

Action Plan Flow Chart

Step 1: SELECT HEALTH OUTCOMES	Step 2: SELECT HEALTH BEHAVIORS	Step 3: SELECT TARGET AUDIENCE	Step 4: SELECT FORMATIVE ASSESSMENT	Step 5: SELECT OBJECTIVES	Step 6: SELECT INTERVENTION STRATEGIES	Step 7: EVALUATION METHOD FINALIZED	Step 8: IMPLEMENT & EVALUATE
<input type="checkbox"/> Increase Healthy Weight / Decrease Overweight <input type="checkbox"/> Increase Fitness Levels <input type="checkbox"/> Improve Health Markers <input type="checkbox"/> Decrease Chronic Disease Rates <input type="checkbox"/> Others? _____ _____	<input type="checkbox"/> Increase Physical Activity <input type="checkbox"/> Increase Fruit and Vegetable Consumption <input type="checkbox"/> Decrease TV Viewing/Screen Time <input type="checkbox"/> Increase Healthy Beverage Consumption / Decrease Sweetened Beverage Consumption <input type="checkbox"/> Decrease Portion Sizes <input type="checkbox"/> Increase age-appropriate portion sizes <input type="checkbox"/> Increase Breastfeeding <input type="checkbox"/> Others? _____ _____	<p>Age:</p> <input type="checkbox"/> All ages <input type="checkbox"/> 0-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-15 <input type="checkbox"/> 15-20 <input type="checkbox"/> 21-30 <input type="checkbox"/> 31-40 <input type="checkbox"/> 41-50 <input type="checkbox"/> 51-60 <input type="checkbox"/> 61-70 <input type="checkbox"/> 70+ <p>Gender:</p> <input type="checkbox"/> All <input type="checkbox"/> Female <input type="checkbox"/> Male <p>Race:</p> <input type="checkbox"/> All <input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Other _____ <p>Socioeconomic:</p> <input type="checkbox"/> All <input type="checkbox"/> Lower <input type="checkbox"/> Middle <input type="checkbox"/> Upper <p>Other Specific groups:</p>	<input type="checkbox"/> Existing data sets <input type="checkbox"/> Personal contacts <input type="checkbox"/> Rapid Assessment Procedure (RAP) assessment <input type="checkbox"/> Interviews <ul style="list-style-type: none"> ◦ Key Informant ◦ Intercept <input type="checkbox"/> Focus groups <input type="checkbox"/> Community forums <input type="checkbox"/> Formal surveys <input type="checkbox"/> Other _____	<p>Write objectives that will address the selected health behavior(s) in step two. Write one for each area:</p> <input type="checkbox"/> Nutrition <input type="checkbox"/> Physical Activity <p>SMART: Specific – Objectives should specify what they want to achieve. Measurable – You should be able to measure whether you are meeting the objectives or not. Achievable - Are the objectives you set, achievable and attainable? Realistic – Can you realistically achieve the objectives with the resources you have? Time – In what time frame will it be done</p>	<p>Consider Behavior Theory in Development</p> <p>Levels:</p> <input type="checkbox"/> Behavior Change (Individual) <input type="checkbox"/> Environment change <input type="checkbox"/> Policy change <p>Sites:</p> <input type="checkbox"/> Home <input type="checkbox"/> School <input type="checkbox"/> Community <input type="checkbox"/> Worksite <input type="checkbox"/> Healthcare <input type="checkbox"/> Childcare <input type="checkbox"/> Faith-Based Organizations <input type="checkbox"/> Others <div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>Line up strategies / activities with the specific objectives they are addressing</p> </div>	<p>Process Measures:</p> <input type="checkbox"/> Participant satisfaction (Survey, interviews) <input type="checkbox"/> Exposure to the intervention (trainings held, record of participation, participation list, interviews) <input type="checkbox"/> Observation or counts – Track over time <input type="checkbox"/> Number of media reports <input type="checkbox"/> School curriculum changes <input type="checkbox"/> Policy change tracking (list of Policy changes) <input type="checkbox"/> Environmental assessments (School Health Index, Miles of trails) <input type="checkbox"/> Review of retail and government-based secondary data (Exercise equipment sales) <input type="checkbox"/> Other _____ <p>Impact / Outcome Measures:</p> <input type="checkbox"/> Specific objectives such as fruit and vegetable intake or physical activity (Survey, BRFSS) <input type="checkbox"/> Nutrition / Physical activity survey (Pre/Post) <input type="checkbox"/> Secondary data sources (BRFSS, NHANES) <input type="checkbox"/> Objectively measured assessments (BMI, BP) <input type="checkbox"/> Other _____	<p>List the resources you need to implement.</p> <input type="checkbox"/> Full Time Equivalent Staff <input type="checkbox"/> Funding <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____

