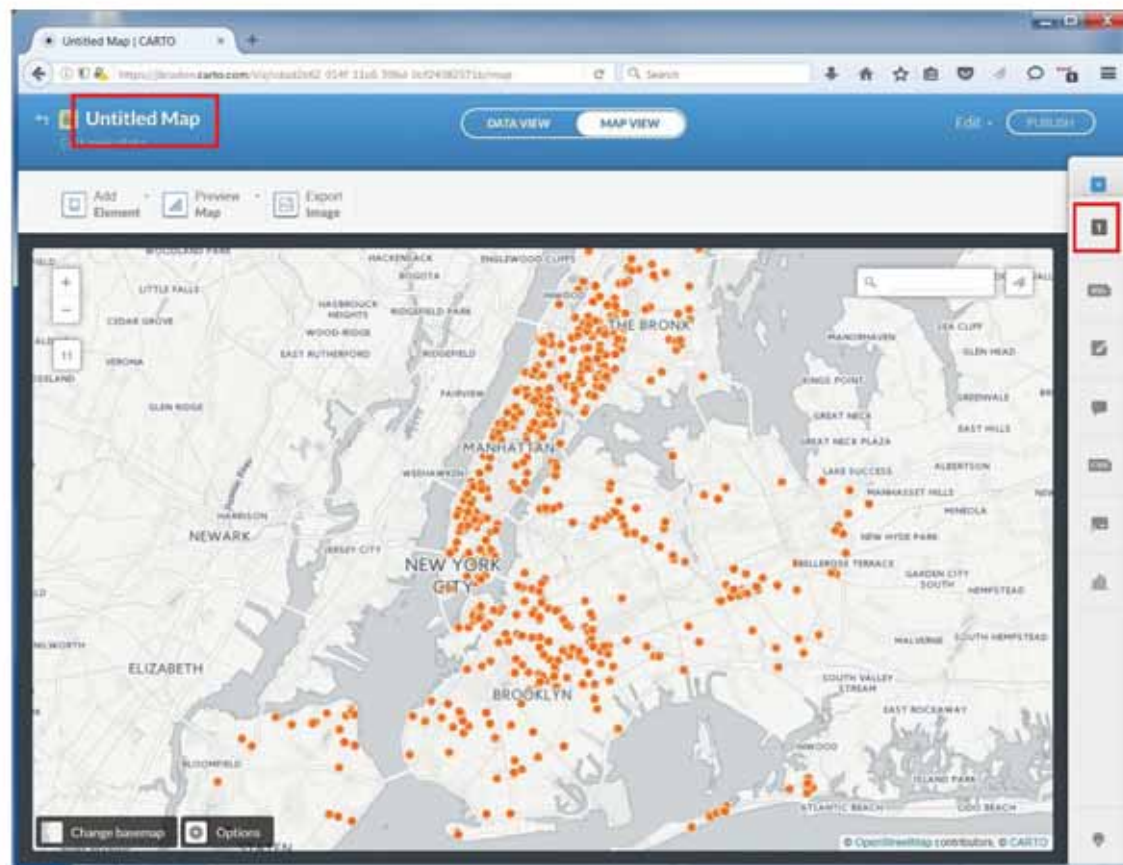


Select the file and it will appear on screen. Then click Connect Dataset on the lower right corner.

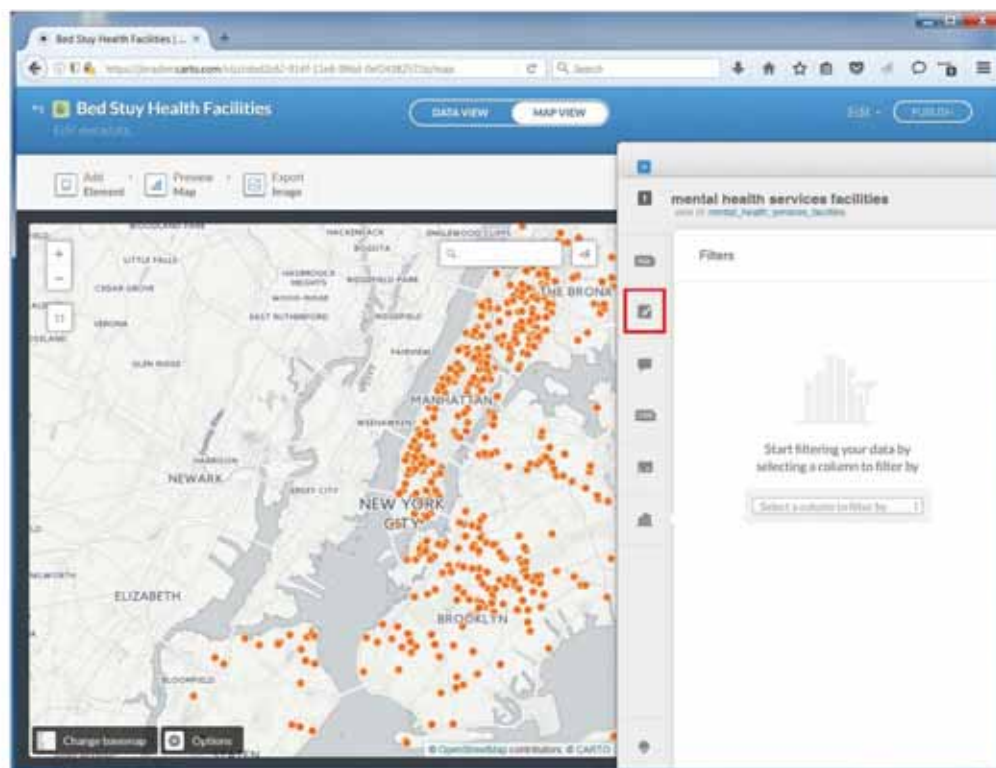




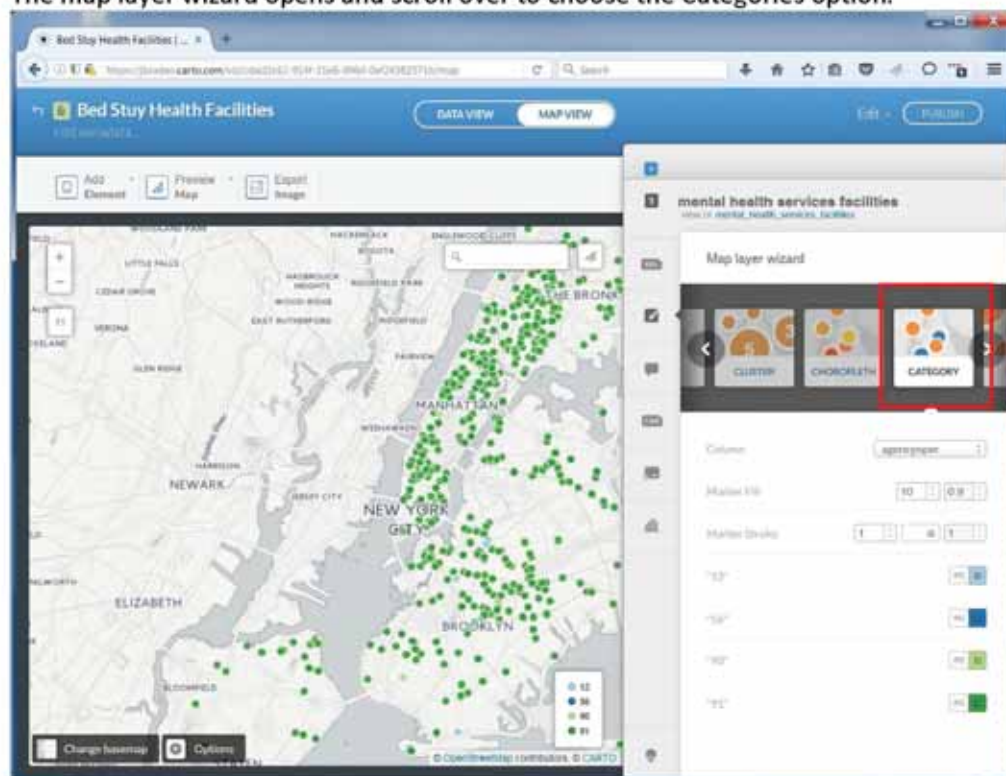
It will take a moment but your map will appear in a new map window. It will show up with all the dots as one color because we haven't symbolized the map categories yet. You can add a map title by clicking in the upper left corner and then click on the layer number to symbolize it (right column).



Your layer details will appear and then click on the paint brush icon (your Wizards tools) to symbolize:



The map layer wizard opens and scroll over to choose the Categories option.



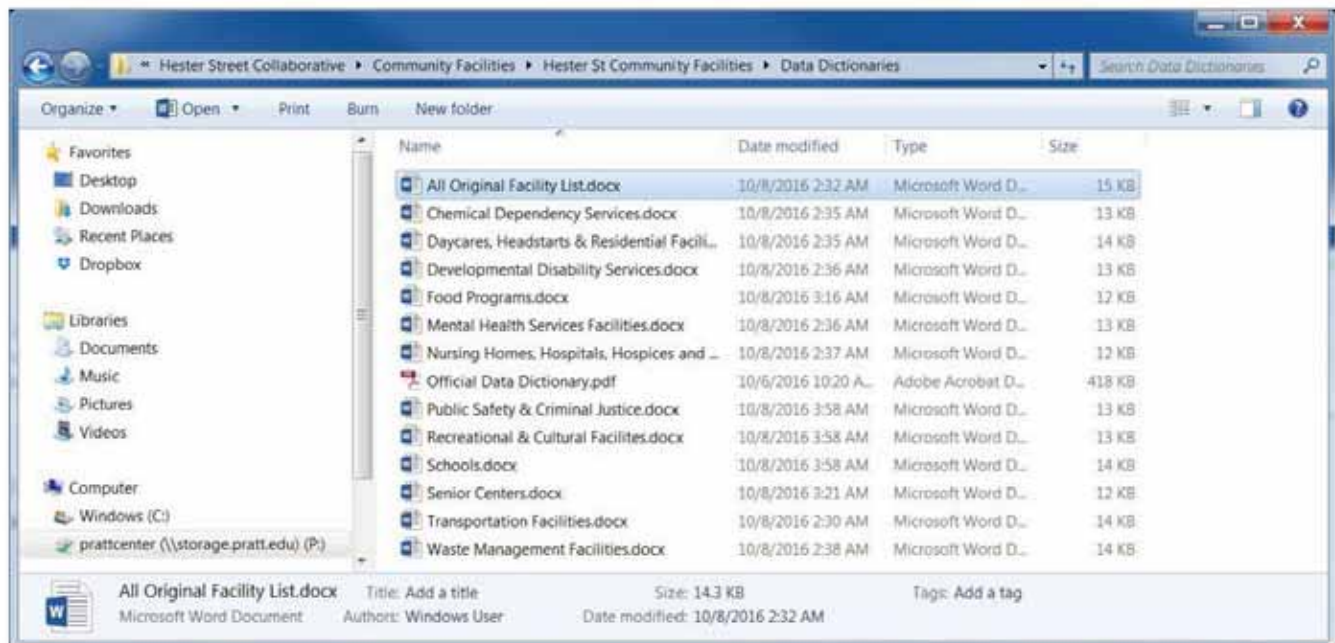
You then need to choose what category (data field) you want to map. There are 2-3 good options depending on the dataset:

“ft\_decode” will provide all the categories with names. However, there can be a lot of these and CARTO may not display all your categories. CARTO seems to be limited to ten categories + other and often there are more than 10 types of facilities in each category.

So, we have grouped categories for you by adding extra fields. You see two data fields: “Supplement” and “Supplement\_1” – you can choose these from the dropdown to see how we grouped categories for you. For example, in the schools layer you’ll see we’ve created one group that is public vs. private. And, we created a second group that is by grade, regardless of whether or not it’s public or private.

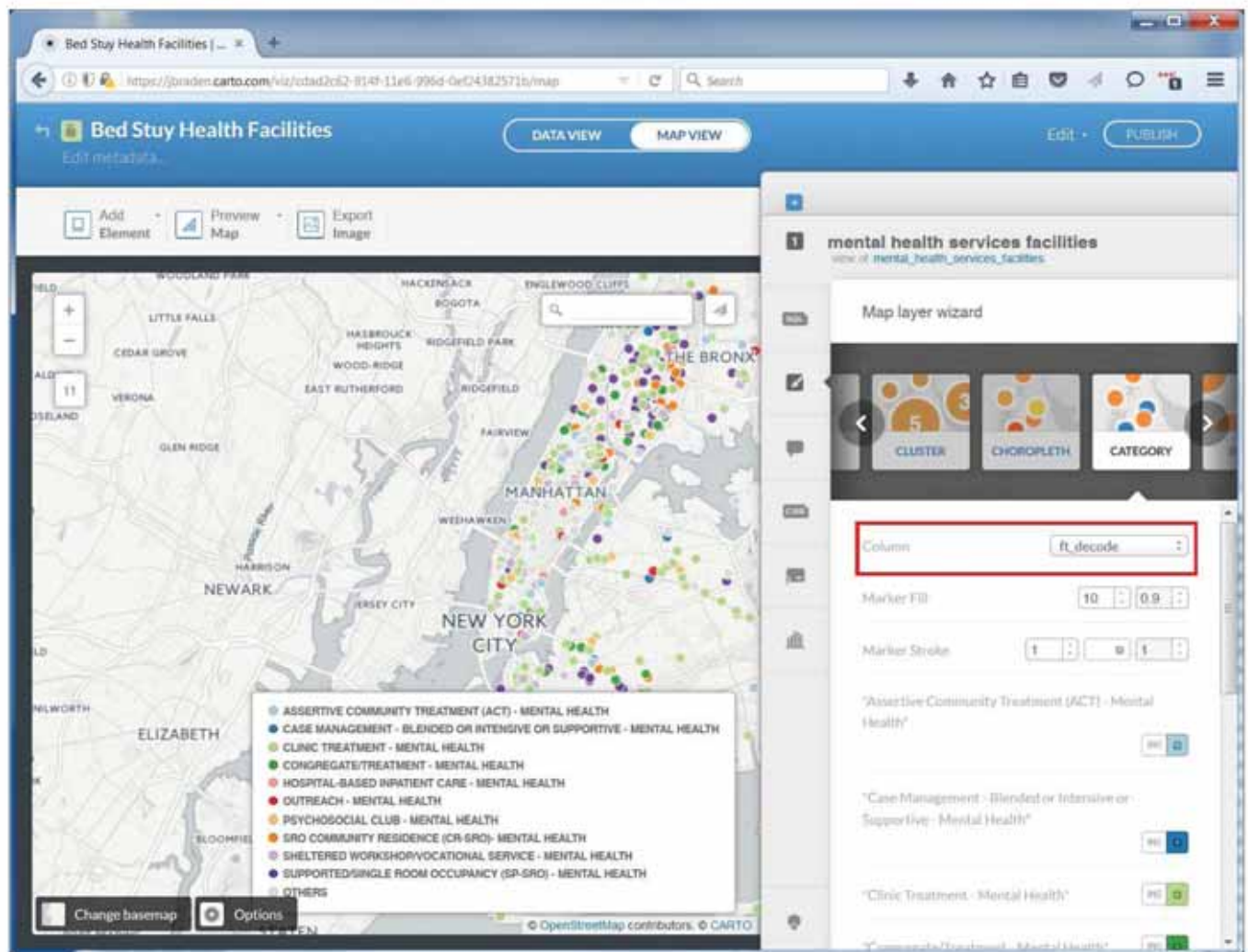
Before you create a map, we strongly recommend looking at the following documents we have provided:

- The “All Original Facility List” tells you all the values for the ft\_decode field.
- Each spatial data layer has its own Word document where we tell you what’s included in the supplemental fields we made for you.
- The “Official Data Dictionary” is from DCP and contains the official metadata.

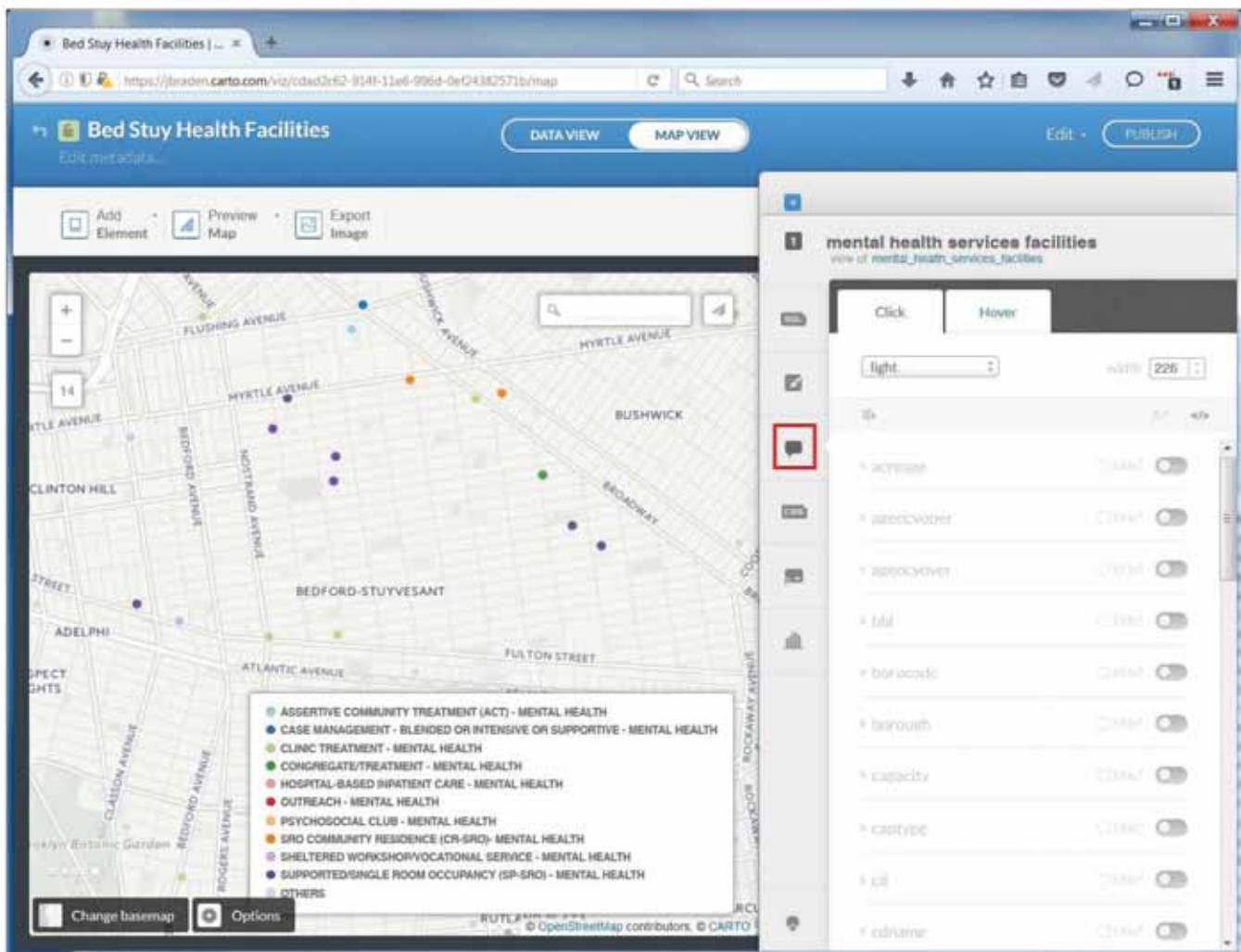


Back to our map....The map below now displays mental health facilities using the “ft\_decode” data field. You can zoom in and out to look more closely at the facilities.





If you want to click on a facility to get its name and address for your asset list, you'll need to create Infowindows that popup as you hover or click on a site. Click on the Infowindow button.

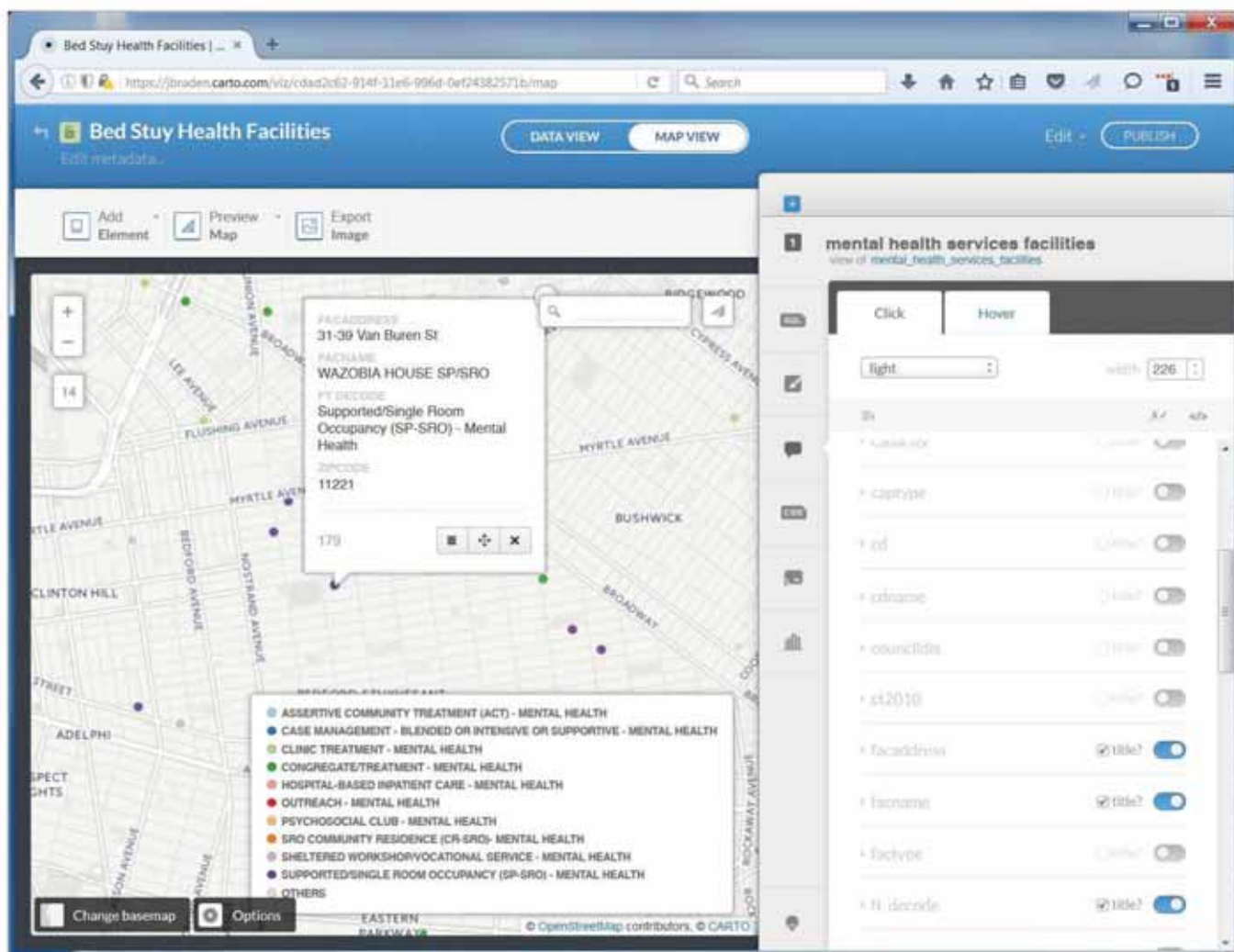


You can then use the button sliders to turn on whichever fields you want to display in your infowindow. We recommend:

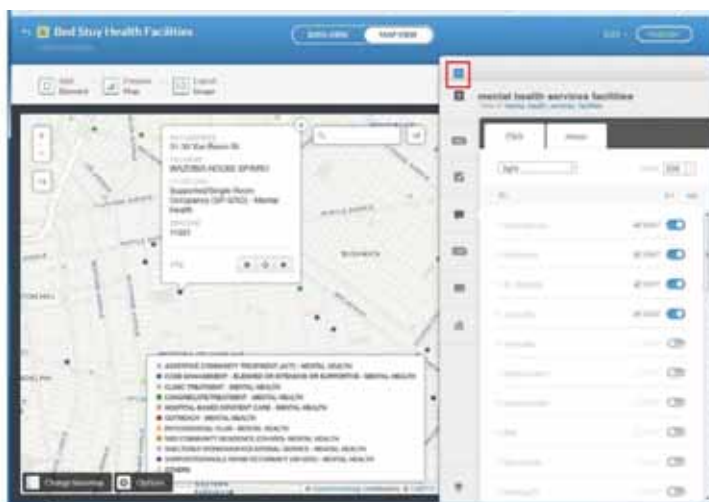
facaddress  
 facname  
 ft\_decode  
 zipcode

Then, will you click on a dot, you'll see information appear about that facility.





You can also add additional map layers to this same map by clicking the + sign and repeating the process of adding and symbolizing data. Or, you can start a new map.:



# ABOUT TCNY/2020

TNCY2020 is the City's blueprint for giving everyone the chance to live a healthier life. Its goal is twofold — to improve every community's health, and to make greater strides in groups with the worst health outcomes, so that our city becomes a more equitable place for everyone. TCNY 2020 looks at traditional health factors as well as social factors, like how many people in a community graduated from high school or go to jail.

In order to reach the goals set forth in the TCNY2020, DOHMH created a multi-phased community engagement process with the aim of mobilizing community members and partners to advocate for and/or implement interventions that will help the City achieve the health targets outlined in TCNY 2020. Phase 1 of the process consisted of a community engagement process through Community Consultations in dozens of neighborhoods across five boroughs. In Phase 2, DOHMH is supporting community organizations in eight underserved neighborhoods as they convene local stakeholders to plan for action around one health priority.

