



H E A L T H Y   S T A R T S   H E R E

# AZ Health Zone Program Guidance and Policy Manual Federal Fiscal Year 2024



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This Guidance and Policy Manual should provide guidance and procedures to assist with the administration of the AZ Health Zone program in your local county.

The AZ Health Zone program hopes to have conversations around policies and procedures to ensure we are meeting federal, state, local agency, and community needs.

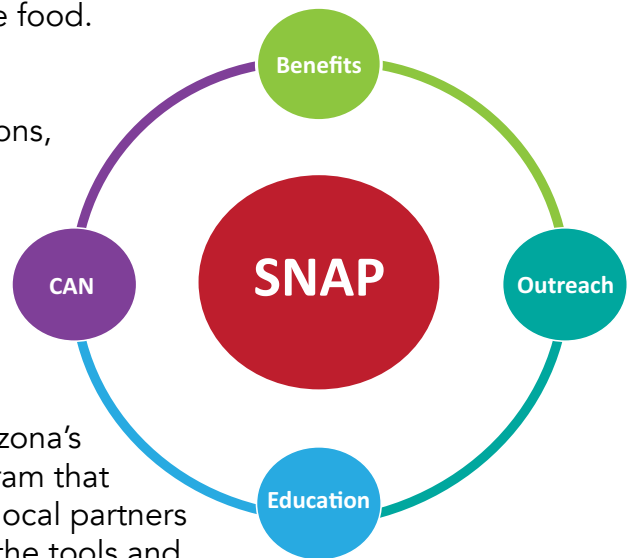


# Introduction

## What is SNAP?

SNAP is the Supplemental Nutrition Assistance program administered by the USDA Food and Nutrition Service (FNS) through its nationwide network of FNS field offices. SNAP is the nation's first line of defense against hunger and a powerful tool to improve nutrition among individuals with low access to resources. This federal program includes the following components.

- **Benefits** – provides nutrition benefits to low-income individuals and families that are used to supplement the food budget at stores to purchase food.
- **Outreach** – State and Local Agencies, advocates, employers, community and faith-based organizations, and other stakeholders that reach out to eligible low-income people who are not currently participating in the program to share information about obtaining nutrition benefits to help them make an informed decision about program participation.
- **Career Advancement Network (SNAP CAN)** – Arizona's community-based employment and training program that provides employment readiness services through local partners dedicated to connecting program participants to the tools and resources they need to overcome barriers and obtain employment.
- **Education (SNAP-Ed)\*** – supports SNAP's role in addressing food insecurity, is central to improving nutrition, inspiring public confidence, and supporting American agriculture.



## SNAP-Ed Goal

Improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and the USDA food guidance.

SNAP-Ed is a combination of educational strategies accompanied by environmental Policy, Systems, and Environmental change (PSE) interventions demonstrated to affect food and physical activity choices.

## SNAP-Ed Focus

Implementing strategies or interventions to help the SNAP-Ed target audience establish healthy eating habits and a physically active lifestyle.

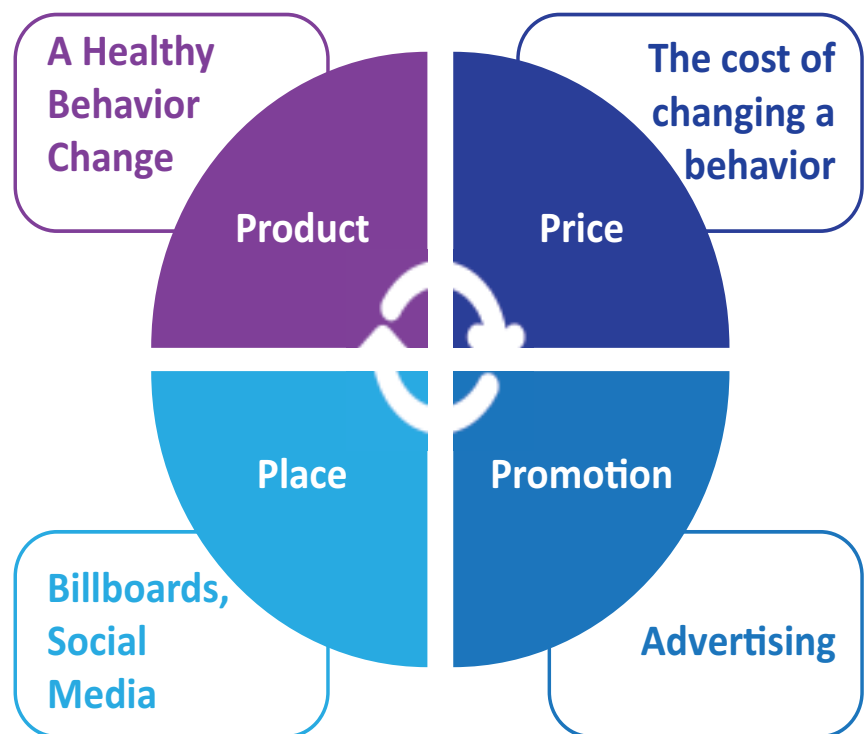
Primary prevention of diseases to help the SNAP-eligible population that has risk factors for nutrition-related chronic disease, prevent or postpone the onset of disease by establishing healthier eating habits, and being more physically active.

## SNAP-Ed Guidelines: Three Approaches

- Approach 1: Individual or group-based direct education, health promotion, and intervention strategies
- Approach 2: Comprehensive, multilevel interventions at complementary organizations
- Approach 3: Community and public health approaches to improve nutrition

## Social Marketing

The use of marketing principles and techniques to influence voluntary behavior change for the benefit of individuals, groups, and society as a whole.



## Evidence-Based Nutrition Education Interventions

### Research Tested

- Peer-reviewed journal publication
- Tested across multiple populations and venues
- Experimental or quasi-experimental study designs with control groups

### Practice Tested

- Evaluated for program effectiveness
- Reflects known best practices in nutrition education and obesity prevention strategies

### Emerging Practice

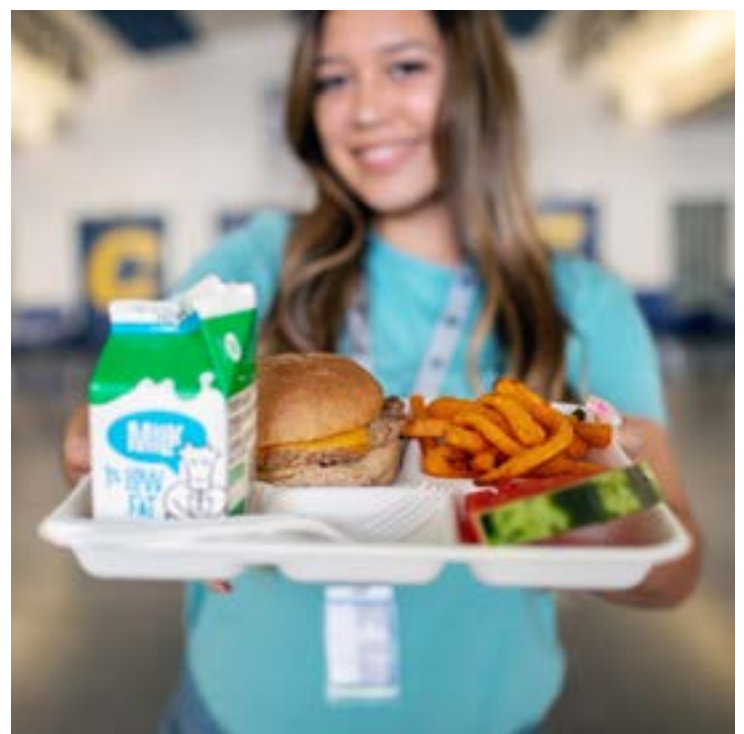
- Innovative pilot projects
- Responds to unmet needs in addressing Healthy People 2020 Objectives

Find more information about SNAP-Ed to the [Federal SNAP-Ed Guidance](#)





# State Operations Roles and Responsibilities



## Roles and Responsibilities



- Establishes policy, guidelines, procedures, interventions, and activities
- Allocates to State SNAP agencies 100% funding for allowable, reasonable, and necessary costs
- Monitors State SNAP-Ed Plans



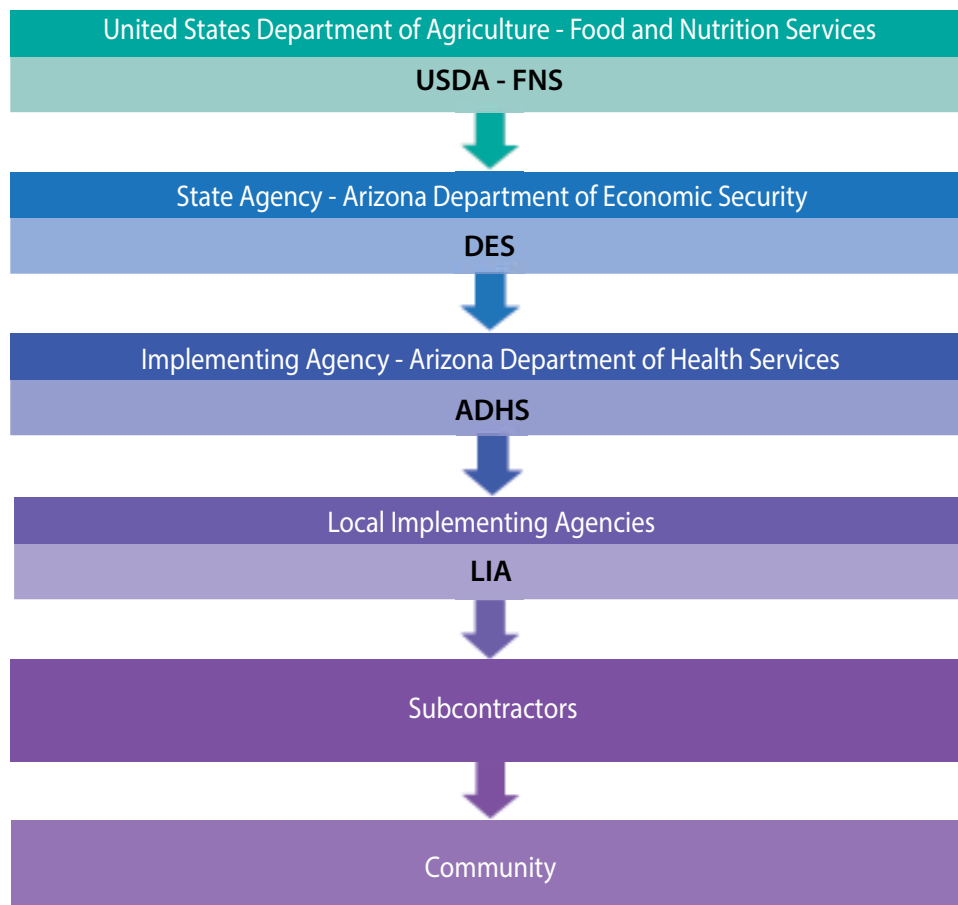
- Provides leadership, direction, and information consistent with policies
- Monitors implementation of the State's approved plan, including allowable expenditures
- Collects and reports data regarding participation in SNAP-Ed



- Works with FNS programs, state and local agencies to develop state plan
- Coordinates with state and local agencies to promote healthy eating and active living
- Ensures SNAP-Ed interventions and implementation meets evidence based standards
- Offers trainings

## SNAP-Ed Funding Structure

SNAP-Ed is a federally funded program that is allocated to regions and then to states to provide programming in approved communities.





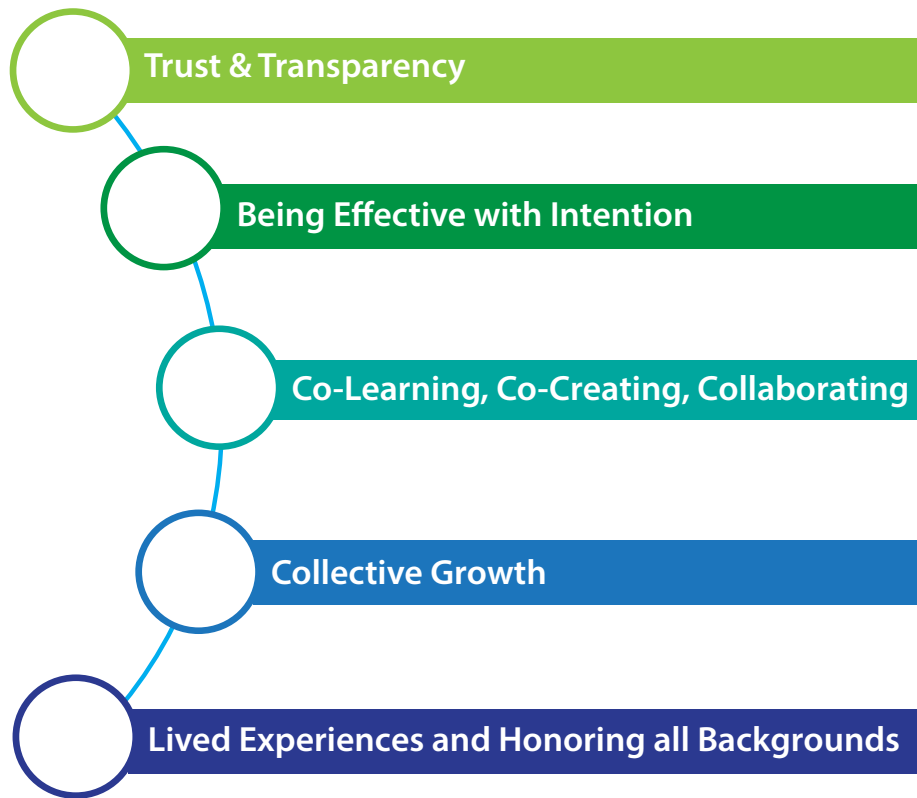
## Arizona's AZ Health Zone (SNAP-Ed) State Plan

The AZ Health Zone is Arizona's community health engagement program that supports and builds collaborative partnerships aimed at improving health through increased access to physical activity opportunities, healthy food, and education.

### Mission

The Arizona Department of Health Services' mission is to promote, protect, and improve the health and wellness of individuals and communities in Arizona.

### AZ Health Zone State Team Values for Our SNAP-ED Work



### AZ Health Zone Goals

- Goal 1: By September 30, 2025, improve nutrition and feeding practices, and reduce hunger of individuals with low access to resources who are ages 2 and older.
- Goal 2: By September 30, 2025, increase physical activity and decrease sedentary behavior toward adherence to national physical activity guidelines.

### Audience

The primary audiences for AZ Health Zone are households with children in communities with limited access to healthy eating, active living, economic, and/or other resources.

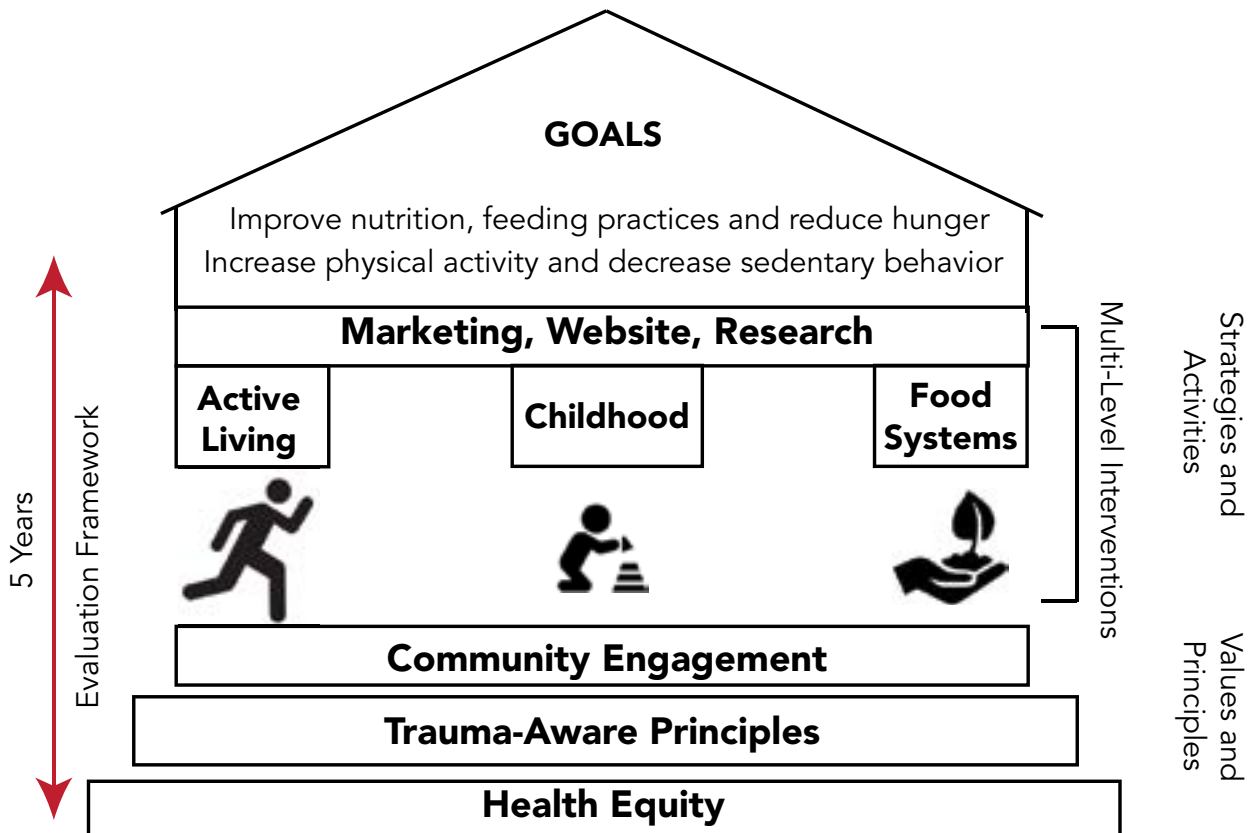
## AZ Health Zone Principles and Framework

The AZ Health Zone supports collaborative partnerships that work toward building resilient communities using the lens of health equity. The program has created a strategic plan for the next five years to deepen the PSE impact in communities using multilevel interventions. This will be achieved through the following foundational principles based on the program's guiding framework:

1. Enhanced **engagement in communities** with limited resources for greater integration of programming and sustainability that meets their needs, strengths, and desires.
2. The adoption of **trauma-aware principles** at each level of the program to ensure that interventions are meeting individuals and families where they are and avoiding harm.

The guiding framework has been based on: 1) the research and practice evidence available 2) the experiences of LIA staff in their communities as shared in narrative reports and 3) federal and state priorities, including ADHS and USDA.

Over the next five years, marketing, state-level trainings, capacity building, and support to LIAs, in combination with community engagement and trauma-informed approaches, are intended to increase the number of communities and individuals experiencing multiple SNAP-Ed interventions.



## Health Equity

Health equity will be the lens and foundation of the AZ Health Zone program. We will be using the definition of health equity as defined by the Robert Wood Johnson Foundation: Health Equity means that everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, language barriers, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.

Health equity surrounds and underpins a society in which everyone has an equal opportunity to live the healthiest life possible. Four key steps to achieve healthy equity:

- **Identify important health disparities.** Many disparities in health are rooted in inequities in the opportunities and resources needed to be as healthy as possible. The determinants of health include living and working conditions, education, income, neighborhood characteristics, social inclusion, and medical care. An increase in opportunities to be healthier will benefit everyone but more focus should be placed on groups that have been excluded or marginalized in the past.
- **Change and implement policies, laws, systems, environments, and practices to reduce inequities in the opportunities and resources needed to be as healthy as possible.** Eliminate the unfair individual and institutional social conditions that give rise to the inequities.
- **Evaluate and monitor efforts using short- and long-term measures** as it may take decades or generations to reduce some health disparities. In order to not underestimate the size of the gap between advantaged and disadvantaged, disadvantaged groups should not be compared to the general population but to advantaged groups.
- **Reassess strategies in light of process and outcomes and plan next steps.** Actively engage those most affected by disparities in the identification, design, implementation, and evaluation of promising solutions.

Improving health and health care worldwide requires a focus on equity — equity of access, treatments, and outcomes. **Health equity is realized when each individual has a fair opportunity to achieve their full health potential.**

*Example: A local health department addressing health inequities targets the health issues facing the community it serves, while at the same time working to address the inequities in the social and environmental conditions that contribute to the differences in illness and injury. For example, in addition to providing individuals with WIC benefits, a local health department also works with a coalition to advocate for equal access to affordable, healthy food in low-income neighborhoods.*

Differences in access, treatment, and outcomes between individuals and across populations that are systemic, avoidable, predictable, and unjust are particularly problematic for quality improvers. These types of differences are often referred to as inequities or disparities. Inequities are the worst type of unwanted variation in a system — variation linked to the complicated history and reality of racism, classism, sexism, ableism, ageism, and other forms of oppression. Health improvers have a role to play and a set of tools to use in health care systems and communities to remediate inequities.

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. Clearly identify and understand health inequities to establish baselines and monitor trends over time, inform partners about where to focus resources and interventions, and ensure strategies account for the needs of populations experiencing health inequities.

## Trauma-Informed

Trauma-informed approaches encourage a systems approach to understanding the many factors that may influence an individual’s readiness and/or ability to change their behaviors. The trauma-informed lens with a person-centered approach is an appropriate one through which to consider the implementation of SNAP-Ed programs, because individuals and families with limited resources may be more likely to have experienced negative social determinants of health, such as poverty, that lead to adverse experiences such as food insecurity, homelessness or instability, or substance use disorders. These conditions, sometimes experienced as trauma, can influence how and why SNAP-Ed participants make choices related to food and activity.

A person-centered approach in SNAP-Ed that acknowledges the potential role of trauma in food and activity choices and addresses these barriers in an appropriate way will increase the likelihood that programming meets people where they are, does not cause unintended harm, and supports individuals and families to make the positive changes that are realistic for them.

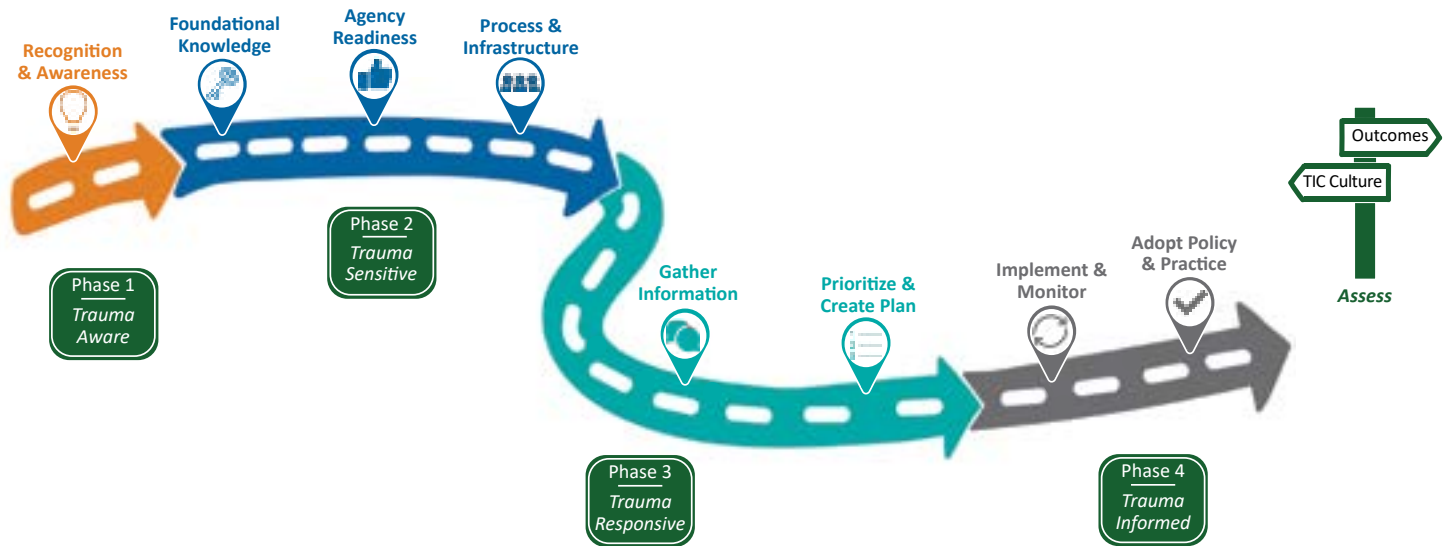
The AZ Health Zone will work to be trauma aware and sensitive by engaging around the Substance Abuse and Mental Health Services Administration’s (SAMHSA) six principles of a trauma informed approach: **(1) Safety:** creating spaces where people feel culturally, emotionally, and physically safe, the physical setting is safe, and interpersonal interactions promote a sense of safety **(2) Trustworthiness and Transparency:** provide full and accurate information with the goal of building and maintaining trust **(3) Peer Support:** establishing safety and hope, building trust, enhancing collaboration, and utilizing their stories and lived experience to promote recovery and healing **(4) Collaboration and Mutuality:** recognition that healing happens in relationships and partnerships with shared power and decision making **(5) Empowerment Voice and Choice:** individuals’ strengths and experiences are recognized and built upon and **(6) Cultural, Historical, Gender Issues:** moves past cultural stereotypes and biases and leverages healing values of traditional cultural connections.



Utilizing trauma-informed program components assists in addressing the potential impact of trauma and adversity on the health-promoting behaviors that SNAP-Ed seeks to support. This person-centered approach helps identify the role SNAP-Ed programs can play to influence an individual's readiness and/or ability to change their behaviors, thereby strengthening efforts to create the conditions that are necessary to support healthy communities, families, and children.

The AZ Health Zone State Team has made a commitment over the next five years to move through phases to build a more trauma-informed program.

## Trauma-Informed Road Map



## Community Engagement

The AZ Health Zone seeks to strengthen and support efforts to engage individuals with low access to resources to have meaningful and sustainable projects in each community that address resident- and stakeholder-identified SNAP-Ed goals. The FY2020 SNAP-Ed Federal Guidance notes that “The Program can maximize its reach when coordination and collaboration takes place among a variety of stakeholders at the local, State, regional, and national levels...The Program is enhanced when the specific roles and responsibilities of local, State, regional, and national SNAP agencies and SNAP-Ed providers are defined and put into practice.”

Furthermore, the Interpretive Guide to the SNAP-Ed Evaluation Framework states that “one of the driving forces in SNAP-Ed community and public health approaches is community engagement. Low-income communities that are disenfranchised, where conditions contribute to health inequities and social injustices, benefit from participating in community-level changes. Community members are often at the center of SNAP-Ed strategies and interventions.”

There is a body of evidence over the last 40 years regarding the benefits of meaningful community-agency engagement. The Spectrum of Public Participation shown below will be used by the AZ Health Zone program to help define community engagement activities.



	<b>INFORM</b>	<b>CONSULT</b>	<b>INVOLVE</b>	<b>COLLABORATE</b>	<b>EMPOWER</b>
<b>PUBLIC PARTICIPATION GOAL</b>	To provide the public with balanced and objective information to assist them in understanding the problem, alternatives, opportunities and/or solutions.	To obtain public feedback on analysis alternatives and/or decisions.	To work directly with the public throughout the process to ensure that public concerns are consistently understood and considered.	To partner with the public in each aspect of the decision including the development of alternative and the identification of the preferred solution.	To make final decision making in the hands of the public.
<b>PROMISE TO THE PUBLIC</b>	We will keep you informed.	We will keep you informed, listen to and acknowledge concerns and aspirations, and provide feedback on how public input influenced the decision.	We will work with you to ensure that your concerns and aspirations are directly reflected in the alternatives developed and provided feedback on how public input influenced the decision.	We will look to you for advice and innovation in formulating solutions and incorporate your advice and recommendations into the decisions to the maximum extent possible.	We will implement what you decide.

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This model is built on the perspective that people have inherent expertise in their lived experience and, as a result, it is valuable to involve them to improve programs and influence the work. Community engagement is an area that the AZ Health Zone State Team is looking to co-learn and co-create to support local agencies and build capacity to truly engage individuals across the spectrum.

## AZ Health Zone Interventions and Focus Areas

The SNAP-Ed Guidance states, “a key tenet of multilevel interventions is that they reach the target audience at more than one level of the Social Ecological Model and that the interventions mutually reinforce each other.” The Social Ecological Model is a framework for prevention and will guide understanding of the various societal levels that impact dietary and physical activity behaviors. By implementing layered approaches within the same community, a stronger “dosage of intervention” can occur, increasing the likelihood for behavior change.

### Social-Ecological Model for Food and Physical Activity Decisions



The AZ Health Zone will also utilize the Prevention Institute’s Spectrum of Prevention. It serves as a guide to identify layered activities and audiences that move beyond individual education and toward a more comprehensive approach to increase the likelihood of impacting individuals and communities in a holistic manner. The levels are complementary and should be utilized together to produce deeper, more impactful behavior change results than what may be achieved by any single activity or initiative.

## The Spectrum of Prevention



The AZ Health Zone will work to co-create projects and interventions with local agencies and the community that advance our work in the following focus areas and strategies.

## FFY2021 - FFY2025 AZ Health Zone Strategies and Activities

<b>Active Living</b>	<b>Strategy: Support development of the built environment to increase access and use of community infrastructure(s).</b>	
	<i>Activity</i>	<i>Description</i>
	Active Living Policy	Contribute to the creation or implementation of state, regional, or local policies that create safer, more accessible, and/or more walkable communities.
	Walking, Biking, and Transit Networks	Contribute to the creation or implementation of infrastructure that improves the walking, biking, and/or transit system or environment within or between communities.
	Active Transportation	Encourage active transportation behavior with partnering organizations (those managing bike share, scooters, etc.) and among SNAP-eligible residents.
	Development of Parks, Trails and Other Resources	Support development of new spaces to encourage participation in regular physical activity.
	Community Engagement	Engage residents in SNAP-Ed eligible communities in the process and planning using consulting, involving, and collaborating techniques.
	<b>Strategy: Increase usability and access to physical activity resources and community programming.</b>	
	<i>Activity</i>	<i>Description</i>
	Improve Usability and Access to Community Resources	Increase usability and access to community physical activity resources by improving space features, amenities, incivilities, or access.
	Improve Usability and Access to Community Resources	Increase usability and access to community physical activity resources by improving space features, amenities, incivilities, or access.
	Shared Use Agreements	Develop a written agreement between agencies to allow communities to access resources to be physically active.
	Social Support Networks	Establish/support physical activity groups for adults through sustainable partnerships with community organizations.
	Community Engagement	Engage residents in SNAP-Ed eligible communities in the process and planning using consulting, involving, and collaborating techniques.

<b>Childhood</b>	<b>Strategy: Support the development, implementation, and evaluation of policies that promote nutrition and physical activity in early care and education (ECE) systems.</b>	
	<i>Activity</i>	<i>Description</i>
	Empower Policy	Support Empower policy change at ECE, regional, and/or state levels.
	Learning Collaborative	Participate in learning collaboratives, and councils to build communities of practice.
	Staff Development	Assist a program or facility to increase staff knowledge, abilities, skills, and improve practices
	ECE-Based Agriculture	Train partners to implement and sustain gardens and/or support local food procurement and implementation.
	Nutrition and Feeding Practices	Support improvements in ECE nutrition practices and environments consistent with Empower Standards, including breastfeeding.
	PA environment	Support improvements in ECE PA environments and practices consistent with Empower Standards (e.g., painted playgrounds).
	Community Coordination	Support ECEs to increase programs and resources that meet an identified need (e.g., food security resources - SNAP outreach, backpack programs, food pantries).
	Community Engagement	Engage residents in SNAP-Ed eligible communities in the process and planning using consulting, involving, and collaborating techniques.
	<b>Strategy: Support the development, implementation, and evaluation of policies that promote nutrition and physical activity in schools and other youth-based systems.</b>	
	<i>Activity</i>	<i>Description</i>
	Policy Revision and Communication	Support written local wellness policy (LWP) and/or Empower review, revision, dissemination and (two-way) communication with school stakeholders.
	Wellness Committees	Support district and school-level school wellness committees, including recruitment, formation, and participation.
	Staff Development	Provide school staff with train-the-trainer on evidence-based curricula and resources to support policy implementation and encourage students' healthy behaviors.



<b>Childhood Continued</b>	<b>Strategy: Support the development, implementation, and evaluation of policies that promote nutrition and physical activity in schools and other youth-based systems (continued).</b>	
	<i>Activity</i>	<i>Description</i>
	School/Youth-Based Agriculture	Train partners to implement and sustain gardens and/or support local food procurement and implementation.
	Nutrition Practices and Environment	Support improvements in nutrition practices and environments, including the Smarter Lunchrooms Movement (SLM), School Meal Programs, and Out-of-School Time (OOST) consistent with Empower.
	Physical Activity Practices and Environment	Support improvements in PA practices and environments by employing the tenets of a Comprehensive School Physical Activity Program (CSPAP) (e.g., active transportation, active recess, adequate physical education opportunities, classroom brain breaks).
	Community Coordination	Support school and other youth-based programs and resources that meet an identified need (e.g., food security resources - SNAP outreach, backpack programs and food pantries).
	Community Engagement	Engage residents in SNAP-Ed eligible communities in the process and planning using consulting, involving, and collaborating techniques.

<b>Food Systems</b>	<b>Strategy: Support the production, distribution, and availability of food to increase access to and consumption of healthy foods.</b>	
	<i>Activity</i>	<i>Description</i>
	Food Systems Policy	Develop and support food systems policies at state, regional, county, or municipal levels.
	Food Access	Enhance policies, systems, and environments that support no-cost food programs (where food is free).
	Food Retail	Enhance policies, systems, and environments that support food retail (where food is purchased),
	Farmers/Growers	Train and connect local farmers and food producers to support locally-based food access and food retail.
	Gardens	Support community and home gardens.
	Community Engagement	Engage residents in SNAP-Ed eligible communities in the process and planning using consulting, involving, and collaborating techniques.

## Our Team's Evaluation Standards

**Utility** - *Be responsive to stakeholders' needs and provide meaningful products.*

**Feasibility** - *Design practical, realistic, and contextually-appropriate evaluations.*

**Equity** - *Incorporate equity and trauma-informed principles into evaluation, engaging stakeholders at multiple levels whenever possible.*

**Accuracy** - *Use methods, designs, and analyses that are valid, reliable, and trustworthy.*

**Consistency** - *Perform measurement of SNAP-Ed indicators across time.*

The above standards are mainly adopted from the American Evaluation Association's (AEA) guidance, with the exception of Consistency. We also consider Equity to be of enough importance that we have changed Propriety to Equity, which also aligns with the AZ Health Zone's dedication to equity, trauma-informed principles, and community engagement.

Each of our standards are described in more detail below, as outlined by the AEA and the following publication, or our team (Equity, Consistency):

Yarbrough, D. B., Shulha, L. M., Hopson, R. K., and Caruthers, F. A. (2011). *The program evaluation standards: A guide for evaluators and evaluation users* (3rd ed.). Thousand Oaks, CA: Sage.

### Utility Standards

The Utility standards are intended to increase the extent to which program stakeholders find evaluation processes and products valuable in meeting their needs.

- U1 Evaluator Credibility
- U2 Attention to Stakeholders
- U3 Negotiated Purposes
- U4 Explicit Values
- U5 Relevant Information
- U6 Meaningful Processes and Products
- U7 Timely and Appropriate Communicating and Reporting
- U8 Concern for Consequences and Influence

### Feasibility Standards

The Feasibility standards are intended to increase evaluation effectiveness and efficiency.

- F1 Project Management
- F2 Practical Procedures
- F3 Contextual Viability
- F4 Resource Use

## **Equity Standards**

Our Equity standards overlap with but enhance the Yarborough et al. Propriety Standards to support what is proper, fair, legal, right, and just in evaluations.

- E1 Community Engagement
- E2 Trauma-Informed Principles
- E3 Multilevel Interventions
- E4 Formal Agreements
- E5 Conflicts of Interests
- E6 Fiscal Responsibility

## **Accuracy Standards**

The Accuracy standards are intended to increase the dependability and truthfulness of evaluation representations, propositions, and findings, especially those that support interpretations and judgments about quality.

- A1 Justified Conclusions and Decisions
- A2 Valid Information
- A3 Reliable Information
- A4 Explicit Program and Context Descriptions
- A5 Information Management
- A6 Sound Designs and Analyses
- A7 Explicit Evaluation Reasoning
- A8 Communication and Reporting

## **Consistency Standards**

Consistency standards are intended to enable measurement of indicators across time and avoid unnecessary revisions to evaluation protocols, while still enabling flexibility as needed.

- A1 Indicators and Evaluation Matrices
- A2 Measurement Across Time
- A3 Measurement Tools and Processes
- A4 Responsiveness to Change

## Our Team's Guiding Principles for Evaluators (adopted from the AEA)

**Systematic Inquiry:** Evaluators conduct data-based inquiries that are thorough, methodical, and contextually relevant.

**Competence:** Evaluators provide skilled professional services to stakeholders.

**Integrity:** Evaluators behave with honesty and transparency in order to ensure the integrity of the evaluation.

**Respect for People:** Evaluators honor the dignity, well-being, and self-worth of individuals and acknowledge the influence of culture within and across groups.

**Common Good and Equity:** Evaluators strive to contribute to the common good and advancement of an equitable and just society.

**Accountability:** Although this is considered a standard by the AEA, we consider it a guiding principle for evaluators. Evaluators provide adequate documentation of evaluations, consistently meet deliverable deadlines, and are encouraged to take a meta-evaluative perspective focused on improvement and accountability for evaluation processes and products.







# Guidance - Local Operations





# Local Implementing Agency Roles and Expectations

## Implementation of the SNAP-Ed Grant Program

The following action items are responsibilities needing to be fulfilled for each local implementing agency (LIA) individually and for their subcontractor(s):

- Onboarding new staff
- Community Selection and defining the geographical boundaries
- Selecting Strategies and Activities to meet the communities identified needs
- Budget management
- Evaluation activities and assessments
- Required reporting such as:
  - SNAP-ED Electronic Data System (SEEDS)
  - Semi-annual Report Narratives
  - Contractor Expense Reports (CER)
  - Inventory Tracking
- Compliance with program guidelines and policies

## Policy, Systems, And Environmental Changes

PSE change strategies expand beyond programming offered at the individual level (e.g. teaching nutrition education lessons) and seek to address and support the systems that create the conditions for healthy behaviors in which we live, work, learn, shop, and play. The PSE approaches reach whole sites, neighborhoods, districts, and populations to create community-level outcomes that are sustainable. The AZ Health Zone Local Implementing agencies are technical advisors for creating and supporting PSE changes that benefit low-income households and communities. Such roles place LIAs in a unique position to have a greater impact beyond being a provider of services. Local agency staff support and assist organizations to adopt, maintain, and sustain PSE changes. LIA support and assistance will help facilitate sustainable PSE changes as organizations transition into taking full ownership of the PSE change and continuous involvement from SNAP-Ed is no longer needed. To maximize this effort, AZ Health Zone programs should work closely with communities and partners to develop PSE changes that are useful and relevant to SNAP-Ed participants, and feasible for communities and partners to sustain.

The Food Nutrition Services (FNS) recognizes that SNAP-Ed resources may be needed on an ongoing basis to support changes. The communities and partners that receive the consultation and technical assistance from AZ Health Zone are ultimately responsible for adopting, maintaining, and sustaining the PSE change. If a community or partner is unable to sustain PSE changes, this may indicate that the change is not realistic or relevant to community needs.

PSE changes should reflect consultation, involvement, and/or collaboration from partner organizations and community members served by AZ Health Zone, since “no service system can be effective or sustained unless it is grounded in, reflective of, and has the full participation of the community it is designed to serve.” (SNAP-Ed Federal Guidance, pg 30)

To ensure collaborative work with communities, expectations regarding the implementation of PSE changes approaches is listed below:

- Selected strategies and activities should impact multi-level interventions in a community that shows readiness.
- Local agencies will update SIT on changes and adaptations within the community action plans based on approved activities that are community-driven.
- Throughout the 5-year cycle, the SIT will provide space for training and discussions related to strategy and activity implementation. Local agency staff will have the opportunity to attend these spaces for their implementation and evaluation plans.

### Direct Education

Direct Education (DE) describes AZ Health Zone activities when participants are actively engaged in the learning process with an evidence-based intervention/curriculum, usually in group settings. DE should purposefully support PSE interventions in the community. The following are the expectations regarding DE implementation:

- Curriculum will be selected from the approved [AZ Health Curriculum List](#) and utilized with the appropriate audience.
- Curriculum Modification can be made with a trauma-informed lens and cultural adaptations in mind.
- DE must be taught in each community in support of the PSE activities. Example: A nutrition education curriculum is taught to a group of adults who also tour a local Farmers’ Market with SNAP-Ed staff.



## Community Engagement

Community Engagement (CE) recognizes that people in AZ Health Zone communities have inherent expertise based on their lived experience, therefore it is necessary and valuable to involve them to improve programs, influence the work, and create sustainability. To ensure sustainability in the community, expectations regarding community engagement are the following:

- A feedback loop is established with community members who are eligible for SNAP to build trust and develop relationships that can build toward meaningful levels of ongoing consultation, involvement, and/or collaboration.
- Consider who the “ideal” community is to engage, particularly those most impacted by the identified challenges or by the implementation.
- AZ Health Zone levels of CE, as defined by the [Spectrum of Public Participation](#), must be implemented with each project or activity initiated in the community. For example: active transportation is selected to support the built environment strategy; the community engagement activity must also be chosen to support work in this area.
  - CE can only be reported in SEEDS when they are in the following phases of the Spectrum of Public Participation: **consult, involve, and collaborate**.
- Although direct compensation for time spent is not allowed, reimbursement for costs associated with participation in community engagement activities is encouraged. Refer to the [Community Engagement Activities: Participation Reimbursement guidance](#).

## Eligible Population to receive AZ Health Zone Programming

The primary population for AZ Health Zone are households with children residing in communities with limited access and availability to healthy eating, active living, economic, and/or other resources.

Each local agency should implement programming in communities identified by needs, strengths, and readiness. Each local agency should choose geographical communities based on current health disparities, data, and current assets in the communities.

School-based programming grantees are strongly encouraged to work with middle and high schools.

Grantees will be required to qualify all community sites that may be impacted. Qualifying site locations must have 50% or more of the population at or below one hundred 185% Federal Poverty Level (FPL). Schools can qualify at 50% or more for free and reduced lunch, or 40% or more for the community eligibility provisions. Grantees will have opportunities to add sites throughout the grant cycle.

## Program Evaluation

LIAs follow the AZ Health Zone Evaluation Matrix using an individualized LIA Evaluation Plan each year, which is based on the National SNAP-Ed Evaluation Framework and Interpretive Guide. Evaluations must be completed in eligible communities as indicated in the LIA Evaluation Plan . Management Evaluation (ME) visits will include a review for compliance in the submission of required assessments. Exemptions from required evaluations are available if needed. Out-of-compliance LIAs may receive an ME finding.

## Multiple Agencies within a County

Duplication of programming between local agencies operating in the same county, such as providing the same interventions, community engagement, or PSE efforts in the same communities is not allowed. However, agencies that are providing programming in the same county are encouraged to work together to submit letters of support and a joint work plan (specific to a community) for the strategies/activities that will overlap.

The following are expectations, best practices, and considerations for writing joint work plans:

- Clearly describe the roles and responsibilities of both/all AZ Health Zone agencies working within the same communities.
- Clarify the use of funds and identify which agencies are responsible for specific expenditures.
- Consider each contributing agency's capacities and strengths to best maximize the use of resources in the community and how to split work.
- Clearly describe how the collaborative work of multiple AZ Health Zone agencies will benefit the community.



# Tribal Collaboration

## Tribal-Related Work and Collaboration

This Guidance and Policy Manual section aims to describe the AZ Health Zone's tribal-related program implementation and our collaboration with Tribes, tribal members, and tribal partners across the state of Arizona. The SIT and LIAs uniquely complete such work; however, combined work contributes to a stronger and more supportive SNAP-Ed program available to eligible participants, their families, and the community.

It is important to note that this work strives to benefit reservation-based tribal communities and tribal members residing off the reservation in urban locations. Additionally, as AZ Health Zone works to be a responsive program by doing so, the program needs to consider community-specific aspects that uniquely define the program audience beyond being an eligible household or participant. These considerations ensure that various components of SNAP-Ed programs are tailored for each community.

## USDA Coordination and Collaboration Requirements

AZ Health Zone recognizes its shared responsibility with USDA, ADHS, and many external state partners to uphold a respectful, trusting, and responsive working relationship with Arizona's 22 federally-recognized tribes and nations. AZ Health Zone's unique commitment to interpersonal practices and teamwork allows the program to honor tribal voice, self-governance, culture, language, history, and customs as emphasized and described in various Laws, Acts, Constitutions, Treaties, and other official commitments.

USDA Management has established a unique request for active collaboration, involvement, and consultation between AZ Health Zone and Arizona tribes and nations to strengthen reach and efficacy. The Tribal Coordination and Collaboration for SNAP-Ed Programming (Table 1) ensures and promotes appropriate and effective collaboration and partnering with tribal leadership, partners, and communities. USDA FNS has different expectations and requirements regarding State SNAP-Ed programming. The tribal coordination and collaboration outline the key distinctions specific to tribes and nations (see the [USDA FNS FY2023 SNAP-ED Guidance](#)).

It is important to note that although AZ Health Zone is obligated to remain in compliance with the USDA FNS federal guidance in its entirety, the program also has a responsibility to comply with the tribal guidance specific to tribes and nations participating in USDA SNAP-Ed programming. USDA FNS requires the SIT to fulfill and maintain compliance. AZ Health Zone LIAs are strongly encouraged to consider and apply such tribal guidance appropriately to tailor their programming efforts; the SIT will provide supportive recommendations, technical assistance, and considerations. To uphold a respectful, trusting, and responsive working relationship with Arizona's tribes and nations, SIT and LIA need to engage and honor the details outlined in Table 1.



<b>Table 1: Tribal Coordination and Collaboration for SNAP-Ed Programming</b>
Consult with Tribes and Nations about the SNAP-Ed State Plan of Operations and the SNAP-Ed Plan
Actively engage in Tribal consultations with Tribal leadership and their designees
Consider the needs and strengths of Tribal populations in conducting SNAP-Ed needs assessments
Consult and coordinate with State and local operators of Food Distribution Program on Indian Reservations (FDPIR)
Develop culturally relevant and relevant materials
Provide technical assistance and training to Tribes applying for funding

*\*Note: The above information is condensed. Please visit the [USDA FY2023 Guidance](#) document for more detailed information.*

### Action Steps for Responsiveness and Intentionality

To be a responsive program with intentional efforts, AZ Health Zone recognizes that strong collaboration, communication, and coordination help tribal leadership, community members, and/or partners. The involvement of such individuals in AZ Health Zone programming and operations (at the state and LIA level) is monumental to the program’s efforts to align with non-Western approaches, culture, and identity.

Programming and operations between Arizona tribes and AZ Health Zone require a format and foundation that is non-linear, culturally-based, and community-centered and applies a whole-person and community lens. Additionally, AZ Health Zone programming and operations must and should strive to benefit the health and well-being of tribal members. The following four actions will assist in responsive and intentional tribal coordination and collaboration (Table 1) efforts with tribal leadership, community members, partners, and/or appropriate stakeholders:

- **Consult**
  - AZ Health Zone will continue utilizing this form of communication (whether informal or formal) to ensure an open exchange of information, opinions, and thoughts regarding the SNAP-Ed programming and operations.
- **Support**
  - AZ Health Zone will continue to consider what support is being offered, needed, and/or currently available as the program strives not to reinvent but to strengthen.
- **Relate**
  - AZ Health Zone will continue to consider the relevancy of program content and materials to ensure eligible participants can relate.
- **Collaborate**
  - AZ Health Zone will continue to seek advice, support, and guidance from internal and external colleagues and partners (such as tribal liaisons, cultural department staff, tribal council, etc.) and involve appropriate individuals. AZ Health Zone recognizes that collaboration is most appropriate during the initial phases of programming and operations and should be ongoing.

## Practical Application

Since each Tribe is unique and has unique community-specific needs, programming between Arizona Tribes and AZ Health Zone requires a format and foundation that is culturally based and community-centered. Practical application of the tribal guidance in AZ Health Zone programming includes (but is not limited to):

- **Enhancements** of programming materials to be focused on culture, language, history, representation, or traditions
- **Involvement** in decision-making, planning, implementation, and design of program implementation
- **Incorporating** community and traditional knowledge and materials into programming upon approval, such as stories or traditional tools
- **Honoring** self-determining needs, expertise, and solutions as part of SNAP-Ed programming sustainability while remaining within the program guidelines
- **Reframing** values, frameworks, and systems to focus on tribal perspectives and approaches

Examples of activities and efforts that are provided and supported by SNAP-Ed LIAs in urban and rural tribal areas include (but not limited to):

- Invite Tribes and tribal partners in writing and planning of community action plans
- Recipes with traditional food(s) as ingredients
- Developing education materials in Tribal languages
- Development of food demonstrations or cooking classes of culturally relevant recipes or that incorporate cultural storytelling and knowledge
- Engaging with Indian Health Services and local health clinics to discuss and create system changes
- Develop brief interactive education interventions that foster cultural values  
Incorporate traditional gardening methods into the development, upkeep, or planning of a garden
- Work with Tribes to enhance curriculum or programming materials
- Seek guidance from certified language translators or knowledgeable community members to translate materials to tribal languages or interpret cultural concepts
- Seeking opportunities to support current or proposed tribally-operated community projects already in place in the community, such as physical activity events or construction of a new walking path

Ultimately, Tribes should be actively engaged in programming efforts and planning.

## Best Practices and Considerations

- **Prioritize Relationship Building**
  - Establish early and maintain to overcome the long standing mistrust of and reluctance towards outsider engagement and to express your positive intention(s)
- **Have Respect for and Respond to**
  - Tribal interests, cultural diversity, and customs
  - Sovereignty, tribal ownership of data and information, Tribe's self-determination and legal authority
- **Listen with the intention to learn**
  - Ask questions
  - Seek clarification
- **Have Open-Communication and Transparency**
  - Establish two-way communication early and often
  - Identify appropriate lines of communication or individuals who make decisions on behalf of the Tribe, such as Tribal government and/or leadership
  - Be transparent about the resources and programming that AZ Health Zone can offer prior to establishing any commitments of support or work. This should include providing information regarding SNAP-Ed focus, Guiding Principles, PSE change efforts, etc.
- **Familiarity and Continuity**
  - Encourage yourself and your team to learn about Tribe-specific information (history, language, pronunciations of names, issues, priorities, etc.). Support one another in this learning process.
- **Meet and Follow-up regularly**
  - Face-to-Face interactions, emails, and postal letters contribute to effective communication and relationship building
  - Provide updates on projects
- **Visibility and Representation**
  - Collaborate with the Tribe to highlight tribal representation in photos, introductions, written documents, etc., especially for those that focus solely on the Tribe
- **Exhibit Adaptability and Patience**
  - Acknowledge that working with each Tribe may entail a different process and methods
  - Understand that the distinct history of outside relationships with individuals and/or entities have had and continue to have a direct impact on the level of trust and openness of tribal members and leaders.

## Tribal Resources

[Executive Order 13175 Consultation and Coordination with Indian Tribal Governments](#)

[Office on Tribal Relations - Arizona Revised Statutes, section 41-2051\(A\)](#)

[Arizona Department of Health Services Tribal Specific Content](#)

[SAMHSA Cultural Card: A Guide to Build Cultural Awareness - American Indian and Alaska Native](#)

[Inter Tribal Council of Arizona](#)

[Urban Indian Health Institute - Indigenous Health Equity By Abigail Echo-Hawk](#)

[TEDx Talk - Building Resilient Communities: A Moral Responsibility By Nick Tilson](#)

## Our Commitment to You

The AZ Health Zone SIT is committed to ensure that LIAs have the tools, resources, and support needed to meet the requirements of:

- The inclusion of tribal perspectives
- Having engagement and communication with Tribes and tribal partners
- Implementing culturally responsive programming

To support you in such responsive efforts, the following position is available to LIAs and SIT:

**AZ Health Zone Tribal Community Specialist Position**, whose duties include:

- Assist in identifying tribal-specific needs to strengthen SNAP-Ed programming by consulting with tribal leadership, partners, community, LIAs, and the SIT team
- Provide technical assistance that helps build capacity and to address underlying needs
- Assist in ensuring cultural relevance and consideration in programming and development of program materials and activities that align with SNAP-Ed goals and guiding principles
- Provide and encourage the consideration of tribal perspectives in programming and operations
- Ensure and encourage continuous and active tribal engagement and communication between SIT and LIAs
- Ensure scheduling and completion of consultations (formal and/or informal) and informational sessions with Tribes (includes tribal leaders, communities, and partners) regarding AZ Health Zone Snap-Ed programming.
- Assist in maintaining direct contracts with Tribes interested in joining AZ Health Zone
- Collaboratively work with Tribes on reports, technical assistance, training, etc. that may be needed or related to program implementation

Ultimately, the AZ Health Zone Tribal Liaison ensures the fulfillment of USDA requirements and needs of working with Tribes and Nations in Arizona. AZ Health Zone strongly encourages seeking guidance and technical assistance from the program's Tribal Liaison and focus area specialists.

# Program Site Visits

## Policy Expectations

Local Implementing Agencies (LIAs) and subcontractors may receive several types of site visits throughout the year to support program operation, implementation and integrity.

## Why Are Site Visits Important?

The visits are done to strengthen partnerships, gain a better understanding of the programs, observe the quality of nutrition and physical activity programming, observe areas of improvement and/or expansion, provide assistance and support, and obtain feedback.

## Who Conducts Site Visits?

There are several agencies that work together with AZ Health Zone to ensure programming adheres to federal and state guidelines and requirements. These entities that will conduct site visits include:

- United States Department of Agriculture (USDA)- Food and Nutrition Service (FNS) Southwest Regional Office (SWRO)
- Arizona Department of Economic Security (ADES) - Office of Program Evaluation
- Arizona Department of Health Services (ADHS) Office of Auditing
- AZ Health Zone SIT and SET

## Site Visit Types

Types of site visits that can be performed are:

### Management Evaluations (MEs)

- Conducted by the ADES Office of Program Evaluation and performed with Local Implementing Agencies every year.
- MEs will be scheduled in advance between ADES and the LIAs. LIAs will be asked to submit possible dates for the ME to allow for coordination with a program activity.
- During the ME, ADES staff will conduct a review of management systems, staffing or financial audits, a lesson observation and potentially conduct interviews. There may be a request to visit a subcontractor's site and the LIA will be asked to facilitate this visit.



- At the end of an ME, ADES will conduct a closeout meeting to discuss the next steps and make any requests for additional information. Once the report is drafted, a copy will be sent to the LIA and SIT for review. A Review Exit meeting will then be scheduled with ADES, the LIA and SIT to discuss the drafted ME report. LIAs have the opportunity to raise questions or provide clarifying information. After the call, ADES will make any resulting edits and issue a final report to the LIA and SIT. If a corrective action plan (CAP) is required, ADES will request the LIA write CAP (template provided by DES) addressing the issues covered in the final ME report. ADES will approve and determine if the CAP has been satisfied. SIT will provide any needed technical assistance to the LIA regarding the CAP process. For more information on the ME tool, see [Appendix E](#).

### Fiscal Integrity Review

- **ADHS Office of Auditing** conducts financial audits for all AZ Health Zone LIAs. The audits are conducted on behalf of the Bureau of Nutrition and Physical Activity in accordance with applicable department policies and federal pass-through entity oversight. Audits will be performed every other year, to alternate with Management Evaluations.
- The following categories are reviewed during an audit:
  - Approved cost allocation plan
  - Accounting system
  - Expenditure allowability and accountability
  - Contractor's Expenditure Report financial reconciliations

### Pre-Management Evaluation (pre ME)

- The SIT Operations Team may schedule pre-management evaluations with LIAs in preparation of Management Evaluations or Fiscal Integrity Reviews. This could include desk reviews, lesson observations and/or in person meetings. Throughout a pre ME, suggestions for enhancements or improvements may be made. LIAs are encouraged to use this time to ask questions and to give feedback about the State Implementation Team (SIT), technical assistance, State resources, support, and services. (For example, the LIA may use this time to emphasize their program's need for a particular type of print material to be produced by AZ Health Zone, or they may have ideas for future professional development). For more information on the ME tool, see [Appendix A](#).





## Technical Assistance

- Technical assistance is intended to benefit both the state teams and LIAs and can be requested by either the LIA or the SIT/SET.
- TA can include but is not limited to the following:
  - *Training* - The LIA, SIT or SET may deliver formal training or process training relevant to programming, evaluation or operations.
  - *Meeting* - may be requested by the LIA, SIT or SET relevant to programming, evaluation or operations.
  - *Lesson Observation* - The SIT will conduct periodic observations of SNAP-Ed activities to experience the relationships in the community and have conversations about the fidelity of the curricula and administration of the program. LIAs are responsible to ensure that each educator is observed by a supervising staff at least one (1) time a year. For more information on the Lesson Observation Tool, see [Appendix B](#).
  - *Experience and Learning* – LIAs, SIT, or SET can request visits to gain a better understanding of program implementation, staff relationship building, and/or Arizona's communities
- Please reach out to the SIT/SET if you would like to have a TA visit.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy we will:

- Schedule TA visits at LIAs' request.
- Provide tools such as the ME Tool and Lesson Observation Tool.
- Provide assistance for corrective action plans.





# Local Agency Staffing

## Guidance Expectations

It remains the responsibility of each LIA participating in the AZ Health Zone program to ensure staff are qualified and have all necessary documentation available.

## Why is Staffing Important?

To ensure that nutrition education and Policy, Systems, and Environmental change (PSE) activities are of good quality and provide accurate, relevant information and interventions to the target audience, it is essential to have the input of trained and qualified staff.

## Encouraged Staffing Considerations

Each LIA is strongly encouraged to have access (on staff or on contract) to a registered dietitian and at least one person knowledgeable in physical activity guidelines. It is ideal to have trained nutrition professionals when modifying curricula and developing new materials. Depending on the LIA's Community Action Plan, experience and expertise in the following areas may be beneficial: public health, food systems, early childhood, and/or school health.

LIAs are encouraged to work closely with the SIT's focus area specialists. For more information about developing nutrition and health engagement messages and materials, see [Message and Material Development](#).

## Certified and Accredited Staff Members

The following are definitions used by the SIT pertaining to staff:

### Nutrition

Registered dietitian: Shall have a minimum of an undergraduate degree from an accredited institution\* in nutrition (dietetics, community nutrition, public health nutrition, nutrition education, human nutrition, or nutrition science), home economics or biochemistry with an emphasis in nutritional sciences, and be certified by the Commission on Dietetic Registration as a registered dietitian (RD). Previous community health experience and/or a Master's degree in a related subject are desirable.

### Physical Activity

Physical activity coordinator: Must be certified through a National Commission for Certifying Agencies (NCCA)-accredited institution and have three years of experience; or must have a Bachelor's degree in Exercise Science or related field and two years of experience; or must have a Bachelor's degree in Exercise Science or related field and have a certificate through an NCCA-accredited institution and one year of experience. The preferred candidate will have or be working towards attaining the Physical Activity and Public Health certification through the American College of Sports Medicine (an NCCA-accredited institution). To find out more about NCCA accredited institutions for fitness and wellness, visit [Credential Excellence](#).

\*U.S. Recognized Accrediting Organizations - Institutional and programmatic accrediting organizations that are or have been recognized by the Council for Higher Education Accreditation (CHEA) or the U.S. Department of Education (USDE) or both.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Designate an SIT specialist to work closely with each LIA.
- Ensure SIT specialists have experience and expertise in at least one of the following areas: Active Living, Childhood (School Health and Early Childhood Education), Community Nutrition, and Food Systems.
- Be available to answer questions, provide assistance, and consult with each other to ensure accurate and consistent guidance across all agencies.



# Contract Timeline and Financial Responsibility



## Policy Expectations

The contract start date is the date that the contract is signed by the SIT and the LIA, but no earlier than October 1 of the first grant cycle fiscal year. It is possible that a contract will not begin on October 1 if there are delays in the procurement process due to errors, there is a need for multiple revisions, there is a delay in USDA approval of the AZ Health Zone Annual Plan, or in the event that Congress does not approve the United States' federal budget in time. Timelines for individual contracts are defined on the contract's Special Terms and Conditions or Award page. AZ

Health Zone is subject to the USDA SNAP Reimbursement Structure. LIA contracts shall use the practices, procedures, and standards specified in and required by the ADHS Manual for Audits and Management Evaluations State Accounting and Auditing Procedures Manual for Arizona Department of Health Services-funded programs.

## Importance of Contract Timelines and Financial Responsibility

Understanding contract timelines and financial responsibility helps LIAs conduct SNAP-Ed programming in an allowable time frame while being eligible for federal reimbursement from USDA.

## Contract Timelines and Financial Responsibility to Administer the Program

### Contract Timelines

Monies awarded for one federal fiscal year expire in September and are not transferable to the following year. Regardless of the contract start date, the contract funding cycle end date will be September 30 of each year.

All records of the LIA must be retained for **three** years from the federal fiscal year closure. This requirement applies to all fiscal records, reports, and client information.

### Financial Responsibility

LIAs must comply with the applicable certified finance and compliance audit provisions of the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (commonly called "Uniform Guidance") 2020.

Charges can only be made after expenses have been incurred and must adhere to the guidelines for allowable/unallowable costs. Failure to adhere to these guidelines will result in federal reimbursement being withheld. Charges should be reflected within the corresponding monthly CER. All charges, should be noted in monthly general ledgers and must include notations of any changes made. Periodic checks are recommended to ensure all charges have been included. The LIA may be requested to reimburse the State for the disqualified federal reimbursement if failure to adhere to these guidelines is identified in an audit (or after the fact).

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and time you need to procure materials, contract services, and implement programming efficiently and effectively. To support you in the successful execution of this policy, we will:

- Notify LIAs of any delays in contract timelines and will be available for budget requests throughout the fiscal year.
- Notify LIAs if requests are allowable or unallowable.
- The SIT Operations Manager will provide guidance and technical support when requested and as needed.





# Amendments and Changes

## Policy Expectations

LIAs must submit all program changes to the SIT for approval. This involves both programmatic and budgetary changes, including changes to overall LIA programming, changes to Community Action Plans, and changes to the approved budget.

An amendment **requires USDA approval**, while changes only **require SIT approval**.

A programmatic change is considered a **programmatic amendment** based on the significance of changes being requested and will be determined by the SIT.



A budgetary change is considered a budgetary amendment if it meets the following criteria:

- Increases the approved total budget
- Transfers dollars between line items exceeding 10 percent of the total budget OR
- Transfers dollars from a funded line item to a non-funded line item

Mid-year amendment requests for the current fiscal year must be submitted with supporting documentation to the SIT no later than March 31, 2021.

LIAs must operate under the original/approved plan, contract, and budget until an amendment has been approved by the SIT, the ADHS Procurement Office, and USDA, if applicable.

If a LIA is submitting a change that is both a programmatic amendment and budgetary amendment, it must be clearly stated and all required information must be submitted for both.

## Why is it Important to Document Amendments and Changes?

There are certain circumstances, as well as community engagement efforts, that can prompt changes to original Community Action Plans and budgeted items. Having a process to review and approve changes (the SIT) or amendments (the USDA) helps ensure that programming and purchases continue to align with SNAP-Ed guidelines.

## How to Submit Programmatic Amendments and Changes

LIAs must discuss any proposed changes with the SIT's county lead or focus area specialists before submitting a written request via email.

The written request must include:

1. A description of the proposed changes
2. A revised Action Plan with tracked changes

Depending on the change requested it may also include:

1. A revised Community Narrative with tracked changes
2. Costs of proposed changes and possible budgetary revisions

The SIT will determine if changes will be a programmatic amendment and will coordinate with the LIA on the amendment submission to USDA.

The initial review by the SIT may take up to 14 business days. Additional time may be required for further review and discussion with the LIA.

The SIT will notify the LIA when the amendment or change is fully approved, conditionally approved (i.e., requiring further clarification or adjustments), or denied. All changes are effective only after being fully approved.

## How to Submit Budgetary Amendments

LIAs must discuss any proposed budgetary changes with the SIT's Operations Team before submitting a request.

For a budgetary amendment, LIAs must submit a written request to the SIT via email with the following:

1. A revised Budget Justification
2. A revised Budget
3. Action Plan changes if needed
4. Explanation of what is changing and why

The SIT will review and notify the LIA when the amendment is fully approved, conditionally approved (i.e., requiring further clarification or adjustments), or denied. All changes are effective only after being fully approved.

When approved, the SIT will send the contract amendment to the LIA for signature and process accordingly.

The LIA will be required to send the most current CERs to the SIT so that updates can be made to the Excel workbooks. Updated Excel workbooks will then be returned to the LIA.

## How to Submit Budgetary Changes

If a budgetary change does not meet the criteria for a budgetary amendment above, LIAs will submit a budgetary change request to the SIT Operations Team.

Please note that budgetary changes will only be considered if there is an extenuating circumstance or unforeseen change that requires a budgetary change.

Changes can fall into two categories:

1. Requesting non-budgeted items/costs for an expense not initially included in the approved annual budget
2. Requesting a movement of funds among funded line items, not to exceed 10% of the total budget.

**All budgetary change requests must be submitted and approved PRIOR to purchases.**

LIAs must provide a written request to the SIT Operations Team.

## Requesting Non-Budgeted Items/Costs

You must request ANY expense that is not specifically listed in the approved budget. The current budget template provides for grouping of items so that if a specific item is covered under that grouping, additional approval for purchase is not required. An example is a spade, which falls under the grouping of Garden Supplies, therefore, additional approval is not required. But, any item considered Garden Equipment (large or motored), does not fall under a grouped category and must be requested separately.

Provide the following in the initial email request:

1. Description of the item
2. Quantity
3. Cost
4. General description of how the item/cost will be utilized

The following additional information may be required after the original review:

1. What: Hyperlink to the item
2. Why: Description of need and what strategy or project it will support (justification)
3. Who: Description of who (staff or participants) requires the supplies. Are staff 100% SNAP-Ed funded?
4. Amount: Quoted price to include estimated taxes and shipping. Will the expense be cost shared with another funding source? If so, please indicate amounts paid for by each source.
5. Budget: Indicate where the expense (line item) was budgeted in your annual budget, if moving between AZ Health Zone budget lines. Indicate which lines you will be moving the expense to and from.
6. Budget total: As well as the providing the originally budgeted amount, provide the year-to-date total for requests for the item/cost.

Requests to increase amounts of items previously approved in the original LIA budget or through a previously approved new item request do not require additional approval.



## Requesting Movement of funds/10% Change

LIAs are able to move a total of 10% of their total budget among other funded line items in their budget. For example, the LIA may determine that funds budgeted under the Travel line item will not be expensed by the end of the fiscal year so a request is made to move those funds to the Materials line so additional curricula may be purchased.

This request must be submitted in writing (email) to SIT Operations and include the following:

1. Amount to be moved
2. Line item the funds are from
3. Line item the funds are moved to

Line items in the budget will not officially change so some line items will appear over spent and some underspent on the Contractor Expense Report (CER). SIT will provide a 10% tracking document to assist with monitoring the totals but it is the responsibility of the LIA to ensure expenditure are within the approved changed amounts. Requests to move funds must be made prior to incurring costs.

If a line item is not funded in the originally approved budget, funds cannot be moved to that line item without a formal amendment.

Keep in mind that all requests are subject to ADHS Audit and USDA determination of allowable, reasonable, and necessary. Per the FFY23 SNAP-Ed Guidance, the following questions should be considered:

- Is the good or service necessary to carry out essential functions of the program?
- Can the purchase be avoided without adversely affecting the program's operations?
- Has the agency performed an inventory of current items prior to new purchases (as may be the case with nutrition education reinforcement items (NERI))?
- Has the agency significantly deviated from established practices and policies regarding the purchase?

## Is it Always Necessary to Submit Amendments and Changes?

It is not necessary for the LIA to submit a budgetary amendment if their actual expenses are lower than the approved projected expenses.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Receive, review, and approve programmatic change requests.
- Communicate when requests for programmatic changes need more clarification.
- Communicate and coordinate with the LIA when programmatic changes are considered amendments needing approval from the USDA.
- Receive and manage budget change and amendment requests (SIT Operations Team).
- Respond to all budget requests within 5-10 business days.

# Memorandum(a) of Agreement



## Policy Expectations

It is recommended that LIAs have working agreements or Memoranda of Agreement (MOA) with all other agencies where SNAP-Ed is delivered to provide a clear understanding of the responsibilities of both parties. There is not a specific agreement or memorandum format that must be utilized, but there are specific statements that must be included.

## Why is an MOA recommended?

An MOA helps prevent a duplication of efforts, allowing each community to be enriched with a variety of PSE efforts and nutrition education opportunities.

## Documentation and MOA Requirements

MOA are not required but may be utilized by the LIA. LIAs will maintain records of all written partnership agreements.

If LIAs choose to utilize an MOA, the following statements are required:

- This MOA does not include the reimbursement of funds between the two agencies.
- Program activities do not supplant existing nutrition education programs, and where operating in conjunction with existing programs, enhance and supplement them. This applies to all activities and costs under the budget.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide a sample MOA; see Appendix J.

# Activities Development



## Policy Expectations

All SNAP-Ed activities must be implemented with a comprehensive approach utilizing PSE strategies with complementary direct education occurring within a defined community. All activities must be evidence-based and PSE interventions must be selected in the following focus areas: (a) Food Systems (b) Active Living and (c) Childhood (Early Childhood and School Health). The appropriate balance of PSE and direct education within individual communities should be defined by LIAs after assessing the community's needs. Staffing ratios for SNAP-Ed activities must be proportional and appropriate for the type of activity, the number of participants, audience ages, and learning needs.

## Importance and Purpose of Comprehensive Interventions

FNS expects SNAP agencies to use comprehensive interventions in SNAP-Ed that address multiple levels of the Social Ecological Model to reach the SNAP-Ed target audience in ways that are relevant and motivational to them. The direct nutrition education and physical activity interventions implemented should incorporate features that have shown to be effective, such as:

- Behaviorally-focused strategies
- Motivators and reinforcements that are personally relevant to the target audience
- Multiple channels of communication to convey healthier behaviors
- Approaches that allow for active personal engagement
- Intensity and duration that provide opportunities to reinforce behavior

## Activity Development Definitions

An **evidence-based approach** for nutrition education is defined as the integration of the best research evidence with the best available practice-based evidence. **Research evidence** refers to relevant rigorous research, including systematically-reviewed scientific evidence. **Practice-based evidence** refers to case studies, pilot studies, and evidence from the field on interventions that demonstrate behavior change potential. The AZ Health Zone website includes many approved interventions that meet the evidence-based criteria. For more information on how to submit resources for approval, see Submitting Interventions via the Evidence-Based Questionnaire.

**Direct education** is defined as taking place when a participant is actively engaged in the learning process with an educator and/or interactive media within an evidence-based intervention. Direct education must focus on primary prevention, be consistent with the Dietary Guidelines for Americans (DGA), the USDA Food Guidance System, and 2018 Physical Activity Guidelines for Americans. Only curricula that have been approved and are available on the AZ Health Zone website can be used for direct education single or multisession lessons.

## Activity Development Considerations and Guidelines

**Activities:** Activities that do not follow an approved evidence-based curriculum's implementation guidelines do not count as direct education. These activities are allowable, but do not meet the criteria of direct education. Sample activities include, but are not limited to, food demonstrations, games at community events, etc. For more information, see Curriculum Modification.

**Embedded Assessments:** All curriculum within the approved resources on the AZ Health Zone website that contain required embedded assessments as part of the lesson or series must be completed as part of the curriculum requirements. Information regarding embedded assessments can be found in the Direct Education section of that particular resource on the AZ Health Zone website.

**Breastfeeding:** All SNAP-Ed activities that address breastfeeding shall be planned and implemented in collaboration with the Arizona WIC Program and the State Breastfeeding Coordinator. The WIC Program should have the lead and primary role in all breastfeeding activities, with SNAP-Ed supplementing existing WIC activities.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and support you need to develop activities that meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Review, approve and/or provide technical assistance regarding curriculum modifications (see guidance above).
- Provide tools/resources, etc.
- Provide opportunities for the facilitation of training and communities of practice regarding curriculum modifications.







# Reporting Policies



# Financial Reporting



## Policy Expectations

Each LIA is required to submit monthly financial reports to the SIT Operations Team. The financial reports include the Contractor's Expenditure Report (CER) and the corresponding Staff Time Allocation Form. ADHS will not accept the use of other forms. Both forms are to be submitted electronically by the 30th of each month following the reporting period. A signed original copy of the CER must be submitted for reimbursement via mail or email with an electronic scanned copy.

The initial electronic submission can include the signed CER but if errors are identified by ADHS, the document may require new signatures.

LIAs will continue to submit monthly financial ledgers of all expenditures reflected on the corresponding monthly CER. LIAs are now also required to participate in [Subrecipient Monitoring or CER reconciliation](#). The LIA's monthly expenditures must be reviewed and cleared prior to approval of CERs for payment that month.

LIAs are also required to submit supporting documentation for all equipment (hardware and software that hold memory and/or data) to the SIT Operations Team, who will then provide it to the BNPA Finance Office for tracking.

## Why Are Monthly Financial Reports Important?

The SNAP-Ed program and subrecipients of federal funds are required to comply with the applicable State of Arizona Accounting Manual (SAAM) and Office of Management and Budget Code of Federal Regulations 2 (CFR) Part 200 (OMB).

Failure to submit required reports by the contractual due date(s) may disqualify the LIA from reimbursement.

## Contractor's Expenditure Report (CER) Form Documentation

The CER is the official form used by a LIA to document actual reimbursements each month. If there are no expenditures for a given month, the LIA will submit the CER for that month with zeroes entered in the expense column for each funded line. CERs will be submitted in chronological order; no CER will be paid before a preceding CER is received and approved.

LIAs must collect and review time documentation forms and quantify the cost of LIA activities in each form. These forms must be kept by the LIA agencies for State compliance auditing.



Each LIA will submit a CER and a Staff Time Allocation Form for each month of the program year. All LIA agencies will submit the September final Cumulative Expense Report for the period of October 1 through September 30. The final/September Cumulative Expense Report will be submitted within 60 calendar days from the end of the fiscal year (September 30). Final/September CERs are due by November 30. No extensions are allowed.

LIAs will be provided with an electronic copy of the CER and Staff Time Allocation Form workbook (Excel). The workbook provided to each LIA will contain budget information specific to their agency. Each month of the fiscal year is designated by a set of tabs in the workbook. LIAs will enter information each month, and electronically submit the workbook and a correct signed CER to the Operations Team for reimbursement.

Information on the CER reflects the budget and expenses. Reimbursement is based on the expenses reported on the CER.

Total expenses must not exceed the approved budget total, as indicated on the Price Sheet in the contract. An increase in the budget requires a formal contract amendment.

All subcontractor expenses will be reported on the Contract/Grants/Agreements line of the CER. Subcontractor expenditures should be reported in the month they are processed through the LIA's accounting system. This is approximately the month after the subcontractor submits their expense report to the LIA.

## Instructions for Completing the Staff Time Allocation Form

The following procedure is for the default Staff Time Allocation Form only (the Excel template issued by SIT staff). Some agencies have altered this sheet to function better with their accounting systems and corresponding reports. Please contact the Operations Team if you have any questions about an altered Staff Time Allocation Form or would like to explore making changes to your current reporting form. Instructions for completing the form are below.

1. Click on the appropriate tab of the workbook for the month to be reported.
2. Enter the date the CER is being submitted in the space provided.
3. The column labeled *Position Title*, **column A**, lists each position and is pre-filled with the information provided in the approved annual budget. This column is protected. Please work with the Operations Team to add or modify any position titles.
4. Enter the month's total Management Hours, **column B**, total Direct Hours, **column C**, and PTO, **column D**, for each position. The spreadsheet will automatically calculate the total hours by position, **column E**, and the total management, total direct, and PTO hours for the month.
5. The column labeled *Hourly Salary*, **column F**, lists the hourly rate for each position. This information must be entered by the LIA. Once the information is entered, it will carry forward through all of the following months' Staff Time Allocation Forms. Any changes to the hourly rate will only change the following months and will not change the hourly rates entered in previous months.
6. The column labeled *Total AZ Health Zone Salary*, **column G**, will automatically calculate by taking the "Total SNAP-Ed Hours" and multiplying it by the "Hourly Salary" for each position. This column is protected and cannot be changed.
7. The column labeled *% Fringe Benefits*, **column H**, lists the fringe benefits rate for each position. This information must be entered by the LIA. Once the information is entered, it will carry forward through all following months' Staff Time Allocation Forms. Any changes to the fringe benefits rate will only change the following months and will not change the fringe benefits rate entered in previous months.
8. The column labeled *Annual Fixed Fringe Benefits*, **column J**, lists the annual fringe costs (if applicable) for each position. This information must be entered by the LIA.
9. The column labeled *Fixed Fringe Benefits*, **column K**, will automatically calculate by taking the "Annual Fixed Fringe Benefits" and multiplying it by the total FTE (**columns L and M** added together) for each position. This column is protected and cannot be changed.
10. The column labeled *Total Fringe Benefits*, **column K**, will automatically calculate by multiplying the "% Fringe Benefits" and the "Total Salary" and adding it to the "Fixed Fringe Benefits" for each position. This column is protected and cannot be changed.
11. The remaining columns, **columns L through N**, total the Personnel/Salary Costs, Fringe Benefits Costs, and Total Costs. These columns contain formulas and are protected. These columns cannot be changed.

After the CER, including staff time allocation information, is completed/submitted electronically and provisional approval by the SIT Operations Team is received, the authorized representative for the LIA will sign on the bottom right of the form and mail or scan the signed original copy to the attention of the SIT Operations Team for final approval.

LIAs are required to submit supporting documentation for all items purchased (hardware and software) that hold memory and/or data. This documentation will be submitted monthly with the Contractor's Expenditure Report (CER) to SIT Operations. The BNPA Finance Office staff will review the documents monthly to ensure compliance and reporting of assets. For more information, see Property Asset Control.

### **Our Commitment to You**

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility that you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide an electronic copy of the CER and Staff Time Allocation Form workbook (Excel).
- Review submitted documents and provide final approval.



# Time Documentation



## Policy Expectations

Federal SNAP-Ed guidelines require that LIAs maintain a system of continuous time reporting as well as a breakdown of percentage of time allocated for SNAP-Ed administrative duties versus time spent on SNAP-Ed direct delivery services. Records must be maintained and must be signed by the end of each pay period twice a month, and include a supervisor's signature.

## Why is Time Documentation Important?

Appropriate time documentation is a necessary requirement in order to receive SNAP-Ed funding for staff.

## How to Document Time

Salaries and wages must be based on documented payroll records approved by a responsible official of the LIA. Electronic signatures are appropriate for time and effort reporting.

In cases where an employee's salary is only partially claimed (i.e., that person works on more than one grant or activity), his/her salary and fringe benefits must be documented by personnel labor activity reports (LARs) or equivalent time documentation that meets the following standards:

- Must show an after-the-fact distribution of actual activity performed by the employee
- Must account for all activities for which the employee is paid or compensated
- Must be prepared bimonthly and coincide with one or more pay periods
- Must be signed by the employee and their supervisor
- Employees devoting 100% of their time to SNAP-Ed do not need to maintain weekly time sheets; however semi-annual time and effort certification by a supervisor is required

Any budget or other planned spending costs that are only estimated by a LIA before nutrition education or Policy, Systems, and Environmental change (PSE) activities are performed do not qualify as support for charges, but may be used for interim accounting purposes, provided that:

- a. The system for establishing the estimates produces reasonable approximations of the activity actually performed.
- b. At least quarterly, comparisons of actual costs to budgeted distributions based on the monthly activity reports are made.
- c. The budget estimates or other distribution percentages are revised at least quarterly.

LIAs must also document time spent by each staff member on management/administrative activities and direct delivery of nutrition education and PSE activities to SNAP participants. Paid time off (PTO) should be documented separately from Management and/or Direct time. For instructions on how to document time, see [Financial Reporting](#). This information will be reported on a monthly basis in conjunction with the monthly CER.

- Management time is defined as time spent on tasks related to the administration of the SNAP-Ed program. These activities include: personnel supervision, payroll, traveling to and attending meetings, preparing reports and proposals, traveling to and providing staff training, and professional development activities.
- Direct delivery is defined as time spent providing nutrition education and multilevel interventions, community and public health approaches including Policy, Systems and Environmental change (PSE) efforts to SNAP-eligible participants. Examples include preparing lesson plans, traveling to and from sites to provide direct delivery services, attending meetings, preparing for meetings related to PSE work, teaching allowable nutrition education activities to SNAP-eligible persons, administering surveys or evaluation questionnaires to participants, summarizing results of nutrition education activities, ordering nutrition education materials, conducting physical activity demonstrations and promotions that include a nutrition message, providing presentations, making referrals to SNAP and the Special Supplemental Nutrition Program for Women, Infants and Children (WIC), and setting up for direct delivery nutrition education activities.
- Paid time Off (PTO) can include vacation, parental leave, disability leave, jury duty, holiday pay, or sick leave. As with all expenses, PTO is to be paid as reimbursement as it is used and cannot be paid prior to use.

## Errors and Alterations to Time Documentation Forms

All time documentation forms must be reviewed and corrected for mathematical errors that could lead to under/overclaiming staff time. Significant alterations made to time documentation records must be initialed and annotated with a reason for the alteration(s).

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and support you need to develop and share effective health messages within your communities. To support you in the successful execution of this policy, we will provide tools and more information regarding documentation of Management and Direct time. (See Appendix A: Labor Activity Report & Appendix B: Time Documentation Tip Sheet.)





# Financial Audits and Subrecipient Monitoring

## Policy Expectations

The ADHS Office of Auditing will conduct financial reviews of at least half (50 percent) of the current LIAs during the fiscal year. The Office of Auditing, in conjunction with the SIT and BNPA Finance Office, will conduct subrecipient monitoring of all LIAs every year.

It is the responsibility of each LIA to maintain accurate and verifiable records in order to support all expenses claimed under the AZ Health Zone.



At any time during the term of an AZ Health Zone contract and at any time within five years after termination of that contract, the LIAs' or any subcontractors' books and financial records shall be subject to audit by the state and, where applicable, the federal government, to the extent that the books and records relate to the performance of the AZ Health Zone contract. Financial records need to be retained longer than the three-year requirement for program records (meeting minutes, evaluation surveys, strategic plans, annual reports, contracts, MOUs, etc.). In the event of an audit, a LIA's or organization's nutrition program records must be sufficient and clear enough to support all claims.

The subrecipient monitoring or CER reconciliation process was initiated in FFY20. Processes may be revised as needed to ensure a smooth process for all parties. LIAs are required to submit all supporting documentation for expenses on the CER for a select quarter or number of months. All documents will be reviewed and cleared prior

## Why Are Audits and Monitoring Necessary?

The purpose of these reviews is to ensure program compliance. OMB 2 CFR § 200 - The Uniform Guidance (2 CFR § 200) streamlines and consolidates government requirements for receiving and using federal awards so as to reduce administrative burden and improve outcomes.

## Financial Reviews

The ADHS Office of Auditing will send a notification letter to the selected LIA approximately one month prior to the scheduled review, but can schedule unannounced audits as well. The review may look at financial activity from all financial periods not previously audited up to the most current financial period. The auditor will also send a brief questionnaire to be completed by the LIA prior to the financial review. Completion of the questionnaire will expedite the actual review process.



The LIA will have all proper fiscal and program staff available during the audit, as well as all records necessary to respond to questions. The auditor will hold an exit interview to make suggestions and comments regarding the preliminary findings of the financial review.

Upon returning to ADHS, the auditor will meet with SIT staff to discuss any findings. A formal report will be sent to the LIA within approximately two months of completion of the audit.

### Subrecipient Monitoring

The SIT, in conjunction with the Office of Internal Audit, will request LIAs to submit all supporting documentation for expenses on the CER over an initial three-month period of time. If each consecutive CER is not cleared, additional financial quarters will be added to the review process. This will be submitted at the time of the financial ledgers. Ledgers are submitted monthly with the corresponding CERs to the SIT Operations Team. The SIT will coordinate the receipt of all documents and provide them to the Office of Internal Audit for review. LIAs may be contacted by either the SIT or BNPA Finance Office staff to address any questions that arise from the reviews.

LIAs are required to submit all supporting documentation for expenses on the CER. Please see the chart below for a detailed list of supporting documentation.

<b>Supporting Documentation of Expenses</b>			
<b>Line Item</b>	Supporting Documentation Needed	<b>Applicable Manual</b>	
		State of Arizona Accounting Manual (SAAM)	Office of Management and Budget Code of Federal Regulation 2 (CFR) Part 200 (OMB)
<b>Personnel</b>	<ul style="list-style-type: none"> <li>• Staff time sheets/labor distribution and</li> <li>• Staff pay stubs or electronic pay records</li> </ul>	Topic 55 Section 05 and 15	2 CFR 200.430
<b>Fringe Benefits</b>	<ul style="list-style-type: none"> <li>• Staff pay stubs or electronic pay records</li> </ul>	Topic 55 Section 05 and 15	2 CFR 200.431
<b>Contracts/Grants/Agreement</b>	<ul style="list-style-type: none"> <li>• Paid invoice for services</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)
<b>Non-Capital Equipment Supplies</b>	<ul style="list-style-type: none"> <li>• Itemized receipts and/or paid invoice to supplier</li> <li>• Percentage being billed, if expenses are divided among the multiple programs</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)
<b>Materials</b>	<ul style="list-style-type: none"> <li>• Itemized receipts and/or paid invoice to supplier</li> <li>• Percentage being billed, if expenses are divided among the multiple programs</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)

<b>Travel</b>	<ul style="list-style-type: none"> <li>• <b>Travel reimbursement</b> which includes traveling employee's name, date(s) of travel, reason for travel, claim signed by traveler and their supervisor and</li> <li>• Itemized copies of all receipts - hotel, meals, transportation, etc.</li> <li>• <b>Mileage claims</b> that include start and end odometer readings, travel to/from, date of travel, signed by employee and supervisor.</li> <li>• Duty stations at the individual's home must include address.</li> <li>• <b>Travel to/from</b> addresses for each stop is also required for Fleet vehicles to display reasonableness of travel.</li> </ul>	Topic 50 Section 05 Section 25 Section 45 Section 55 Section 95	2 CFR 200.475
<b>Building Space</b>	<ul style="list-style-type: none"> <li>• Bill, invoice, receipt, or lease agreement and allocation breakdown</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)
<b>Maintenance</b>	<ul style="list-style-type: none"> <li>• Bill, invoice, or receipt</li> <li>• Percentage being billed, if expenses are divided among multiple programs</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)
<b>Equipment and Other Capital</b>	<ul style="list-style-type: none"> <li>• Paid invoices for service</li> </ul>	Topic 45 Section 20	2 CFR 200.302(3)
<b>Indirect</b>	<ul style="list-style-type: none"> <li>• Contract price sheet</li> <li>• RFGA Budget Worksheet</li> </ul>	Topic 70 Section 40	2 CFR 200.14 Appendix III Part 200 Appendix IV Part 200

LIAs will submit their subrecipient monitoring documentation by email to the SIT Operations Team. If you are not able to send the documentation via email due to the large file size, please notify the SIT and alternative arrangements can be made.

Follow the file naming convention: LIA Name\_AZHZ\_MonthYear\_Name of Line Item Example for personnel supporting document: Gila\_AZHZ\_December2021\_Personnel

If you have several documents associated with a line item, please add a number behind the line item. For example: Gila\_AZHZ\_December2021\_Personnel1, and Pinal\_AZHZ\_December2021\_Personnel2.

## Reconciliation Process Information

During the reconciliation process, if there are missing supporting documents or errors on the CER, you will receive an email from the SIT Operations Team requesting additional information and/or corrections. It is critical to resubmit the information as soon as possible to ensure timely reconciliation and reimbursement.

If your supporting documentation is deemed not complete by the Office of Internal Audit, you may get an opportunity to provide additional information. In the event that the documentation is not provided, the LIA will be asked to submit an additional quarter of supporting documentation.

It is required that the LIA have three consecutive months with no errors or discrepancies to complete this process. Documentation will continue to be required each month if all documentation is not provided.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Notify you of the satisfactory completion of supporting documents for the respective month (via email from the SIT Operations Team).
- Submit the CER for payment.



# Allowable and Unallowable Costs

## Policy Expectations

Allowable costs are those for which the SIT will reimburse the LIAs. To be allowable, a cost must:

1. Support an activity within the scope of SNAP-Ed and be included in an approved LIA plan.
2. Conform to federal government-wide and
3. SNAP-specific cost principles.

## Why is it Important to Determine if Costs are Allowable?

A cost that supports an activity that is outside the scope of SNAP-Ed is unallowable, even if it otherwise conforms to the federal cost principles. To be allowable, all costs charged to SNAP-Ed must be valid obligations of the LIA and must support activities described in an approved LIA SNAP-Ed plan.



## Allowable and Unallowable Cost Considerations

The diversity of SNAP nutrition education and health engagement activities makes it impossible to compile a comprehensive listing of all allowable and unallowable costs. The SIT and USDA, as needed, will make all final determinations on what activities support the delivery of SNAP-Ed. As examples, such activities may include, but are not limited to, the following:

1. Employing State agency staff, such as registered dietitians with public health training or experience or credentialed public health professionals, to plan, oversee, and/or monitor the use of SNAP-Ed funds, nutrition education, and health engagement services.
2. Providing nutrition education and health engagement interventions to SNAP participants, low-income individuals eligible to receive benefits under SNAP or other means-tested federal assistance programs, and individuals residing in communities with a significant low-income population. A person whose income is less than or equal to 185 percent of the Federal Poverty Level is income eligible for SNAP-Ed with certain exceptions.
3. Promoting and conducting physical activity with members of the SNAP-Ed population in conjunction with SNAP-Ed nutrition interventions or activities.
4. Food-related gardening and food-related gardening education for nutrition education and health engagement.
5. Breastfeeding promotion activities must be conducted in collaboration with the WIC Program.
6. Collecting information for use in providing nutrition education and health engagement activities for the SNAP-Ed audience.
7. Evaluating SNAP-Ed projects and interventions as described elsewhere in this guidance.
8. Nutrition Specific mental and/or emotional health training for SNAP-Ed staff that directly correlates with a SNAP-Ed project or intervention.

The federal cost principles identify certain criteria that an allowable cost must satisfy. These criteria include, but are not limited to, the following:

### **Reasonable Costs**

A reasonable cost is one that a reasonable, prudent person would opt to incur under the circumstances. Factors to consider in determining reasonableness include:

- Did the State agency receive a program benefit that is generally commensurate with the dollar amount incurred?
- Is the cost proportionate to costs incurred for other, comparable goods or services? What is the cost item's priority compared with competing demands on limited administrative resources?

### **Necessary Costs**

This refers to the cost item's relationship to the program's mission and objective(s). Factors to consider when determining necessity include:

- Is the cost item needed to carry out the program?
- Can the cost item be foregone without adversely impacting the program's operations?
- Will incurring the cost duplicate existing efforts?

### **Allocable Costs**

Allocation entails correlating costs with the program benefits obtained by incurring them. If a cost item benefits only SNAP-Ed, then 100 percent of it is allocable to SNAP-Ed. If a cost benefits multiple programs or activities, a portion of the cost is allocable to each. That portion must be proportionate to the benefit each program receives.

- For example, a broader audience may benefit from a nutrition education effort whose cost is otherwise allowable under SNAP-Ed. In such a case, the SIT may allow prorated costs that reflect SNAP-Ed's proportionate share of the total cost. The calculation of SNAP-Ed's share of the total cost is based on the number of likely SNAP-Ed low-income target audience that will receive the health engagement activities relative to the total population to be reached. For example, if a SNAP-Ed project will reach 100 persons and 20 of these persons are from the SNAP-Ed target audience, then 20 percent of the total costs may be counted as SNAP-Ed costs. The SIT will consider other reasonable methodologies that LIAs describe in their SNAP-Ed Plans for determining the proportion of the low-income target audience that may be reached.
- LIAs must show how prorated costs were calculated, fully describe the nature of such costs, and demonstrate the value of the proposed activity to SNAP-Ed. Since activities that target general audiences are often not designed with the needs of the SNAP-Ed target audience in mind, the State must justify how the activity is a good vehicle for reaching the SNAP-Ed audience and influencing their nutrition-related behaviors. Areas that, in general, fall outside of the Agency's "reasonable and necessary" criteria and would not be allowed include funding for infrastructure changes, like purchasing capital equipment or building sidewalks, and organized efforts to influence elected officials or lobbying for legislative/policy changes. Initiatives that include educating policymakers can be appropriate.



## Costs Requiring Prior Approval

### Expenditures for Capital Equipment

The State agency must obtain prior federal approval before procuring or requesting payment for equipment valued at more than \$5,000 per item. Review and approval of equipment acquisition is normally conducted during review of the proposed budget. Budget review should ensure that proposed equipment requests do not duplicate previous years' equipment purchases for the same project. Inventory records must be maintained for equipment that is paid for with federal funds. A physical inventory is required and the results must be reconciled with property records, at least once every two years or more often.

Allowable costs are specified in the following sources:

OMB Guidance:

- 2 CFR 200 Subpart E (Cost Principles): cost principles for State and local governments, universities and institutions of higher learning, not-for-profit organizations, etc.
- 2 CFR 200 Subpart D (Post Federal Award Requirements): administrative requirements for universities, hospitals, and not-for-profit organizations, etc.
- USDA departmental regulations:
- 2 CFR 416: administrative requirements for State and local governments;
- 2 CFR 400: administrative requirements for universities, hospitals, and not-for-profit organizations (USDA codification of 2 CFR 200)
- Program-specific guidance:
  - SNAP regulations at 7 CFR 277
  - SNAP-Ed policy memos on the SNAP-Ed Connection at <https://snaped.fns.usda.gov/policy-memorandums>

### Allowable Administrative Costs

Allowable administrative costs are operational costs of carrying out SNAP-Ed in accordance with the LIAs approved SNAP-Ed Plan. Lists of allowable and unallowable cost items as examples appear in 2 CFR 200 Subpart E, § 200.420 through §200.475. The OMB guidance states that its failure to mention a particular item of cost does not imply that the cost is either allowable or unallowable; rather, administering agencies should determine allowability on a case-by-case basis, considering the treatment or standards given in the OMB guidance for similar or related items of cost. Allowable administrative expenses include, but are not limited to:

1. **Salaries and benefits of personnel involved in SNAP-Ed and administrative support.** All staff wages, salaries, and benefits must be computed on a reasonable hourly basis commensurate with duties being performed, or the federal minimum hourly wages established by the United States Department of Labor. The wages and salaries are not necessarily commensurate with compensation that would be paid to the individual when performing duties for which he/she is credentialed, but shall relate to the task they are actually performing for SNAP-Ed.
  - Staff must record time as specified in this manual, the USDA Guidance, and the underlying regulations and OMB circulars.
2. **Office equipment, supplies, postage, and duplication costs necessary to carry out the project's objectives.**



3. **Charges for travel necessary to fulfill the approved Plan.** The travel must conform to the official State travel policy regulations. Allowable travel costs are subject to restrictions, such as the prohibition of charging commercial airfare in excess of coach or its equivalent to AZ Health Zone. Only the State rate will be reimbursed by AZ Health Zone. LIAs can reimburse staff at the agency's own travel rates but these costs must be cost shared. Other federal grants cannot be used as the additional funding source.
  - Per the travel policy, all non-State of Arizona employees are required to submit all receipts for food, lodging, and transportation (as appropriate) along with travel forms submitted for reimbursement. All reimbursement for mileage must include To/From address locations that support the reasonableness of the travel. The travel log must also be utilized with the use of fleet vehicles. Records must be available for review during Management Evaluations.
  - See the [State of Arizona Accounting Manual](#) website for more details.

**Development and production of SNAP-Ed materials when no other appropriate materials exist.**

4. **Memberships, subscriptions, and professional activities.** Costs of institution memberships in technical and professional organizations necessary to effectively implement an approved State SNAP-Ed Plan are allowable. Costs of individual memberships in such organizations for personnel that work in SNAP-Ed are **not** allowable. Professional registration or license fees paid by individuals are unallowable costs because the fees would be considered personal expenses, not institutional expenses.
5. **Lease or rental costs.**
6. **Maintenance and repair expenses.**
7. **Indirect costs.** See Indirect Costs in the Financial and Cost Policy Supplement of the [USDA Guidance](#).
8. **Cost of using publicly-owned building space.** Includes depreciation based on the building's original acquisition cost, and such building-related costs as maintenance and utilities; it must not include costs of maintenance, utilities, etc. directly if they are already charged as indirect costs.

## **Unallowable Administrative Expenses**

Unallowable administrative expenses include, but are not limited to:

- **Advertising and public relations.** Except where incurred for recruitment of staff, acquisition of material for the grant, or publishing the results or accomplishments of the grant. Costs incurred to publicize the organization, as opposed to SNAP-Ed activities, are unallowable.
- **Alcoholic beverages.**
- **Bad debts.** Includes losses represented by accounts or claims written off as uncollectible and related costs. The related costs associated with delinquent debts for which the State continues to pursue collection are allowable.
- **Contingencies.** Contributions to an emergency reserve or similar provision for events whose likelihood or magnitude cannot be forecast with certainty. These are not insurance payments, which are allowable.
- **Contributions and donations.** Usually these are political in nature.
- **Entertainment.** Costs that are primarily for amusement or social activities but there are exceptions. For example, OMB guidance cites that meals might be allowable within the context of training. Other costs here might require a "reasonable judgment" based on program purpose and why or when the activity takes place.
- **Fines and penalties.** Includes fiscal penalties, damages, and other settlements resulting from failure to comply with federal, state, tribal, local or foreign laws and regulations.

- **General government costs.** Includes costs of the Governor’s Office, the State Legislature, the Judiciary, etc. While such costs are generally unallowable, some may be charged as direct costs to a federal grant if they clearly benefit that grant. For example, if a person assigned to the Governor’s Office devotes 100 percent of his/her time to SNAP-Ed, the cost of his/her compensation may be allowable. Each situation must be judged on its own merit.
- **Goods and services for private use.**
- **Indemnification.** Payments to third parties and other losses not covered by insurance.
- **Lobbying.**
- **Losses not covered by insurance.** See Indemnification above. These costs are similar, but not the same.
- **Medical equipment.** Used in clinical health assessment.

## Other Unallowable Costs

### Under-Recovery of Costs Under Federal Grants

A shortfall in one federal grant cannot be recovered by charging it to another federal grant. This is not the same as charging two federal grants for a share of the costs of the activity if both funding agencies benefit from the activity funded. However, an allocation basis must be established for sharing the costs in proportion to the benefit each receives.

### Volunteer Services

Under 7 CFR 277.4(e), the value of volunteer services does not represent any State expenditure or outlay, is, therefore, not a program cost, and is not payable to the State agency from federal funds.

Under, 2 CFR 200 Subpart E (Cost Principles), there are some unallowable cost categories that apply to universities, in addition to those listed above:

- **Alumni Activities** (2CFR 200.424)
- **Commencement and Convocations** (2CFR 200.429)
- **Legal Fees Which Result from a Failure to Follow Federal, State, Tribal, Local or Foreign Laws:** If certain conditions are met, the federal government may allow some legal fees. (2CFR 200.441)
- **Housing and Personal Living Expenses**
- **Interest, Fund Raising, and Investment Management:** There are exceptions with prior approval (2 CFR 200.445), but if the cost is shown, it needs to be examined in light of the exceptions.
- **Any and All Political Party Expenses** (2CFR 200.450{c})
- **Scholarships and Student Aid:** There are exceptions which should be reviewed if these costs appear in the budget. (2CFR 200.466)
- **Student Activity Costs** (2CFR 200.469)

### Non-SNAP-Ed Costs

The following are examples of activities that do not qualify as SNAP-Ed and their costs are not allowable charges:

- Medical nutrition therapy
- Providing SNAP-Ed services to persons not eligible for SNAP benefits
- Clinical health assessments of the SNAP-Ed population. This activity includes obtaining clinical data on members of the SNAP-Ed target audience. Such assessments include the measurement of cholesterol, blood glucose, or iron levels. Such activities are not part of SNAP-Ed.

## Examples of Allowable and Unallowable Costs/Activities

Allowable	Unallowable
<b>Literature/Materials/Audiovisuals</b>	
<ul style="list-style-type: none"> <li>• The purchase of Food, Nutrition and Consumer Services (FNCS) nutrition education/promotion materials that address SNAP-Ed topics and are for use with or distribution to the SNAP-Ed audience.</li> <li>• The purchase of other nutrition education materials, when there are no Food and Nutrition Service or Center for Nutrition Policy and Promotion materials available that address SNAP-Ed topics and will be used with or distributed to the SNAP-Ed target audience.</li> <li>• The production of State SNAP-Ed materials, for which no other comparable materials exist that support the State’s goals and objectives for SNAP-Ed and will be used with or distributed to the SNAP-Ed audience. States are encouraged to collaborate with other FNS programs on the messages conveyed in SNAP-Ed materials and in sharing the production costs.</li> </ul>	<ul style="list-style-type: none"> <li>• Costs for any nutrition education materials that have already been charged to another federal or private program or source.</li> <li>• Any material that endorses or promotes brand name products or retail stores.</li> <li>• Manufacturer’s or store (cents off) coupons.</li> <li>• Purchase or production of written or visual material for purposes of lobbying or influencing federal, state, or local officials to pass or sign legislation or to influence the outcomes of an election, referendum, or initiative.</li> <li>• Purchase or production of written or visual nutrition education messages that is not consistent with the current DGA and MyPlate.</li> </ul>
<b>Social Marketing Campaigns</b>	
<ul style="list-style-type: none"> <li>• Local radio and television announcements of nutrition education events for the SNAP-Ed target audience.</li> <li>• Appropriate social marketing programs in which messages are delivered in areas, venues, or using communication channels where at least 50 percent of the audience is eligible for SNAP-Ed.</li> <li>• Social media, websites, and other digital content that is designed, tailored to, and predominantly promoted to the SNAP-Ed target audience.</li> </ul>	<ul style="list-style-type: none"> <li>• Social marketing campaigns that target the general population. In some instances, prorated costs based upon the number of the SNAP-Ed target audience that will be reached with the campaign may be allowed. FNS may consider alternate methods with justification.</li> <li>• Publication or dissemination of nutrition education and health engagement messages that are inconsistent with the current DGA and MyPlate.</li> <li>• Television and radio announcements/advertisements that do not include a brief message about SNAP, benefits, and how to apply.</li> </ul>

Allowable	Unallowable
<b>Equipment</b>	
<ul style="list-style-type: none"> <li>• Purchase of office equipment. A county can donate equipment and use fair market value; however, any fair market value has to be adjusted to reflect federal funding provided for the equipment. This can be determined by multiplying the fair market value times the State’s percentage share invested in the equipment.</li> <li>• Equipment shared with non-SNAP users when cost-shared with those users or used by non-SNAP users when not needed for SNAP-Ed purposes.</li> <li>• Kitchen appliances only with justification of need.</li> </ul>	<ul style="list-style-type: none"> <li>• Expenditures for equipment that exceeds prior approval thresholds. (i.e., \$5,000 per unit, unless prior approval is received).</li> <li>• Medical equipment.</li> </ul>
<b>Gardening</b>	
<ul style="list-style-type: none"> <li>• Educational supplies, curricula, and staff salaries to teach gardening concepts that reinforce the beneficial nutrition aspects of gardening.</li> <li>• Purchase of seeds, edible plants, edible pollinator plants, and small gardening tools and supplies such as fertilizer and potting soil, to assist in developing school and community gardening projects.</li> <li>• These costs should be done in partnership with other funding mechanisms to ensure sustainability of the project.</li> <li>• Staff salaries to establish and maintain community gardens (e.g., in low-income housing projects, schools, etc.) may be allowable but should be submitted to FNS for prior approval.</li> </ul>	<ul style="list-style-type: none"> <li>• Cost for the rental or purchase of garden equipment (tractors, rototiller, cultivator, etc.).</li> <li>• The purchase or rental of land or garden plots.</li> <li>• The purchase of non-edible plants and items used for non-edible pollinator gardens.</li> <li>• Create gardens whose primary purpose is to donate food into emergency food systems.</li> </ul>
<b>Membership, Subscriptions, and Professional Activity Costs</b>	
<ul style="list-style-type: none"> <li>• Cost of institutional memberships in business, technical, and professional organizations are allowable consistent with the effort to promote quality nutrition services to SNAP-eligible audiences.</li> </ul>	<ul style="list-style-type: none"> <li>• Professional registration or license fees paid by individuals would not be allowable costs since the fees would be considered personal expenses, not institutional expenses.</li> <li>• Costs of institutional memberships for nutrition personnel that work directly for SNAP-Ed projects are not allowable.</li> </ul>
<b>Food Samples, Supplies, and Provisions</b>	
<ul style="list-style-type: none"> <li>• Cost of food for recipe/taste testing purposes and cost of kitchen equipment and supplies necessary for food storage, preparation, and display of food prepared for demonstration purposes.</li> <li>• Food samples associated with nutrition education lessons.</li> </ul>	<ul style="list-style-type: none"> <li>• Ongoing snack or food service.</li> <li>• Meal-sized portions or complete meal service.</li> <li>• Cost of food provided as groceries or supplemental food.</li> </ul>

Allowable	Unallowable
<b>Participation Reimbursement for Community Engagement Activities</b>	
<ul style="list-style-type: none"> <li>• Cost of gift cards (max \$25 per gift card) to reimburse participants for incurrent costs related to participation in community engagement activities.</li> <li>• Direct reimbursement to participants for incurred costs related to participation in community engagement activities.</li> <li>• Incurred costs are personal costs, such as childcare, meals, lodging, internet costs and/or transportation.</li> </ul>	<ul style="list-style-type: none"> <li>• Paying participants for time spent on community engagement activities.</li> <li>• Purchasing meals for participants in community engagement activities.</li> <li>• Offering incentives for participation in surveys or focus groups.</li> </ul>
<b>Nutrition Education Reinforcement Materials</b>	
<ul style="list-style-type: none"> <li>• Reinforcement items of nominal value (\$5.00 or less per item) that contain a reinforcing nutrition message.</li> <li>• Reinforcement material designed for physical activity promotion that is provided in conjunction with relevant nutrition and physical activity messages.</li> </ul>	<ul style="list-style-type: none"> <li>• Reinforcement items over \$5.00.</li> <li>• Knives are not acceptable NERIs.</li> </ul>
<b>Physical Activity</b>	
<ul style="list-style-type: none"> <li>• Physical activity demonstration, promotion, and referral (based on 2018 Physical Activity Guidelines for Americans) that includes a nutrition-related message based on DGA. Allowable physical activity costs include: purchase of educational materials promoting physical activity (such as brochures, newsletters, posters, etc.) and education and promotion as part of nutrition education sessions.</li> <li>• Inexpensive physical activity equipment such as stability balls, hand weights, jump ropes, hula hoops, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Weight loss classes specific to individuals, individualized meal plans, obesity treatment programs, etc.</li> <li>• Costs incurred for health club, gym, or fitness class membership fees; large expenditure equipment (e.g., bicycles, treadmills, ellipticals, weight sets, etc.); facilities (rental or modifications); and instructors for continuing exercise classes.</li> <li>• Costs for admission fees for activities associated with physical activity (e.g., ice skating).</li> <li>• Measuring heights and weights or using self-reported heights and weights to determine BMI.</li> <li>• Classes on caloric balance.</li> </ul>



Allowable	Unallowable
<b>Nutrition Education and Health Engagement</b>	
<ul style="list-style-type: none"> <li>• Classroom setting (salaries, space, equipment, materials) for SNAP-Ed audience. The primary purpose of the class shall be to provide nutrition and health engagement education. If nutrition and health engagement education is included with other topics, only that portion of class pertaining to these topics is an allowable cost.</li> <li>• Physical activity demonstration, promotion, referral that includes a nutrition-related message based on DGA.</li> <li>• Activities that assist in advancing a nutrition education or health engagement-related community or environmental change for the low-income population.</li> <li>• The pro rate share of costs of classes that are provided in conjunction with another program, such as WIC, only if the State agency describes the method for allocating costs between the programs.</li> <li>• Breastfeeding education, promotion, and support which is coordinated with WIC and which supplements and complements WIC services, rather than duplicating or supplanting.</li> <li>• Activities where the primary objectives pertain to allowable nutrition education but brief SNAP outreach messages are shared with SNAP-Ed participants. Free SNAP information materials are available on the <a href="#">FNS outreach website</a>.</li> </ul>	<ul style="list-style-type: none"> <li>• Classes that are designed to provide case management or “life skills” training such as (but not limited to) classes on English as a second language, parenting, child development, or crisis management.</li> <li>• Medical nutrition therapy and secondary prevention interventions.</li> <li>• Weight loss classes specific to individuals, individualized meal plans, obesity treatment programs, etc.</li> <li>• Gym memberships, trainers, gym equipment, or facilities.</li> <li>• Clinical health screening (e.g., cholesterol testing, blood glucose testing, etc).</li> <li>• Distribution of nutrition education and physical activity reinforcement items costing over \$5.00 each.</li> <li>• Nutrition education costs that are charged to another federal program such as WIC, EFNEP, Head Start, etc.</li> <li>• Breastfeeding education, promotion, and support that duplicates or is provided through WIC, EFNEP, or Head Start funding.</li> <li>• Education provided to incarcerated or institutionalized persons who are not eligible for SNAP.</li> <li>• SNAP-Ed activities delivered to most able-bodied students, ages 18 through 49, enrolled in college or other institutions of higher education at least half time. For information on students that may be eligible: <a href="#">Supplemental Nutrition Assistance Program (SNAP) Student Eligibility</a></li> <li>• Activities where the primary objective(s) is (are) to conduct outreach efforts for SNAP or other programs</li> </ul>
<b>Space Allocation</b>	
<ul style="list-style-type: none"> <li>• Space allocated to SNAP-Ed and other programs under a plan whereby the method of space/cost allocation between programs is documented and the costs are tracked.</li> <li>• Space donated by local school districts, but only the cost of the space based on depreciation or use allowance.</li> </ul>	<ul style="list-style-type: none"> <li>• Commercial rental spaces cannot be used.</li> </ul>

Allowable	Unallowable
<b>Medical Nutrition Therapy</b>	
<ul style="list-style-type: none"> <li>• Allowable SNAP-Ed activities include health promotion activities and interventions aimed at primary prevention of disease designed to help SNAP-eligible persons establish and maintain physically active lifestyles and healthy eating habits.</li> </ul>	<ul style="list-style-type: none"> <li>• Medical nutrition therapy and secondary prevention interventions.</li> </ul>
<b>Breastfeeding</b>	
<ul style="list-style-type: none"> <li>• Breastfeeding education, promotion, and support which is coordinated with WIC and which supplements and complements WIC services, rather than supplanting them.</li> </ul>	<ul style="list-style-type: none"> <li>• Breastfeeding education, promotion, and support that duplicates or otherwise is provided for under other funding sources such as WIC, EFNEP, or Head Start.</li> </ul>
<b>Staff and Training Costs</b>	
<ul style="list-style-type: none"> <li>• SNAP-Ed-related training for program delivery staff.</li> <li>• Staff time spent delivering nutrition education and health engagement services to the SNAP-Ed target audience. Time must be charged at a rate commensurate with the duties being performed.</li> <li>• General briefings to community health care providers serving low-income communities about SNAP-Ed services in the community.</li> </ul>	<ul style="list-style-type: none"> <li>• The time spent by volunteers of a non-public agency (e.g., faith-based organizations, many food banks, etc.) performing SNAP-Ed-specific duties.</li> <li>• A physician's or other professional's time spent distributing nutrition flyers at health fairs when charges are based on a rate commensurate with his/her credentials as opposed to the duties he/she is performing.</li> <li>• University courses that are not relevant to the practical delivery of SNAP-Ed to the SNAP population.</li> <li>• Training or development costs of food service workers or others not directly associated with delivery of SNAP-Ed.</li> <li>• Individual-use clothing items (t-shirts) for staff.</li> </ul>
<b>Costs Associated with Other Activities</b>	
<ul style="list-style-type: none"> <li>• Reimbursement for personal costs (such as child care, meals, lodging, and transportation) for recipients of SNAP-Ed to actively participate in focus groups needs assessment and advisory groups to inform and improve SNAP-Ed effectiveness.</li> <li>• Interventions that promote the selection of healthy foods from vending machines. Participation on relevant nutrition education and health engagement-related State and local advisory panels focusing on the interests of the SNAP-Ed target audience.</li> </ul>	<ul style="list-style-type: none"> <li>• Allowable costs for focus group participants are intended to reimburse for incurred costs, NOT to provide a financial incentive for participation.</li> <li>• Organized efforts to influence elected officials and lobbying for legislative/policy changes.</li> <li>• Costs associated with surveillance or surveys of the general population that are not prorated based on the number of likely SNAP-eligible respondents (persons with incomes &lt;130% of the Federal Poverty Level/thresholds, with certain exceptions).</li> </ul>

### Costs Associated with Other Activities

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| <ul style="list-style-type: none"><li>• Costs associated with the implementation and maintenance of policy, systems, or environmental changes within the scope of SNAP-Ed.</li><li>• Off-campus SNAP-Ed event.</li><li>• Costs related to the transportation of SNAP-Ed staff to an education site.</li><li>• Cell phones may be purchased for staff who work predominantly in the field, or away from a desk location with a landline. Cell phone purchases should be limited, and efforts to share cell phones among staff only as needed for remote work are encouraged. If a cell phone is purchased for staff that works on multiple grants, a cost allocation plan for the cell phone is required. Cell phones are theft-sensitive items and should be kept under close watch. Requests for cell phones must be approved in advance by the FNS regional office.</li><li>• Tablets/iPads are to be used for program delivery purposes, such as delivering nutrition education or collecting data for evaluation. Tablets/iPads must be shared with all staff that works remotely in the field. Devices must be checked out and returned according to the non-federal entity's existing policies. Tablets/iPads are theft-sensitive items and should be kept under close watch, and reasonable security measures must be developed if participant information is collected. Requests for tablets/iPads must be approved in advance by the FNS regional office.</li><li>• A one-time purchase of a Wi-Fi hotspot to support tablet/iPad function is allowable.</li></ul> | <ul style="list-style-type: none"><li>• Costs associated with the establishment and maintenance of environmental or policy changes, such as staffing, infrastructure, equipment, space, land, construction, or supplies.</li><li>• Money, vouchers, or passes provided to SNAP-Ed recipients to offset personal costs incurred so that they may attend nutrition education classes (e.g., child care and transportation expenses).</li><li>• Child care or transportation services provided for SNAP-Ed recipients in conjunction with SNAP-Ed activities.</li><li>• Transportation costs of taking students to a SNAP-Ed event.</li><li>• Purchases of cell phones and tablets/iPads without prior approval from the FNS regional office.</li><li>• Purchases of tablets/iPads for purposes other than program delivery or data collection for evaluation.</li></ul> |
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Allowable	Unallowable
<b>Policy, Systems, and Environmental Changes</b>	
<ul style="list-style-type: none"> <li>• Consultation with partner organizations on promoting organizational policy and practice changes that support healthy food and beverages, physical activity, and reduced sedentary behavior (e.g., entertainment screen time).</li> <li>• Preparing data reports and sharing information on the nutrition and health benefits of appropriate policy, systems, and environmental changes.</li> <li>• Consultation and training with food retailers, farmers, food distributors, and farmers' market managers on increasing access to and promotion of whole grains, fruits and vegetables, and low-fat dairy.</li> <li>• Conducting environmental scans or assessments of the food and activity environments where nutrition education is provided.</li> <li>• Community forums or meetings with SNAP-Ed recipients or service providers on healthy eating and active living.</li> <li>• Point-of-purchase or point-of-decision making signage that promotes healthy food choices or physical activity.</li> <li>• Resource kits with strategies for adopting, implementing, maintaining, and evaluating policy, systems, and environmental changes.</li> <li>• Consultation with partner organizations on measures to address and reduce food waste and maximize utilization and consumption of available healthy food resources.</li> </ul>	<ul style="list-style-type: none"> <li>• Costs associated with infrastructure, construction, or other capital improvements to retail stores, sidewalks, trails, bicycle paths, or dining facilities.</li> <li>• Costs associated with refrigeration units or shelving in grocery or convenience stores.</li> <li>• Financial incentives to community partners or retailers to support environmental or policy changes.</li> <li>• Salaries for retail store staff, farmers' market managers, or food service workers for service operations.</li> <li>• License or permit fees for farmers' markets or food retailers.</li> <li>• Costs associated with infrastructure, construction, or other capital improvements to retail stores, sidewalks, trails, bicycle paths, or dining facilities.</li> <li>• Costs associated with refrigeration units or shelving in grocery or convenience stores.</li> <li>• Financial incentives to community partners or retailers to support environmental or policy changes.</li> <li>• Salaries for retail store staff, farmers' market managers, or food service workers for service operations.</li> <li>• License or permit fees for farmers' markets or food retailers.</li> </ul>

### **Our Commitment to You**

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will provide LIAs with assistance on whether an item or service is an allowable or unallowable expense.

# Program Reporting



## Policy Expectations

Program reporting will take place in the [SNAP-Ed Electronic Data System](#) (SEEDS). SEEDS is accessible via any internet browser (Google Chrome is the preferred browser) It is the responsibility of each LIA to develop internal workflows to ensure timely submission of information in SEEDS that is comprehensive, coordinated, and encompasses the work of the LIA.

## Why Do We Use SEEDS?

SEEDS ensures that AZ Health Zone captures information necessary to comply with USDA data collection requirements. The USDA requires data to be collected for the National Program Evaluation and Reporting System (N-PEARS). N-PEARS data is used to understand SNAP-Ed program outputs, such as numbers and demographics of people served by the program, methods used to reach the target audience, and the types of partners engaged in the program. SEEDS is designed for staff to capture PSE and Community Engagement work alongside DE work for a more specific look at the impact AZ Health Zone creates in Arizona. This data will be used for the state's entry in N-PEARS as well as for evaluation purposes. SEEDS is available to all SNAP-Ed-funded staff as deemed appropriate by each LIA's leadership.

## How to Use SEEDS

Detailed guidance for entering SEEDS data is located in the [SEEDS User Guide](#). User accounts are granted to individuals and provide individual access to SEEDS, yet all work will be completed and submitted as a collective unit for the LIA. The LIA should determine how to define staff roles as they relate to SEEDS.

## Strategies/Activities/Communities

Each LIA will begin by entering the proposed work of their agency based on the approved Action Plan for the current fiscal year. Strategies will be submitted to the focus area specialists at the beginning of the fiscal year for approval. If a mid-year amendment is submitted and approved, please work with your focus area specialist for approval of Action Plan changes in SEEDS. For more details, see the [Program Amendment](#) section.



## Actions

After SIT approval of Strategies/Activities/Communities, LIAs will create actions in SEEDS to document their SNAP-Ed work.

SEEDS is a real-time data system that incorporates deadlines based on the current date and the trigger date of an action. Data reporting for actions must be completed within 30 days of the action/trigger date. LIA admins are able to edit up to 60 days after the trigger date.

Required assessments based on the Arizona SNAP-Ed Evaluation Framework for the fiscal year will also be documented in SEEDS. When a cover sheet is required, the action must be entered and completed in SEEDS to obtain the proper cover sheet for submission to SET.

## Partnerships

LIAs are required to document external partnerships that have been formed for their SNAP-Ed work. Partnership reporting will be open throughout the year and can be created and updated at any time within the fiscal year.

## Implementation Stage

To coincide with USDA reporting requirements, LIAs are required to identify the Implementation Stage for each activity at the site level. This will be completed biannually on April 30 and September 30. Initially (for April 30), you will indicate the stage, but for the year-end updates will only be required if there was a change to your Implementation Stage.

## Reporting

LIA admins are able to extract automated reports from SEEDS for internal use. More information and instructions for downloading reports is included in the [SEEDS Manual](#).

## Important SEEDS Deadlines

The LIA's SEEDS account is set up to reflect the Community Action Plan and planned approach each fiscal year. All work must be reported in SEEDS within 30 days. Each fiscal year, all work must be submitted by September 30.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide LIAs with assistance from the dedicated SIT staff member who leads SEEDS efforts (your AZ Health Zone local agency liaison).
- Hold one-on-one meetings with individual users for training and/or troubleshooting, and be available for questions via telephone and email as needed (your AZ Health Zone local agency liaison).
- Coordinate yearly SEEDS trainings and make the recordings available for future reference.
- Create and maintain an updated SEEDS User Guide.

# Program Evaluation



## Policy Expectations

At the start of each program year in partnership with SET, LIAs will identify which evaluations they plan to complete based on their Community Action Plans and using the LIA Evaluation Plan template.

Relevant LIA staff must attend trainings to become certified to administer each evaluation assessment in their plans. Each training will be available either live in person, live via webinar, and/or through a link to a recorded webinar recording. A Proctor Guide is also available for each assessment with the information that is needed to complete that evaluation. After training, LIAs must pass a quiz to become a certified proctor. LIA staff who have completed the training AND become a certified proctor can administer that evaluation assessment in their community.

A description of each evaluation, training resources, and Proctor Guides are available at the [AZ Health Zone Evaluation](#) website. LIA staff can access evaluation training materials using a login and password. New staff can create a [new account](#) here, and new registrations will be approved by the SET webmaster within one to two business days in most cases.

Most evaluation submissions include a cover sheet. Cover sheets are generated through the Assessment action in SEEDS for the relevant Strategy and Activity. In a few cases, cover sheets are not required. This information will be provided in the evaluation trainings. You will also be prompted to select the correct option when entering Evaluation actions in SEEDS. For further guidance, consult the SEEDS User Guide.

LIAs shall complete the evaluations identified in their LIA Evaluation Plans by the tailored deadlines identified together with their SET liaison. Deadlines are individualized for each LIA's implementation and evaluation window, and will be developed with each LIA annual evaluation plan. LIAs are also expected to complete follow-up evaluation assessments in a community where a baseline evaluation was conducted, even if they have transitioned away from providing programming in that community.

### **Why is Evaluation Necessary?**

Evaluation is a federal requirement by USDA. The AZ Health Zone's evaluations collect information about the PSE activities, characteristics, and outcomes of SNAP-Ed communities, as well as the health-related knowledge, attitudes, and/or behaviors of participants.

The AZ Health Zone primarily implements evaluations that are quantitative assessments and selection is tailored to each LIA's activities and timelines. The assessments collect data in a systematic way to measure changes over time in SNAP-Ed communities that may be related to the community- or individual-level interventions that your program is implementing. For this reason, it is important for evaluations to be consistently implemented across time. The outcomes measured by AZ Health Zone are specific to AZ Health Zone's Evaluation Framework (Appendix D) in alignment with the National SNAP-Ed Evaluation Framework.

### **How to Complete Evaluations**

1. LIAs will use their Community Action Plans at the start of each year to identify which evaluations must be completed.
2. All staff who will complete a specific evaluation must attend the annual training.
3. Managers should also attend evaluation trainings to be aware of the requirements needed to support evaluation activities:
  - a. Managers should track their teams' evaluation submissions throughout the year via internal record keeping, in order to ensure that their staff completes all requirements by the deadlines
  - b. Managers should ensure proper submission of assessments through SEEDS and understand how to access and complete cover sheets.
  - a. Managers should regularly review their program's LIA Evaluation Plan and communicate with their SET liaison about any modifications needed during the year.

### **Exemption Requests and Modifying Evaluation Plans**

If the evaluation circumstances change in your program or communities, you may modify your LIA Evaluation Plan by contacting your SET liaison about filing an exemption by September 1 of each year. No exemptions can be filed after September 1 of each year. LIA staff and managers are encouraged to regularly review program plans together with their LIA Evaluation Plans and identify any potential changes needed.

## Our Commitment to You

Each LIA has a designated SET liaison. This evaluator learns your implementation plans each year and how your program and structure work in order to support you in successfully completing your AZ Health Zone evaluation requirements. Your SET liaison will proactively communicate throughout the year about things such as:

- How and when to complete your LIA Evaluation Plan (including which evaluations are required and the associated trainings)
- Any changes to planned SET evaluation trainings or other requirements
- How to work through a specific evaluation circumstance in your community
- How to use your evaluation findings to inform program planning and implementation

Your program will also receive evaluation summary reports with the results of the evaluations that your team has completed. These reports are sent out by SET within 4-6 weeks of PSE evaluation assessment submission, or annual for individual level evaluations (e.g. the KAN-Q assessment and adult direct education surveys). In addition, your program's unanalyzed or "raw" data results for each assessment are available by request each January. More information and resources are available at the [AZ Health Zone Evaluation website](#).

# Semi Annual Report Narrative

## Policy Expectations

At two points during the fiscal year, at mid-year (due date April 15, reflecting October-March) and year-end (due date September 30, reflecting April-September), LIA staff will complete a semi-annual report narrative (SARN) using the template provided by the State Implementation and Evaluation Teams (SIT and SET). The SARN is a written document which expands upon the LIA's reporting in SEEDS, highlighting the LIA's most important PSE accomplishments



for each relevant focus area over the past six months, as well as PSE-supporting actions, persistent challenges, tribal community work and (optionally) success stories and challenges related to the direct education of adults and youth. A SARN template is completed for each community in which the LIA has a Community Action Plan. Although a single person may write the SARN, it is encouraged for larger agencies to have multiple staff members participate in SARN writing to provide an in-depth detail about key PSE accomplishments.

To support SARN writing, all LIA staff involved in the writing process must take a SARN certification training and quiz, located on the State Evaluation Team (SET) website.

## Why is the SARN Important?

As with AZ Health Zone's other evaluations, the SARN is part of collecting information about the PSE work and outcomes in your communities, as well as the knowledge, attitudes and/or behaviors of participants. The SARN allows a space for LIA staff to provide narrative updates about key changes made and challenges faced in their communities, in the LIA staff's (or sometimes the participants') own words. The SARN helps the State Teams (SIT and SET) understand progress in AZ Health Zones's focal communities and provide additional training or technical assistance as needed or requested by LIA staff.

## Additional SARN Components

The following guidelines describe what to expect in the report template.

1. **Reporting Period:** *Included in the title of template.*
2. **Community:** *Select the community for which you are reporting.*
3. **Name of Person Completing Report:** *Provide the name of the person(s) responsible for completing the SARN.*
4. **Instructions:** *A brief reminder on how to complete the report, including definitions and examples of both PSE accomplishments and supporting actions.*



## Other SARN Details

LIAs are also encouraged to optionally submit supplemental materials with the SARN, such as photos (with photo release forms completed by LIA staff, as appropriate, and stored at your site), newspaper articles, or video clips related to the narrative. LIAs are welcome to submit information on internal evaluations conducted within their agency to improve program implementation. Please note that before doing an internal evaluation using an AZ Health Zone statewide tool, reach out to SET for approval to use the tool internally. There is no specific page limit (upper or lower) for SARNs, but LIA staff should aim to present their updates concisely and without copying and pasting sentences or paragraphs into multiple areas of the SARN, or multiple communities' SARNs. More SARN information and resources are available at the AZ Health Zone Evaluation website under Trainings.

## Our Commitment to You

SARN templates will be released by the State Team in a timely manner to allow LIA staff enough time to complete these narratives. Changes to SARN templates, other than very minor adjustments, will be accompanied by training directed to LIA staff through the AZ Health Zone Training Calendar or through AZ Health Zone subcommittees. New templates and an invitation to any related training will also be published in the AZ Health Zone biweekly email newsletter. Each LIA also has an SET liaison who can answer questions about SARN and other AZ Health Zone statewide evaluations.





# Program Implementation Policies





# Local Implementing Agencies and Subcontractors



## Policy Expectations

The State SNAP agency (ADES) is accountable for the content of the SNAP-Ed State Plan and, in partnership with the State Implementation Team (SIT), provides oversight of all Local Implementing Agencies (LIAs). Each LIA is responsible for creating and implementing an approved health engagement action plan for their service area(s).

Should the LIA elect to use subcontractors, LIAs accept full responsibility for subcontractor activities and compliance. All contracted services must be awarded through a competitive procurement process. LIAs may conduct their own competitive procurements, or may use county/state/university contracts which were awarded competitively.

## LIA and Subcontractor Roles

Through policy, systems, and environmental (PSE) changes and approved nutrition education, each Local Implementing Agency and subcontractor upholds the goals and principles of AZ Health Zone at the community and individual levels.

## LIA and Subcontractor Responsibilities

LIAs and subcontractors must:

- Adhere to the contract terms and conditions found in RFGA2020-01. Follow all guidance and policies found in the AZ Health Zone Guidance and Policy Manual.
- Comply with all applicable federal laws, rules, and regulations, including civil rights and Office of Management and Budget (OMB) regulations governing cost issues.
- Ensure the reporting and fiscal information provided to the SIT is accurate.
- Meet USDA-FNS fiscal record keeping and reporting requirements.

LIAs (not subcontractors) are responsible for:

- Providing orientation to new staff on program responsibilities, regulations, and requirements. LIAs may request in-service training for staff from the SIT.
- Perform Management Evaluations on subcontractors at least one time per year. This must include a fiscal and programmatic review. LIAs will utilize the ME tool (Appendix E). If LIAs would like to use a different tool, LIAs need to send it to the SIT Operations Manager for approval before use.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and support you need to execute your Action Plans within your communities and provide oversight of subcontractors when and where applicable. To support you in the successful execution of this policy, we will:

- Provide in-service training for staff at LIAs' request.
- Provide technical assistance and relevant professional development opportunities throughout the year in order to support LIAs in their work. (Contact your county's SIT specialist for assistance.)
- The SIT Operations Team would like to work closely with you to conduct your annual Management Evaluation (this can be by conversation or attending your first visit).
- Provide the Management Evaluation Tool that can be utilized for your review.



# Coordination and Collaboration



## Policy Expectations

In an effort to maximize SNAP-Ed impact, LIAs are expected to coordinate their SNAP-Ed activities with other publicly- or privately-funded health promotion or nutrition improvement strategies, particularly those implemented by other FNS nutrition assistance programs and initiatives such as WIC and Child Nutrition Programs.

## Why is Coordination and Collaboration Important?

The effectiveness of nutrition and physical activity programs that promote equitable health engagement practices can be greatly enhanced through cross-program collaboration and coordination with others interested in promoting consistent and repeated messages. By working together, especially with other USDA FNS programs, uniform messages can reinforce and amplify program efforts. Additionally, SNAP-Ed's collaborative efforts reduce the likelihood of duplication of effort and align SNAP-Ed's strategies with current public health practices for health promotion and disease prevention.

## Documenting Coordination and Collaboration Guidance

Documentation and descriptions of coordination efforts should be identified within LIA Community Action Plans. LIAs must continue to show in their SNAP-Ed Action Plans that the funding received from the SIT will remain under the administrative control of the LIA as they coordinate their activities with other organizations. Documentation of coordination efforts must:

- Describe the relationship between the LIA and other organizations with which it plans to coordinate provision of services
- Be formalized through letters of support or commitment
- Be available for inspection upon request, when the partnership involves an exchange of or use of funds to support programming (i.e., copies of contracts and MOAs)

Coordinating with...	Documentation Required	Documentation Recommended
LIAs in the same county	☑	
Exchange or use of funds	☑	
Other FNS programs		☑
Other public or private orgs		☑
Individuals, residents		☑

Letter of support combined action plan, list, etc.

Contract



## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and support you need to establish and maintain collaborative relationships with other FNS partners in your communities. To support you in the successful execution of this policy, we will:

- Review and provide feedback on Action Plans and partnership agreements.
- Provide training opportunities and facilitate communities of practice regarding coordination and collaboration with community partners.



# Trainings, Meetings, and Professional Development

## Policy Expectations

The SIT will provide trainings, meetings, and professional development (PD) opportunities for LIAs throughout the year. Some of the trainings or events are optional and others are mandatory. LIAs are encouraged to participate in the committees and working groups as well.

## Why Are These Opportunities Important?

Attending trainings, meetings, and professional development opportunities provides the SIT, SET, and LIAs with necessary skills and information to implement SNAP-Ed programming and evaluation.



## Mandatory Trainings, Meetings, and PD

LIAs are required to have at least one person per program attend each of the required meetings:

- Annual Guidance and Policy Training
- Annual Conference
- Biannual Calls
- Evaluation trainings for relevant staff administering assessments, as indicated in your annual LIA Evaluation Plan.

All staff are required to complete:

- Civil Rights Training (annually)
- Food Demonstration Training (if demos are part of the LIA's Action Plan)
- Trauma Basics and the Relationship to Nourishment

## Descriptions

### Annual Guidance and Policy Training

The annual Guidance and Policy training will be held near the beginning of the fiscal year. It is important for both the program staff and financial staff to attend this training, as it outlines all of the Reporting (Fiscal and Program) as well as the Program Implementation policies and procedures of the AZ Health Zone. Failure to implement new guidance/regulations provided during training may result in denial of payments for unallowable activities identified during a site visit or an audit. Travel expenses (e.g., travel time, per diem, etc.) to attend these trainings is an allowable expense and must be part of LIAs' approved budgets. All travel expenses must follow the [State of Arizona Accounting Manual](#) (SAAM) guidelines for travel.

## **AZ Health Zone Annual Conference**

The conference is held once a year. Agendas will be available online. LIAs are required to send at least one person from their program to the entire meeting, as the meetings provide updates on ADHS/AZ Health Zone activities and campaigns. Travel expenses (e.g., travel time, per diem, etc.) are allowable expenses and must be part of LIAs' approved budgets. All travel expenses must follow the [State of Arizona Accounting Manual](#) (SAAM) guidelines for travel.

## **Food Demonstration Training**

The SIT provides a minimum of one food demonstration training each fiscal year. Each LIA is required to attend if food demonstrations are part of their approved Action Plans. Each person who will be providing food demonstrations should complete food demonstration training before their first food demonstration. Attendees will be instructed on correct methods for planning food demonstrations for either an adult or child audience. Information and techniques will be shared, along with hands-on experience for food preparation and presentation. More information regarding implementation of a food demonstration can be found in [Food Demonstrations](#). Travel expenses (e.g., travel time, per diem, etc.) are allowable expenses and must be part of LIAs' approved budgets. All travel expenses must follow the [State of Arizona Accounting Manual](#) (SAAM) guidelines for travel.

Food demonstration refresher training must be completed every five years after taking the initial food demonstration training. This will be completed through the [AZ Health Zone Food Demonstration Training](#) resource. Complete the survey at the end of the training and maintain it for your staff training records.

## **Civil Rights Training**

Training must be completed **annually** and records must be maintained by the LIA for all AZ Health Zone staff. MEs will include a review of personnel records to verify compliance with this policy. Please see the [Civil Rights](#) policy for further details.

## **Trauma Basics and the Relationship to Nourishment**

This 90-minute interactive webinar will introduce how trauma and adversity impact nutritional health, eating habits, and our relationship to food. Learn about the research and frameworks behind the model for Trauma-Informed Nutrition Security. Please reach out to your SIT county lead for the registration code to take the course for free.

## **Committee Meetings**

The SIT coordinates committee meetings, such as Food Systems, Active Living, Childhood, Reporting and Policy, and Direct Education committees. These groups provide an opportunity to identify best practices, effective nutrition and physical activity resources, and opportunities to learn new public health approaches. Committees will be held in Phoenix and provided virtually.

## Out of state Conference/Professional Development

Requires USDA approval, only 4 individuals per state. Provide a description of how attending this conference will tie back to your community action plans. Email the following information to SIT.

USDA Required info:

- Conference Name (link):
- Dates & Location
- Justify the purpose of the travel request
- Describe how attendance is necessary to achieve SNAP-Ed program goals and objectives and how the travel request supports the State's SNAP-Ed goals and objectives
- Demonstrate how the information will be disseminated to in-state educators, collaborators, and SNAP office staff
- Number of staff attending
- Identify and justify the number and type of staff making the travel
- Budget (indicate if funds have already been allocated for travel or if you'll need to move funds and then provide an estimate of costs. A total of costs and broken down by flights, lodging and meals/incidentals)

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Coordinate the above trainings, meetings, and PD opportunities throughout the year.
- Notify LIAs if a training, meeting, or PD is able to be recorded, or if notes will be distributed in post.
- Provide a [civil rights training](#) that is available on the AZ Health Zone website for LIAs that do not have an established training of their own.
- Provide food demonstration training annually and online refresher training.
- Provide the access code to the Trauma Basics and the Relationship to Nourishment trainings by Leah's Pantry.



# Civil Rights Compliance



## Policy Expectations

The SIT, SET, LIAs, and subcontractors must comply with all applicable federal laws, rules, and regulations including civil rights and the OMB regulations. AZ Health Zone staff, including any personnel receiving any amount of USDA funding, must complete annual civil rights training. Records of civil rights training must be maintained. Nondiscrimination posters must be displayed.

## Why is Civil Rights Training Important?

Civil rights are the rights of citizens to political and social freedom and equality. Throughout US history, many groups of people have not been treated equally and have had to fight for their civil rights. Protecting the civil rights of our participants is an important part of what we do. By complying with civil rights laws, we assist in preventing and correcting discrimination against people in protected classes. Training is required so people involved in all levels of administration of programs that receive federal financial assistance understand civil rights-related laws, regulations, procedures, and directives. Posters must be displayed so participants are aware of civil rights protections and procedures for filing a discrimination complaint.



## How to Comply with Civil Rights Laws

All AZ Health Zone staff must complete civil rights training annually. If a LIA or subcontractor does not have their own established civil rights training program, there is an existing civil rights training available for use on the [AZ Health Zone website](#). Specific subject matter must include, but not be limited to: 1) Collection and use of data 2) Effective public notification systems 3) Complaint procedures 4) Compliance review techniques 5) Resolution of noncompliance 6) Requirements for reasonable accommodation of persons with disabilities 7) Requirements for language assistance 8) Conflict resolution 9) Customer service.

Records of civil rights training must be maintained by the LIA for all AZ Health Zone staff. Management Evaluations will include a review of personnel records to verify compliance with this policy. LIAs must review personnel records of all subcontractors during site visits in order to ensure that subcontractors have fulfilled the training requirement.

Nondiscrimination posters (“And Justice for All,” version 475-B) **must be displayed whenever and wherever AZ Health Zone services/education/interventions are provided including, but not limited to, agency office buildings.** Posters must be displayed in the 11” width and 17” height size. **A digital copy of the poster may be used for virtual settings but may not be printed or displayed.** Hard copies of the “And Justice for All” version 475-B posters may be ordered on the AZ Health Zone website. Multiple languages of the And Justice for All posters are available for download on the USDA [website](#). These posters are available for download/print (regular print size) but must be posted WITH the hard copy English poster.

## Approved Civil Rights Training Options

LIAs may choose to use their own established civil rights training program or use the civil rights training available on the AZ Health Zone website.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Make [civil rights training](#) and nondiscrimination posters available. Hard copies of the “And Justice for All” version 475-B posters may be ordered on the AZ Health Zone website.
- Provide a [digital copy](#) of the poster for use in virtual settings.
- Provide accurate and appropriate resources for additional USDA guidance and for obtaining posters in languages other than English.

# Fingerprinting Clearance Requirements

## Policy Expectations

All LIAs are responsible for ensuring compliance with the fingerprinting requirement, as required by [A.R.S § 46-141\\*](#) and this policy.

All staff (including independent contractors, subcontractors, volunteers, and other agents) that provide direct services to **juveniles or vulnerable adults** are required to obtain and possess a valid Level One Fingerprinting Clearance Card.



Employees awaiting approval of their clearance card will not have contact with juveniles or vulnerable adults without direct supervision, monitoring and oversight by their supervisor or their designee until they are issued an approved Level One Fingerprint Clearance Card.

## Why is Fingerprint Clearance Important?

Arizona Revised Statute [A.R.S § 46-141](#) requires contractors of the Department of Economic Security to be fingerprinted.

*A. Each license granted by the Department of Economic Security or the Department of Child Safety and each contract entered into between the Department of Economic Security or the Department of Child Safety and any contract provider for the provision of services to juveniles or vulnerable adults shall provide that, as a condition of employment, personnel who are employed by the licensee or contractor, whether paid or not, and who are required or allowed to provide services directly to juveniles or vulnerable adults shall have a valid Fingerprint Clearance Card issued pursuant to section 41-1758.07 or shall apply for a Fingerprint Clearance Card within seven working days of employment.*

The AZ Health Zone would like to ensure the safety of vulnerable adults and children in Arizona when agency staff have direct contact with these populations.

## How to Obtain a Fingerprint Clearance Card

A Fingerprint Clearance Card is a card issued by the Department of Public Safety (DPS) to persons who, through a fingerprint background check, are found to be qualified for a clearance card or to qualify for a good cause exception. The [Arizona Department of Public Safety](#) (DPS) website provides detailed information on fingerprinting locations and requirements.

Complete instructions for obtaining fingerprint clearance requests are per the [Arizona Department of Public Safety](#) (DPS) website.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Approve/allow budget requests to obtain fingerprint clearance cards as a SNAP-Ed cost.
- Provide assistance with adding this cost to your budget if not originally budgeted. Reference the Amendments and Changes policy or contact the SIT Operations Team for more information.



# Qualifying Sites

## Policy Expectations

The Food and Nutrition Act of 2008 indicates that nutrition education activities should be directed to persons eligible for SNAP. The population that is eligible for SNAP-Ed is SNAP participants and individuals with low access to resources who are eligible to receive SNAP benefits or other means-tested federal assistance.



## Why is it Important to Provide Services at Qualified Sites?

It is a USDA requirement that SNAP-Ed participants include individuals residing in communities with a significant (50 percent or greater) low-income population (at or below 185 percent of the Federal Poverty Level {FPL}).

Certain settings offer a high likelihood of reaching individuals who are eligible for SNAP-Ed and are appropriate locations for SNAP-Ed delivery. Such venues include, but are not limited to, SNAP or Temporary Assistance for Needy Families (TANF) offices, public housing sites, food banks, and job readiness or training programs for SNAP/TANF recipients.

## Qualifying Sites

LIAs may deliver SNAP-Ed to the target population through other venues if the audience meets the general low-income standard (> 50 percent of persons have household incomes of <185 percent of the Federal Poverty Level). Examples of such venues include schools, child care centers, Summer Food Service Program sites, WIC clinics, community centers, and grocery stores.

For venues other than those previously described, LIAs must prorate SNAP-Ed's share of the total cost based on the estimated number of attendees who are in the SNAP-Ed target audience that may receive SNAP-Ed.

All LIAs shall first qualify a site based on instructions provided in the Site Qualifying Data Instructions below. New Qualifying Site Requests are completed in SEEDS whenever LIAs wish to add a site to a project. Documentation of low income must be provided to qualify all sites where activities will be provided.

Low-income documentation can be provided through a number of sources; for example, American Community Survey (ACS or Census) data, CACFP (Child and Adult Care Food Program), a NSLP (National School Lunch Program) Report and/or participation in other eligible programs. Details for obtaining low-income documentation are provided below and on the AZ Health Zone website.



All new site requests are completed in SEEDS and are reviewed and approved by the SIT. Detailed guidance for entering new site requests in SEEDS is located in the SEEDS User Guide. The initial review by the SIT may take 7 to 10 business days. Additional time may be required for further review and discussion with the LIA. Once approved, the LIA is notified and the new site can then be mapped to strategies and activities within SEEDS.

**Sites must align with the LIA's communities and submitted action plans. When providing a site request, include the strategy and activity that will occur at the site.**

Sites must be qualified using a third-party data source. You may not ask individuals for personal income data to determine whether the target audience is low income. Public disclosure of SNAP participation is not allowed by USDA.

### **Examples of Data Sources Used to Qualify Sites Include (but are not limited to):**

- **Census - ACS Data:** Provides the percentage of population at or below 185 percent of the Federal Poverty Level.
- **Child and Adult Care Food Program (CACFP) Mapper:** Provides the percentage of population at or below 185 percent of the Federal Poverty Level.
- **National School Lunch Program (NSLP) Report:** The USDA Income Guidelines for reduced-price meals are equal to 185 percent of the Federal Poverty Level. Therefore, if 50 percent or more of the students at that particular school qualify for free or reduced-price meals, the school is eligible to receive SNAP-Ed.
- **Community Eligibility Provision (CEP):** The CEP provides an alternative to household applications for free and reduced-price meals in local educational agencies (LEAs) and schools in high-poverty areas. To be eligible, LEAs and/or schools must:
  - meet a minimum level (25 percent) of identified students for free meals in the year prior to implementing the CEP;
  - agree to serve free lunches and breakfasts to all students;
  - not collect free and reduced-price applications from households in participating schools; and
  - agree to cover with non-federal funds any costs of providing free meals to all students above amounts provided in federal assistance.

These schools would be eligible for SNAP-Ed. SNAP-Ed providers implementing this targeting strategy should consider the resource and staffing limitations inherent in providing SNAP-Ed at all eligible schools.

- **Participation in other eligible programs (e.g., CSFP, SFSP, Head Start, SNAP, WIC, SSI, TANF, AHCCCS, FINI, etc.):** For example, a DES office would qualify based on SNAP participation.
- **Worksite Wellness:** A worksite would qualify for participation in the Worksite Wellness Program if 50 percent or more of its employees are paid an hourly wage less than or equal to \$24.68; this equates to no more than 185 percent of the FPL for FFY23 for a household size of four. Arizona worksites that typically qualify using this method include agricultural, hospitality, retail, etc. Worksites would be required to provide documentation verifying the site's eligibility using this method.



## Alternative Delivery Site Requests

LIAs may submit project plans for approval that include alternate delivery sites for SNAP-Ed activities and interventions that do not meet the general low-income standard described above. The plans must propose and describe reasonable methodology that the LIA will use to determine the proportion of the target audience that may be reached. Alternative delivery site requests are reviewed by SIT and must be approved by USDA.

## Steps to Qualifying a Site Using United States Census Bureau Data

1. To search for the [census tract](#) by address. Your screen will look like this:



The screenshot shows the United States Census Bureau website interface. The navigation bar includes links for TOPICS, GEOGRAPHY, LIBRARY, DATA, SURVEYS/PROGRAMS, NEWSROOM, and ABOUT US. The main content area is divided into two sections: "FIND LOCATIONS USING..." and "FIND GEOGRAPHIES USING...". The "FIND GEOGRAPHIES USING..." section is active, and the "Address" option is highlighted with a black arrow. The "Find Address Results" form is displayed with the following fields: Street, City, State, Zip, Benchmark (set to Public\_AR\_Current), and Vintage (set to Current\_Current). Red arrows point to each of these fields. A green arrow points to the "FIND" button.

2. Under "Find Geographies Using..." Option, click Address (see black arrow above).
3. Enter the street address, city, state and zip. For Benchmark, select Public\_AR\_Current. For Vintage, select Current\_Current (see red arrows above).
4. Click FIND (see green arrow above). Your screen will look like this:



The screenshot shows the "Find Address Results" form with the following input fields filled: Street: 150 N 18 Avenue, City: Phoenix, State: AZ, Zip: 85007, Benchmark: Public\_AR\_Current, and Vintage: Current\_Current. The "FIND" button is visible below the fields. Below the form, the input details and the matched address are displayed:

Input:  
Street: 150 N 18 Avenue City: Phoenix State: AZ Zip: 85007  
Benchmark: Public\_AR\_Current (E)  
Vintage: Current\_Current (E)  
Matched Address: 150 N 18TH AVE, PHOENIX, AZ, 85007

Scroll down to locate the census tract number. In this example, the census tract number is 114301 (see red arrow below).



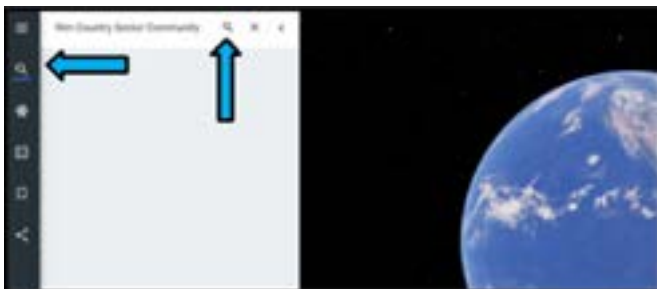
5. Write down the census tract number.
6. If you do not have a physical address, census tract numbers can also be identified utilizing latitude and longitude. There are various online tools that can determine the latitude and longitude of a location.

### Online Tools for Determining Latitude and Longitude

Go to [Google Earth](#) click Launch Earth in Chrome (see blue arrow below).



Click the search icon (magnifying glass) and type the name, city, and state that you are searching for in the search box.



Click the magnifying glass next to the search box to start the search.

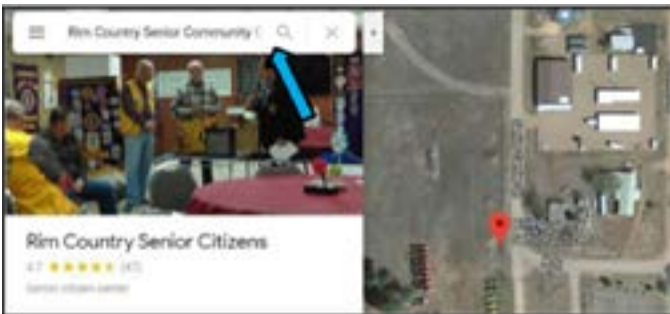


Your location is now displayed on the map. Place your cursor on the red map location pin. The latitude and longitude are shown at the bottom of the map. If Google Earth cannot find the location by name, zoom in on the area of the map for your site, find the site, place your cursor on the site and click; the latitude and longitude will be displayed at the bottom of the map.

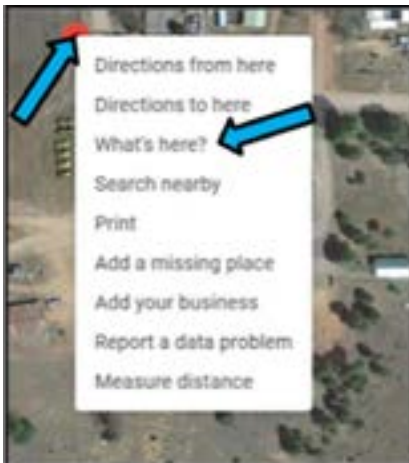


### Google Maps

Go to [google maps](https://www.google.com/maps) and type the name, city, and state that you are searching for in the search box. Click the magnifying glass next to the search box. The location is now displayed on the map.



Right-click on the red map location pin and select What's here?

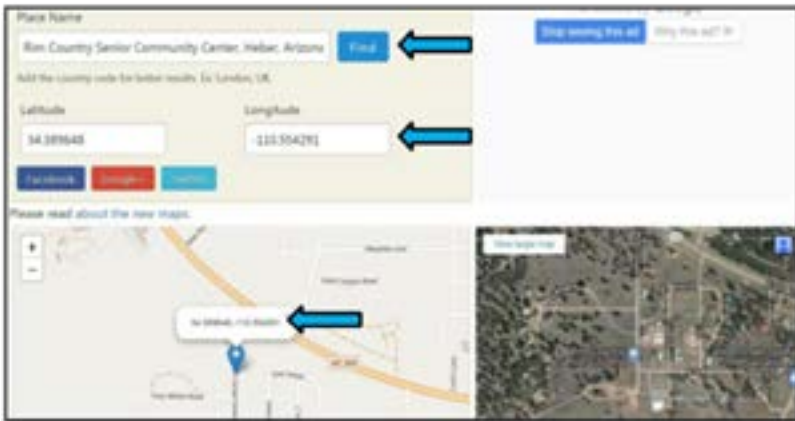


The latitude and longitude will be displayed in a pop-up box at the bottom of the map.



## LatLong.net

Go to [LatLong.net](http://LatLong.net) and enter a name, city, and state that you are searching for and click Find. The latitude and longitude will be displayed.



## Find a Census Tract Using Latitude/Longitude

You can locate the [census tract from the longitude/latitude coordinates](#). Enter X (longitude) and Y (latitude).



Scroll down to find the census tract information.



The locator found this area to be census tract 5 in Gila County (blue arrow above).

Go to the most current ACS Census Tract Summary spreadsheet found on AZ Health Zone’s website: [ACS Census Tract Summary](#). Look for census tract 5 in Gila County.

**Note:** The most current ACS Census Summary must be used when qualifying sites. Older data will not be accepted. The report date can be found in the upper-left corner (see green arrow below).

2015-2019 US Census American Community Survey		Percent of Population with Incomes < 185% FPL				
County	Census Tract	Under 6	6 to 17	18 to 64	65 Plus	All Ages
Gila	Tract 3.02	100.0%	70.7%	37.1%	24.9%	38.7%
Gila	Tract 4	20.1%	40.1%	33.1%	30.6%	32.0%
Gila	Tract 5	65.0%	85.9%	44.2%	37.2%	46.6%
Gila	Tract 6	71.2%	51.7%	41.1%	32.6%	40.7%

1. Based on the age group you are planning to reach, select the appropriate percentage from the columns on the right side (see red arrow above).

**NOTE:** To be eligible for this program, all sites must be 50 percent or greater. In this example, using Census Tract 5 and Under 6, the site qualifies (indicated with the blue and red arrows above). Other age groups listed in the ACS data are: 6 to 17 years, 18 to 64 years, 65 Plus years, and All Ages. The age group you select must match the intended target audience. The All Ages group covers all audiences but, for example, if your intended audience is adults, you cannot qualify them using the Under 6 years data.

2. Document the Data Source, Participant Data, Qualifying Data, Census Tract number, and Report Date of the ACS report. Entry in SEEDS should look like this:

<b>County:</b> Gila	<b>Data Source:</b> Census Data
<b>Qualifying Data:</b> <6	<b>Census Tract:</b> 5
<b>Participant Data:</b> 64.8	<b>Report Date:</b> 2014-2019 ACS



## Steps to Qualifying a Site Using National School Lunch Program (NSLP) & Community Eligibility Provision (CEP) Data on the ADE Website

Although the NSLP data is auto-populated on the Qualifying Site Form, more current data can be found using the following steps:

1. Go to the [ADE free and reduced lunch website](#) to find the most recent report.
2. Click the most current data available. This example shows SY 19-20.
3. Click Excel or PDF to download and review the document.



4. Search for the site name and review the Program Participation column. This column will show if the data is Regular or Community Eligibility Provision data (see blue arrows below).

Site Name	Site CTDS	Program Participation	Enrollment**	Published F/
Westwood Elementary School	078967101	Regular or Provision 2/3 Base Year	1145	93%
All Aboard Charter School	078967101	Regular or Provision 2/3 Base Year	120	69%
Altar Valley Middle School	100351103	Community Eligibility Provision	299	76%
Robles Elementary School	078967101	Community Eligibility Provision	328	94%

Regular – site must be 50 percent or greater to qualify (right column)

CEP – site must be 40 percent or greater to qualify (right column; under 50% is acceptable for CEP only)

- Document the data source, participant data, qualifying data, and date of the report (SY 19-20) or most current. Entry in SEEDS will look like this:

### NSLP

County: Select County	Data Source: National School Lunch Program (NSLP)
Qualifying Data: N/A	Census Tract: N/A
Participant Data: 93.00	Report Date: SY 19-20

### CEP

County: Select County	Data Source: Community Eligibility Provision (CEP)
Qualifying Data: N/A	Census Tract: N/A
Participant Data: Yes	Report Date: SY 19-20

## Steps to Qualifying a Site Using the CACFP Mapper

Note: CACFP can only be used to qualify sites where children 0-12 years old will be served.

- Click on [Child and Adult Care Food Mapper](#). Your screen will look like this:



- Click the FIND button in the top left corner of the page (see blue arrow above).

- A window will pop up that looks like this:



- Enter the address of the site you are researching and click the Find button (see blue arrow above).
- Your screen will look similar to what is shown below:



- Click Compare Maps found on the left side of the page (see blue arrow above). Select FY18\_Under\_13 <185% Pov.
- The chart to the right of the map (see yellow arrow above) has a color-coded scale showing the percentage of poverty, but do not rely on this color coding.
- Click INFO at the top of the map (see yellow arrow below).
- Click on the blue star on the map (see blue arrow below). This is the site that you entered.



10. A window will pop up that looks like this:



2018_Block_Group Information	
BlockGroup	040131143011
Tract	04013114301
County	04013
State	04
County Name	Maricopa County
State Name	Arizona
Eligible? (Yes or No)	Yes
SFSP: Percent 0-18 year olds eligible	89.600
CACFP: Percent 0-12 year olds eligible	85.300

11. Scroll down to where the Federal Poverty Level information appears (CACFP level is shown at the blue arrow above).

12. Document the data source, participant data, and qualifying data (note that age groups may differ, so document as stated by CACFP). Entry in SEEDS should look like this:

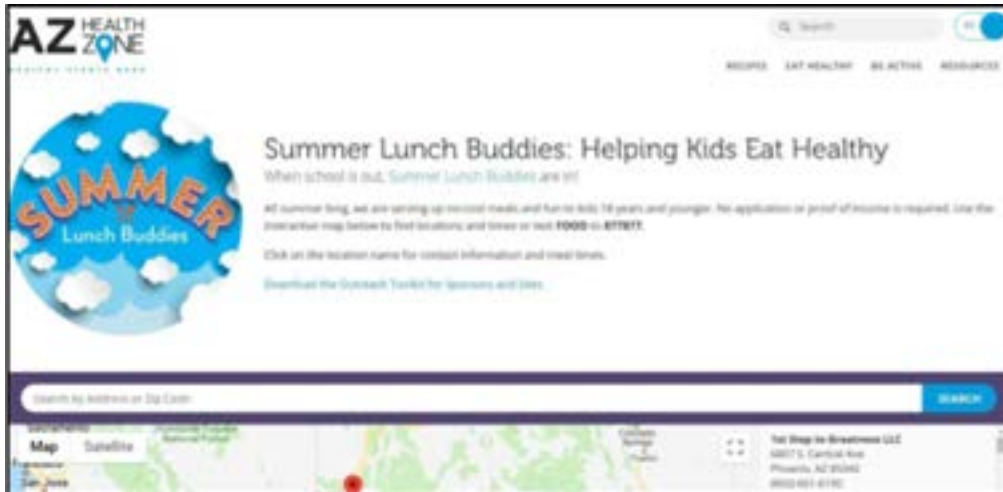
County: *	Yavapai *	Data Source: *	CACFP Mapper
Qualifying Data: *	0-12 *	Census Tract: *	N/A
Participant Data: *	85.30	Report Date:	N/A

## Steps to Qualifying an SFSP Site

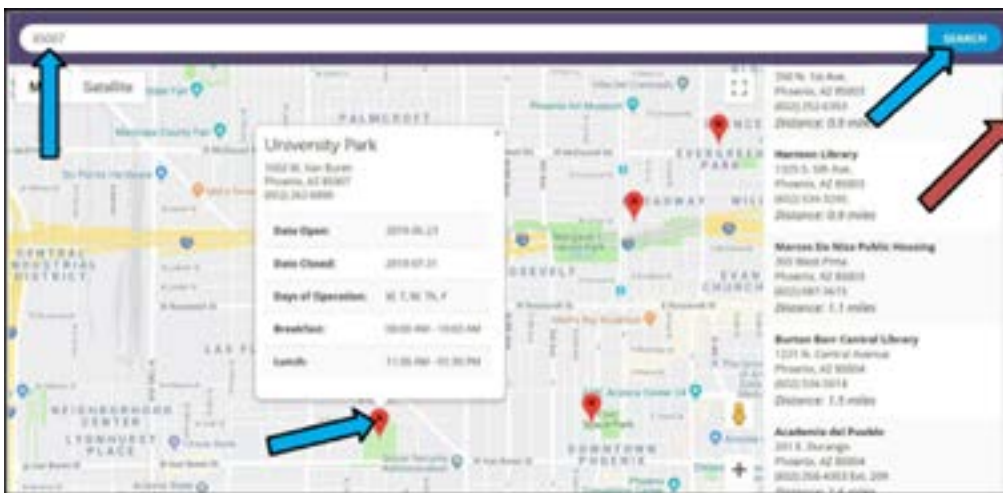
There are two methods for qualifying an SFSP site: the SNAP-Ed Site Map or the SFSP Mapper (same map used for CACFP).

**NOTE:** Sites using this qualifying data source are only approved for SFSP activities.

1. Go to the [SNAP-Ed Site Map](#). The screen will look like this:



2. Enter the zip code of the area you are researching and click the Search button (see blue arrows below). Use the scroll bar (see red arrow below) to browse the list of sites for that area. Click on the red map location pins for additional site information.



3. If the site you are researching appears on the map, it is a qualified site. Document the data source, participant data, and qualifying data. Entry in SEEDS should look like this:

County: *	Data Source: *
Yavapai	SFSP
Qualifying Data: *	Census Tract: *
SNAP-Ed Site Map	N/A
Participant Data: *	Report Date:
Yes	N/A



## Steps to Qualifying an SFSP Site Using the SFSP Mapper

1. Go to the [Child and Adult Care Food Mapper](#).
2. Follow the same instructions for qualifying a CACFP site, but when you click Compare Maps on the left side of the page, select FY18\_Under 19\_<185%\_Pov.
3. When you see the screen below, scroll down to where the Federal Poverty Level information appears (SFSP level is shown at the blue arrow below).

2018_Black_Group Information	
BlockGroup	040131143011
Tract	04013114301
County	04013
State	04
County Name	Maricopa County
State Name	Arizona
Eligible? (Yes or No)	Yes
SFSP: Percent 0-18 year olds eligible	89.600
CACFP: Percent 0-12 year olds eligible	81.300



4. Document the data source, participant data and qualifying data (note that age groups may differ, so document as stated by the mapper). Entry in SEEDS should look like this:

County: *	Data Source: *
Yavapai	SFSP
Qualifying Data: *	Census Tract: *
SFSP Mapper	N/A
Participant Data: *	Report Date:
89.60	N/A

Below is a chart which shows the requirements for Qualifying Data, Participant Data, Census Tract #, and Report Date, according to the Data Source chosen.

Data Sources	Qualifying Data	Participant Data	Census Tract	Report Date
CACFP Mapper	0-12 (automatically populates)	%	N/A	N/A
Census Data	Multi-select <6 6-17 18-64 65+ All Ages	%	Not a drop-down, this is a free text field to enter census tract #	2014-2018 ACS (or most current)
Community Eligibility Provision (CEP)	N/A	Yes/No	N/A	NSLP 2018-2019
National School Lunch Program (NSLP)	N/A	%	N/A	NSLP 2018-2019
Program Participation	Emergency Food Assistance Site SNAP Office WIC Office Head Start Public Housing Site FINI Site	Yes/No	N/A	N/A
	AHCCCS SSI TANF	% (current from site)	N/A	N/A
SFSP	SNAP-Ed Site Map	Yes/No	N/A	N/A
	SFSP Mapper	%	N/A	N/A
SNAP Redemption	\$50,000+	Yes/No	N/A	N/A
Other	Justification	Yes/No	N/A	If applicable

### Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide links for online tools and other resources on the [AZ Health Zone website](#).
- Maintain SEEDS for LIAs to submit new site requests.
- Be available at any time if further assistance is required for qualifying sites.

# Utilizing Evidence-Based Interventions

## Policy Expectations

Approved evidence-based direct education (DE) curriculum and tools for evidence-based policy, systems, and environmental (PSE) activities can be found on our website. LIAs may submit interventions to the SIT to be considered for addition to the approved list. Before submitting an intervention for consideration, use the [Checklist for Evidence-Based Approaches](#).



## Why is Using an Evidence-Based Intervention Important?

An evidence-based intervention is one that has been researched for use with individuals and communities with low access to resources and systematically proven to be effective with those populations. SNAP-Ed interventions include both DE curricula and PSE activities. Utilizing evidence-based practices increases the probability that AZ Health Zone interventions will reach the intended targets and also reduces the chances of unintended consequences from a particular activity or intervention.

## How to Determine if an Intervention is Evidence-Based

Most interventions will fall into one of four categories: research- or practice-tested, emerging, and non-researched based. Please use the [Checklist for Evidence-Based Approaches](#) to find in which category a proposed intervention falls.

## Utilizing Multilayered Interventions

Evidence-based interventions are most effective when using a multilayered approach that includes elements of direct education, social marketing, and PSE approaches that move along the Spectrum of Prevention and combine to reach participants at more than one level.

### Examples:

- Assisting with the creation of a community garden, helping to establish pathways for distribution of the produce, and providing a Seed to Supper training for participants at the community center.
- Updating a local wellness policy to include providing two recess periods per day, training school staff on the importance of physical activity for students, and using the AZ Health Zone stencils to improve the usability of playgrounds.

## Submitting Interventions for Approval

### Procedures

1. Work with the LIA team, site and/or community leaders to identify gaps in services/programming.
2. Search for interventions that will fill the gap(s) identified.
3. Complete the Evidence-Based Checklist.
4. Send an email to the SIT county lead with the following information:
  - Does it fill a gap in programming for a particular population?
  - What is the cost of the curriculum or intervention, if any?

Please note that all submissions will be reviewed by the focus area specialist for:

- Early childhood and/or ADE standards
- [Language of Health Style Guide](#) for appropriate language and concepts

### Considerations

- For submissions categorized as research- or practice-tested, the SIT will review and respond on approval of use.
- For submissions categorized as emerging, the SIT will request additional information from the LIA. Once the additional information is submitted, the specialist will work with the LIA on the protocol for utilizing emerging practices.
- Interventions without an evidence base are not permitted to be used under SNAP-Ed funding.

### Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Review, approve and/or provide feedback about intervention submissions.
- Provide tools/resources, etc.



# Curriculum Modification

## Policy Expectations

All curriculum implemented by the AZ Health Zone must be implemented with fidelity to meet evidence-based requirements. Program fidelity means that the intervention, curriculum, and/or lessons were implemented as designed.

## Why is Curriculum Fidelity Important?

Maintaining the fidelity of the curriculum is important to ensure that educators are providing accurate and evidence-based nutrition and health information to the community.

## Why Are Modifications Allowable and When Are They Appropriate?

Fidelity to curriculum implementation is important, but in some cases, modifications are necessary and permitted. AZ Health Zone recognizes that in order to provide programming that is trauma-informed, equitable, and

culturally sensitive, some elements of approved curricula may need to be adapted to reach the target audience. Therefore, modifications to the curriculum may be allowable if their intent is to improve the understanding of the material, enhance community engagement, and/or increase the likelihood of positive behavioral outcomes.

## Modification Criteria and Procedures

As you engage with your communities and specific sites, you may discover needs that will impact curriculum implementation. When this is the case, we encourage you to work with the community or site leader first to identify what modifications may need to be made in order to implement AZ Health Zone approved curricula in a manner that maintains fidelity with the curriculum design, meets curriculum objectives, and does not impede expected outcomes.





## Modifications Not Requiring Approval

**Cultural Modifications:** Making adaptations for cultural and age appropriateness and/or food availability and seasonality. In some cases, consultation with experts, such as cultural representatives, community members, etc., is important and encouraged. Changes can be made to verbal communication during a lesson to improve understanding. Recipe modifications and food demo recipes must still meet the AZ Health Zone Nutrient Standards.

### Examples:

- Adjusting names, stories, recipes, food examples and images, and food demos included in a class
- Providing an overview of lesson concepts that are not familiar to the audience (substituting familiar phrases for technical terms)
- Substituting/using a different recipe or ingredients (e.g., using commodity foods or foods in season to be more familiar to the audience)
- Switching the order of lessons within a gardening curriculum to align with the growing season in your region

**Trauma-Informed Modifications:** *Modifying or adapting language in a curriculum to better meet the needs of your audience. The goal is to provide a stable and safe space for learning and behavior change.* When modifying language, utilizing the [Language of Health Style Guide](#) will be beneficial for content and messaging guidance. As trauma-aware public health educators, we want to deliver inclusive messages and content that addresses the concerns of our communities right now.

**Supplemental Modifications:** *Adding supplemental activities to a lesson to increase participant engagement and interactions.* Added activities must follow [SNAP-Ed Guidance](#) and [Dietary Guidelines for Americans](#), meet curriculum learning objectives, be appropriate for the audience, fit the objectives of the curriculum, and enhance engagement or relevance to the audience.

### Examples:

- Food demonstrations and/or taste testing
- Physical activity demonstrations (e.g., stretch breaks)
- Participant engagement (e.g., storytelling, small group discussions, ice breakers, group introductions, review of a previous class)
- Adding a hands-on component to gardening lessons by demonstrating growing techniques

**Family-Oriented Modifications:** *Providing supplemental activities for children so that families (children and caregivers) can attend together.* Activities may be incorporated to engage children present at an adult class, as long as the adult curriculum is not modified. Supplemental activities must be age appropriate.

### Examples:

- Providing coloring sheets and crayons to keep children occupied while adults focus on the lesson
- Inviting children to place items on a poster or participate in a demonstration (as appropriate)
- Allowing older children to help parents find an item on a food label

**Translation Modifications:** *Delivering the curricula by speaking in a language other than the language in which it was written.* Curricula may be delivered and interpreted in a different language when the educator is proficient in an alternate language. NOTE: This does not include written translation.

**Lesson Modifications:** *Adjusting activities or activity times to accommodate organic changes with lesson pacing.* As long as fidelity to core components and learning objectives are maintained, it is acceptable to 1) adapt time for each activity as needed 2) substitute an activity that has a shorter time duration as long as it meets learning objectives 3) divide larger lessons into smaller lessons (e.g., dividing one 90-minute lesson into two 45-minute lessons) and 4) combine shorter lessons in sequence into longer lessons in order to accommodate the participants' or sites' scheduling needs (e.g., ten 30-minute sessions become five 1-hour sessions). **Do not omit activities or lessons and do not shorten overall class time.**

**Virtual Modifications:** *Adapting curriculum for online delivery to support the needs and requests of the community.* In the event that site leaders and/or the target audience request or voice interest in virtual education opportunities, curriculum may be adapted to a virtual format. Virtual curriculum delivery must be interactive and support participant engagement.

Planning for virtual modifications includes:

1. Choosing a platform. Platforms that do not require prior approval are those that provide live, real-time viewing. Examples include Zoom, GoToMeeting, GoToWebinar, and Google Meet.
2. Adjusting the length of lessons. Online engagement may be harder to maintain during a virtual lesson as opposed to in-person delivery. Adjusting the length of a lesson to enhance online engagement does not require approval as long as curriculum fidelity is being maintained. See above section titled "Lesson Modifications."
3. Creating opportunities to improve community engagement. A good practice for maintaining community engagement virtually is to be responsive and learner centered. Examples of engagement opportunities include creating and managing private Facebook groups in which participants can interact, and using small groups within the online lesson to encourage discussion about the material.
4. If lessons are recorded, AZ Health Zone Logos, nondiscrimination statements and the USDA "And Justice for All" poster must be included in the recording. Reference section [Civil Rights](#) and [Message & Material Development](#).



## Modifications Requiring Approval

**Virtual Modifications:** *Modifying activities that accompany lessons to make them more suitable for the online environment.* Activities that accompany lessons are important because they are evidence based and support the understanding of the curriculum objectives. Many lesson activities are unable to be performed as intended because they require participants to be physically present with the educator and other participants. This provides LIAs with the opportunity to think of creative solutions for facilitating learning activities. Curriculum activity modifications need SIT approval before being implemented. The SIT will review and approve requests to modify curriculum activities to determine if 1) the fidelity of the curriculum or lesson objective is being met 2) the proposed activity fills a gap in learning or enhances engagement 3) the proposed activity is equitable and inclusive. Create a modification request if you are planning to:

- 1) Remove an activity
- 2) Create a new activity to accompany the lesson
- 3) Use an activity from another approved resource

Other virtual modifications that will require approval include:

- 1) Conducting direct education using pre-recorded lessons
- 2) Using platforms that cannot accurately track real-time attendance or capture participant data

**Developmental Modifications:** *Modifying or adapting curriculum for an age, grade level, or lifecycle stage that is different than its intended use or modifying the setting to accommodate participants' developmental/life-stage needs.* When working with persons with special needs and persons with disabilities, share curriculum with site leaders and discuss potential concerns about learning and audience grade levels. Work with the site leaders to plan necessary modifications for the site, and discuss these modifications with the SIT and \*SET for individual review.

\*Formative or outcome evaluation may be necessary.

**Examples:**

- Modifying a middle school curriculum for use with high school students
- Modifying an adult- or youth-based curriculum for use with adults with special needs
- Modifying grocery store tours to be used at farmers' markets

**Translation Modifications:** *Developing a language translation for **written** curriculum materials not provided by curriculum developers.* When translating a handout or resource from an approved curriculum into a language that meets community needs, **SIT approval is required.** It is advised that a certified translator be contracted with to develop an accurate and culturally-appropriate translation. This may require focus group testing prior to distribution of the translated materials.

## Submitting Modifications for Approval

1. Work with site leaders to identify the need for modification.
2. Send an email to the county specialist with the following information:
  - Type of modification (e.g., curriculum, lesson, audience, materials, content, etc.)
  - Justification: What gap will this modification fill or what impact will it have on the target audience? How do you anticipate this modification will satisfy objectives and produce intended outcomes?
  - Describe the modification
  - Is it a one time or ongoing modification?
  - Is there a cost associated with this modification? If so, please refer to budget guidance and provide cost estimates.
  - When do you intend to implement the modification? (allow 7-14 days for approval)

### Modification Approval Process:



### Modification Restrictions *The following types of modifications are not allowed.*

**Omission Modifications:** Deleting content, activities, or lessons from a series.

#### Examples:

- Deleting a taste-testing activity that is a core component of a lesson
- Omitting content to shorten a lesson
- Delivering a single session from a series required to be taught as a series and not permitted as stand-alone lessons

**Lesson Sequence Modifications:** *Rearranging the order of activities within a lesson.*

If the curriculum is designed to be implemented sequentially, lessons may not be completed out of order.

**Target Audience Modifications:** *Using a curriculum as is for an age, grade level, or audience that is different than its intended use outside of curriculum implementation guidelines.*

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Review, approve and/or provide technical assistance regarding curriculum modifications (see guidance above).
- Provide tools and resources, such as the [Language of Health Style Guide](#).
- Provide opportunities for the facilitation of training and communities of practice regarding curriculum modifications.

# Ordering Materials



## Policy Expectations

AZ Health Zone develops materials to be used in activities targeting SNAP-eligible populations in the state and makes those items available through a website ordering system. To be able to order materials from the AZ Health Zone website, individuals must be contracted as a LIA with AZ Health Zone. Individuals from LIAs must set up an account through the website to order. Prior to approving any orders, the SIT will verify that the LIA's CERs are submitted and current and that SEEDS documentation is current. LIAs that are not current

with their CERs or SEEDS data reporting will not have orders approved. Only LIAs who are current may order educational reinforcement items.

## Why is it Important to Order Materials?

AZ Health Zone developed an online ordering system to streamline the ordering and delivery of materials developed through the State Implementation Team (SIT) for LIA use with activities that target SNAP-eligible populations in the state.

## How to Order AZ Health Zone Materials

1. LIAs must submit an account access request to be given access to order materials. To establish an account, go to [AZHealthZone.org](http://AZHealthZone.org).
2. Scroll to the bottom of the page and click "Collaborators."
3. Complete the required information and submit. You will be notified by email when the account is approved.
4. LIAs must order all AZ Health Zone materials and items through our website.
5. Non-contracted nutrition educators need to work through their LIA to obtain AZ Health Zone materials and items. Quantities of items ordered must be consistent with the estimated reach of the AZ Health Zone project.

## Requirements to Order AZ Health Zone Materials

Only individuals with contracted LIAs can order. Orders are approved only for LIAs that are current on reporting and invoicing (CERS).

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Review and approve new user account requests from [AZHealthZone.org](http://AZHealthZone.org).
- Manage website material orders; contact [Bianca Valenzuela](#) for more information.
- Review and approve material budget requests/adjustments. See information on budgetary changes in the Amendments and Changes Policy or contact [Therese Neal](#) for more information.



# Property Asset Control



## Policy Expectations

The SIT must approve capital and non-capital equipment purchases by LIAs, regardless of cost. Review and approval of equipment acquisition by ADHS and USDA is normally conducted during review of the proposed fiscal year budget, but additional requests may be made in writing during the fiscal year. Requests must be approved prior to the purchase of equipment, and reports of purchases must be provided to the SIT.

## Why is Property Asset Control Important?

Submitting requests for capital and non-capital equipment purchases, as well as documenting and reporting these purchases, are requirements for funding from ADHS and USDA.

## Reporting Purchases

All LIA programs are required to report the purchases to the SIT and to maintain an inventory following the asset threshold table below. Assets that require tagging include, but are not limited to, software, furniture and all IT equipment. IT equipment includes computers, printers, and all items that hold data, such as USB drives. LIAs are also required to notify the BNPA Finance Office and the SIT of any assets that need to be disposed of.

FIN111,  
Guidelines, E.1  
(SAAM Topic 25,  
Section 35

Asset Type	Asset Description	AFIS Tracking Thresholds
A	Works of Art & Historical Treasures - Non Depreciable	Any
B	Buildings	Any
C	Construction in Progress	Any
D	Development in Progress (Intangible Assets)	Any
E	Equipment	\$1,000+
F	Furniture	\$1,000+
H	Leasehold Improvements	\$5,000+
I	IT Equipment	\$250+
K	Land Improvements	Any
L	Land	Any
M	Infrastructure - Modified Approach	Any
N	Infrastructure - Depreciable	Any
O	Other	\$1,000+
P	Improvements other than Land & Bldg. Improvements	Any
Q	Other Intangible Capital Assets	\$1,000+
R	Tangible Rights of Way - Land Held for Future Development	Any
S	Software	\$250+
T	Telecommunications	\$1,000+
V	Vehicles	Any
W	Works of Art & Historical Treasures	Any

Each LIA must provide the following to the [SIT](#), who will provide notice to the BNPA Finance Office:

- a. Identify a property control officer for each site where assets are located.
- b. List an alternate contact person.
- c. List address, phone, and email address for both the officer and alternate.

The BNPA Finance Office will contact each site's property control officer.

## Procedure for Items to Be Purchased

1. Once an asset is purchased, the LIA must create an individual asset number for each item, tag it, and maintain the asset in an inventory. AZ Health Zone asset tags must be used and can be obtained from the Operations Team. Notify the BNPA Finance Office, through the SIT Operations team, of the following information within ten business days of the item being received. The LIA/property control officer will email the SIT Operations Team with the following information:
  - a. Tag or ID number
  - b. Description
  - c. Purchase cost or fair market value on date of purchase or donation date
  - d. Location
  - e. Funding source
  - f. Serial number
  - g. Manufacturer
  - h. Model number
  - i. RAM size (if applicable)
  - j. Specifications (if applicable)
  - k. Receipt/Invoice (Proof of Purchase)
2. BNPA will track all LIA assets in the State Accounting and Inventory System.
3. LIAs are required to submit supporting documentation for all equipment (hardware and software that holds memory and/or data) to the SIT Operations Team. The BNPA Finance Office will review the documents monthly to ensure compliance and reporting of assets.

## Procedure for Asset Transfer

1. Site property control managers must notify the BNPA Finance Office through the SIT Operations Team when an asset is transferred.
  - a. The BNPA Finance Office will develop a relationship and train each property control officer to ensure that BNPA is being notified of any transfer.
  - b. The transfer will be recorded in the State Accounting and Inventory System.

## Procedure for Asset Disposal

1. The property control officer must notify the BNPA Finance Office through the SIT Operations Team when an asset needs to be disposed of.
  - a. The property control officer will contact the SIT Operations Team when an asset needs to be picked up for disposal.
  - b. The BNPA Finance Office will arrange for pick-up of an asset.
  - c. Disposal will be recorded in the State Accounting and Inventory System

## Procedure for Annual Inventory

1. The BNPA Finance Office will print Fixed Asset Reports and email them to site property control officers.
2. Each location will get their individual report.
3. Property control officers will review the report and either certify that the report is correct with no changes OR the report is not correct and request changes.

## Manufacturer Reimbursement on Purchased Items

In the event that there was manufacturer reimbursement given on an item purchased, the BNPA Finance Office will contact the property control officer to retrieve the information listed in Step #1 of "Procedure for Items Purchased."

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Be available to answer questions about this process and act as a liaison between LIAs' property control officers and the BNPA Finance Office.



# Community Engagement

## Policy Expectations

The AZ Health Zone’s guidance for allowable costs associated with community engagement of program participants follows the SNAP-Ed Plan Guidance for reimbursing program participants for engagement in such activities. Reimbursement is allowable for residents’ personal costs such as childcare, meals, lodging, internet costs and/or transportation for recipients of SNAP-Ed to actively participate in focus groups, needs assessment, and advisory groups to inform and improve SNAP-Ed effectiveness. This also includes participation in relevant State and local advisory panels focusing on the interests of the SNAP-Ed target audience.

Please note that allowable costs for focus group participants are intended to reimburse for the participants’ incurred costs, not to provide a financial incentive for participation. The types of incurred costs may vary by participant and do not need to be identified for each community engagement activity. Instead, a designated amount may be offered in the form of a gift card.

Gift cards may not be purchased in amounts greater than \$25 (State of Arizona Accounting Manual, Topic 80, Section 5, 1.3). If a payment higher than \$25 is needed, more than one gift card can be used for reimbursement.

It is recommended that gift cards issued are restricted from alcohol, tobacco, and gambling purchases (FY 2024 SNAP-Ed Plan Guidance, Section 3, 5.9.1).

Reimbursement amounts are designated by the following structure, in alignment with the [Spectrum of Public Participation model](#):

Engagement Type	Activity	Description	Rate
Consulting	Focus Group	Focus groups are utilized to systematically gather feedback and ideas on AZ Health Zone topics in order to inform programmatic decision making on current issues of importance and relevance to program participants.	Up to \$50 gift card for up to 2 hours.
Consulting	Needs Assessment	Needs assessment activities are utilized to incorporate program participants’ priorities and needs for the purpose of determining appropriate programmatic strategies.	Up to \$50 gift card for up to 2 hours.
Collaborating	Advisory Group	As advisory group members, participants will be a part of an ongoing team working to facilitate and maintain program stakeholder input and outreach.	\$XX.XX per hour/ per meeting/ activity. (reasonable for the tasks/ activities involved)



Costs that are unallowable include: 1) organized efforts to influence elected officials and lobbying for legislative/policy changes, 2) costs associated with surveillance or surveys of the general population that are not prorated based on the number of likely SNAP-Ed population, 3) money, vouchers, or passes provided to SNAP-Ed recipients to offset personal costs incurred so they may attend routine SNAP-Ed classes or activities, or 4) childcare or transportation services provided for SNAP-Ed recipients in conjunction with routine SNAP-Ed classes or activities.

The [Community Engagement Reimbursement Request Form](#) must be submitted prior to reimbursing community members for costs incurred with participation as outlined in this guidance. Complete the Community Engagement Reimbursement Request Form and submit to the SIT Operations team at [AZHealthZone@azdhs.gov](mailto:AZHealthZone@azdhs.gov).

### Why is Community Engagement Important?

As described in the USDA's SNAP-Ed Plan Guidance, engaging stakeholders, including program participants, is the first step in the program model's checklist for Public Health Approaches. USDA expects implementors to: 1) Incorporate program participants' priorities and local initiatives to determine the appropriate strategies, 2) Engage communities of focus and gain an understanding of current issues of importance and relevance to them, and 3) Form community advisory groups, or other bodies to facilitate and maintain stakeholder input.

The AZ Health Zone considers these activities to fall within the guiding principle of Community Engagement, which is defined as incorporating the needs, desires, and recommendations of residents into the programs planning and implementation using consulting, involving, and collaborating techniques. The AZ Health Zone program is moving to build a model that people have inherent expertise in their lived experience and as a result it is valuable to involve them to improve programs and strengthen sustainability.

### Our Commitment to You

This guidance is intended to describe the AZ Health Zone's state level policies on participant reimbursement for community engagement activities, so that LIAs can use their AZ Health Zone budgeted funds for this purpose when applicable. Additional support by the SIT operations team will be provided for LIAs seeking AZ Health Zone approval for this use of funds as a part of their annual budget submission and/or on a case-by-case basis for emergent community engagement activities. The local implementing agency is responsible for understanding and following the administrative policies in their agencies related to providing participant reimbursement and/or gift cards.



# Nutrition Education and Reinforcement Items

## Policy Expectations

Nutrition education reinforcement item (NERI) refers to an item that is given to the SNAP education/outreach audience and will be selected to support the AZ Health Zone social marketing campaigns.

Nutrition education reinforcement items must meet the reasonable and necessary cost test and should:

- Target the intended SNAP audience.
- Have a clear, relevant, and useful connection to particular FNS/SNAP nutrition education or health engagement messages.
- Contain an educational message or have a use that is directly relevant to reinforce nutrition education and health engagement messages.
- Have value as nutrition education and health engagement aids.
- Be offered only after weighing and assessing other relative needs and cost effectiveness. Be of nominal value of \$5.00 or less per item.
- Not be used solely for marketing or staff morale boosters.



## Why are Nutrition Education Reinforcement Items Important?

These items contain or convey nutrition or health engagement messages and promote healthy eating and active living. Such items shall have a direct relationship to program objectives and the expected behavior change. These items are sometimes called promotional items, incentives, and educational extenders.

## How to Complete a NERI Request Form

The AZ Health Zone Nutrition Education Reinforcement Item (NERI) Request Form must be completed and submitted for approval to the SIT for each item that LIAs would like to purchase.

All purchases or development of nutrition education reinforcement items by LIAs must also:

- Be included in the LIA's annual application and budget.
- Be approved by SIT staff for messaging and/or content.
- Be evidence based as recommended in [The Community Guide](#). This requires that the item be selected to support a specific local communication activity which uses multiple communication channels and includes mass media (such as newspapers, radio, or television).
- An example might be a hip pack or water bottle with a nutrition or physical activity message utilized to support the promotion of a new walking trail.

## Allowable Costs and Uses of NERI

These are considered allowable costs only if they are deemed reasonable and necessary, contain a reinforcing message, and are of nominal value (\$5.00 or less per item). If the reinforcement material is designed for physical activity promotion, it should be provided in conjunction with relevant nutrition and physical activity messages.

Purchase or development of nutrition education reinforcement items by LIAs is limited to items which have been approved in their annual application, meet USDA requirements, and support a specific local communication activity.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, see Nutrition Education Items Request Form. [See Appendix G.](#)



# Use of AZ Health Zone Logo and Names

## Policy Expectations

The name, AZ Health Zone, reflects the comprehensive services and programs included in SNAP-Ed, including direct education, comprehensive and multilevel interventions, and community and public health approaches. Social marketing methods will be used to identify common messages used in all efforts. It is the LIA's responsibility to adhere to all graphic and disclaimer standards when developing or utilizing AZ Health Zone branded materials.



## Why is Program Identity Important?

AZ Health Zone—Healthy Starts Here is an aspirational new brand identity, broad enough to be appealing to target audiences and also be motivating and inspirational. Brand and identity are about defining to the public who we are as a program, staff, and community. Together as a program brand, we carry the same mission of excellence, evidence base, and develops consistency and credibility over time in the community.

H E A L T H Y   S T A R T S   H E R E

## How to Use AZ Health Zone Logos

All new materials will be branded with AZ Health Zone—Healthy Starts Here. All materials paid for with SNAP-Ed funds will include the AZ Health Zone logo or the LIA-specific AZ Health Zone logo provided by the SIT. Reach out to the [AZ Health Zone social marketing manager](#) for the LIA-specific logos.





All uses of the AZ Health Zone logo should maintain consistent spacing equal to the dimensions of the "A" in "AZ" around the mark to separate the mark from surrounding elements. If the logo placement lacks sufficient space to achieve this separation, remove the tagline and just use the AZ Health Zone mark.



The tagline should be used whenever space allows, but there will be instances when the font will be too small to read. Most publications will not guarantee font legibility below 6 point; if the format requires the logo to be scaled below 6 point, it is recommended that the tagline be removed.

See [AZ Health Zone Brand Guidelines](#) in Appendix H.



## Maintaining Consistent Messaging and Branding

The AZ Health Zone requires consistent messaging throughout program activities. LIAs that develop or produce materials with money from the AZ Health Zone Program must add the USDA disclaimer and AZ Health Zone logo to materials. To maintain consistency and quality, it is recommended that LIAs work with the ADHS SIT social marketing manager before using AZ Health Zone logos or graphics.

Materials developed for collaborative efforts will require joint funding for the materials when carrying additional organizational logos.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide downloadable logos and graphics on the [AZ Health Zone website](#).
- Provide LIAs with their own logo package. Contact the SIT social marketing manager for unique LIA logos.
- Provide the [AZ Health Zone Brand Standards Guide](#) on the AZ Health Zone website.
- Be available for clarifications and questions regarding branding, name, and logo use. Contact the SIT social marketing manager.

# Message and Material Development

## Policy Expectations

All AZ Health Zone messages and materials will be developed using credible, scientifically-based information about food, nutrition, and physical activity using a health equity lens. Information that is not backed by credible research shall not be used. An assessment of existing information should be completed prior to developing new materials to avoid duplication of efforts. Messages and materials should also be simple, culturally appropriate, and practical.



All messages conveyed through the AZ Health Zone, including messages conveyed by LIAs, must be consistent with the Dietary Guidelines for Americans (DGA), MyPlate, and the Language of Health Style Guide. Messages that are not consistent with the DGA, MyPlate, and Language of Health Style Guide may not be used. For example, a lesson plan designed to promote a fad diet that is high in fat or excludes a food group such as milk would directly conflict with the Guidelines.

Nutrition education messages should reflect the most important nutrition education and food access needs of the SNAP-eligible population.

## Why is it Important to Develop Messages and Materials Appropriately?

Only reputable sources should be used to ensure that nutrition and physical activity messages are backed by scientific research.

Use of common messages and materials strengthens message consistency throughout Arizona, allowing AZ Health Zone to maximize the use of consistent messages in multiple locations to promote the adoption of healthy eating and active living habits.



## Necessary Requirements for Developing Messages and Materials

### Use of Appropriate Resources

The most up-to-date lists of approved curricula and resources are available on the AZ Health Zone website. The following are examples of reputable sources:

- a. Print materials from USDA
- b. Print materials from selected national organizations, federal agencies, or universities such as:
  1. [Centers for Disease Control and Prevention](#) (CDC)
  2. [National Institutes of Health](#) (NIH)
  3. [United States Food and Drug Administration](#) (FDA)
- c. On the Internet, these sites will provide the most appropriate nutrition references for SNAP nutrition education:
  1. [Academy of Nutrition and Dietetics](#)
  2. [Kids Eat Right](#)
  3. [AZ Health Zone](#)
  4. [Dietary Guidelines for Americans](#) (2020-2025)
  5. [Choose MyPlate](#)
  6. [Food and Nutrition Service](#)
  7. [Have a Plant - Produce for Better Health®](#)
  8. [Maximizing the Message: Helping Moms and Kids Make Healthier Food Choices](#)
  9. [Physical Activity Guidelines for Americans](#) (2018)
  10. [Youth Physical Education and Physical Activity Guidelines Toolkit](#)
  11. [USDA Core Nutrition Messages](#)

### Required Language, Graphic, and Disclaimer Information

It is the LIA's responsibility to adhere to all graphic, disclaimer ([USDA Nondiscrimination Statement - Full or Shortened](#)), and nutritional standards (see [Recipe Nutrient Standards policy](#)) when developing materials. It is the LIA's responsibility to ensure that the messaging requirements have been met.

### Language and Font Requirements

Materials developed must be in plain language, culturally sensitive, and at an appropriate reading level for the intended audience. See [Plain Language](#) for a how-to guide and examples of plain language documents

For printed materials, choose two easy-to-read fonts that contrast well with each other. Serifs are semi-structural details or small decorative flourishes on the ends of some of the strokes that make up letters and symbols. An example would be the Times New Roman font. Sans serif does not have these details or flourishes.

- Use a serif font for the regular text (e.g., Baskerville, Bembo, Bodoni, Bookman Old Style, Caslon, Century, Courier, Georgia, Garamond, Lucida, Minion, Rockwell Times).
- Use a sans serif font for the headings (e.g., Arial, Avenir, Courier, Franklin Gothic, Futura, Helvetica, Myriad Pro, Time New Roman, Verdana).

## Edits and Size Requirements

Additions, edits, or deletions to the nondiscrimination statement are not allowed. The minimum font size for nondiscrimination statements for brochures is 8 point. For all other printed materials and web pages, the statement must be legible. Use of a smaller font size must be approved by the FNS Civil Rights Division in writing.

## Nondiscrimination Statements

Materials that should have the nondiscrimination statement include print (e.g., brochures, newsletters, education curricula, etc.) and non-print (e.g., audio, videos, websites, etc.) forms of communication. Documents developed and adapted by State and Local Implementing Agencies receiving financial assistance from FNS must have the following shortened nondiscrimination statement:

### English:

This material was funded by USDA's Supplemental Nutrition Assistance Program - SNAP through the AZ Health Zone. This institution is an equal opportunity provider.

### Spanish:

Este material fue financiado por el Programa de Ayuda de Nutrición Suplementaria de USDA-SNAP a través de la Zona de Salud AZ. Esta institución es un proveedor que brinda igualdad de oportunidades.

The nondiscrimination statement is not needed if a document meets the following criteria:

- Is not funded by the USDA/SNAP-Ed;
- Only contains content that provides general information for the public (examples are menus, calendars);
- Has no SNAP or SNAP-Ed program information or reference to SNAP application or eligibility; and
- Is an approved AZ Health Zone resource that is not being modified.



The disclaimer and AZ Health Zone logo are required on all recipe cards.

The approved fact sheet from ChooseMyPlate.org (above) contains the appropriate disclaimer; the AZ Health Zone logo is not required.

For online sites, individual SNAP-Ed web pages should provide the full version of the nondiscrimination statement if there is information that requires the full statement to be featured, even if it is on a different page of the website.

## Materials Review

It is the LIA's responsibility to adhere to all graphic, disclaimer, and nutritional standards when developing materials. It is the LIA's responsibility to ensure the messaging requirements have been met. All materials developed will be subject to review during technical assistance visits and scheduled informal site visits. A materials audit will be conducted randomly throughout the year. LIAs will be required to submit all developed materials (e.g., fliers, handouts, etc.) to the SIT for review of the disclaimer, logos, and content. Technical assistance will be provided for future material development. The SIT and the Social Marketing Manager are available to assist with questions, graphics, and content

## USDA Nondiscrimination Statement: Full Version

The full version of the USDA SNAP-Ed nondiscrimination statement is required on web pages even if it is a different web page of the site. A recommendation is to link to the [appropriate version](#), in the footer of the site. Newly printed materials require the full statement when space permits.

**English:** Updates 02/15/2023

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained [online](#) at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

1. mail:  
Food and Nutrition Service, USDA  
1320 Braddock Place, Room 334  
Alexandria, VA 22314; or
2. fax: (833) 256-1665 or (202) 690-7442; or
3. email: [FNSCIVILRIGHTSCOMPLAINTS@usda.gov](mailto:FNSCIVILRIGHTSCOMPLAINTS@usda.gov)

02/15/2023



Spanish: *Udated 2022*

Las agencias estatales o locales del Programa de Asistencia de Nutrición Suplementaria (SNAP) y del Programa de Distribución de Alimentos en Reservaciones Indígenas (FDPIR), y sus subreceptores deben publicar la siguiente Declaración de No Discriminación:

De acuerdo con la ley federal de derechos civiles y las normas y políticas de derechos civiles del Departamento de Agricultura de los Estados Unidos (USDA), esta entidad está prohibida de discriminar por motivos de raza, color, origen nacional, sexo (incluyendo identidad de género y orientación sexual), credo religioso, discapacidad, edad, creencias políticas, o represalia o retorsión por actividades previas de derechos civiles.

La información sobre el programa puede estar disponible en otros idiomas que no sean el inglés. Personas con discapacidad que requieran medios alternos de comunicación para obtener información

sobre el programa (por ejemplo, Braille, letra grande, cinta de audio, lenguaje de señas americano), debe ponerse en contacto con la agencia (estatal o local) donde solicitaron los beneficios. Las personas sordas, con dificultades auditivas o con discapacidades del habla pueden comunicarse con el USDA a través del Servicio Federal de Retransmisión al (800) 877- 8339.

Para presentar una queja por discriminación en el programa, el reclamante debe llenar un formulario AD-3027, formulario de queja por discriminación en el programa del USDA que puede obtenerse en línea en: <https://www.fns.usda.gov/sites/default/files/resource-files/usda-program-discrimination-complaint-form-spanish.pdf>, en cualquier oficina del USDA, llamando al (833) 620-1071, o escribiendo una carta dirigida al USDA. La carta debe contener el nombre del demandante, la dirección, el número de teléfono y una descripción escrita de la acción discriminatoria alegada con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR) sobre la naturaleza y fecha de una presunta violación de derechos civiles. El formulario AD-3027 completado o la carta debe presentarse por:

1. correo:  
Food and Nutrition Service, USDA 1320 Braddock Place, Room 334 Alexandria, VA 22314; o
2. Fax: (833)-256-1665 , o (202)-690-7442; o bien por
3. correo electrónico:  
FNSCIVILRIGHTSCOMPLAINTS@usda.gov

Esta entidad es un proveedor que brinda igualdad de oportunidades.

To find the Nondiscrimination Statement in languages other than English and Spanish, visit the FNS webpage on [Nondiscrimination Statements](#).

### **Other Appropriate Resources**

Utilizing social marketing principles, AZ Health Zone conducts two message-specific campaigns each year, which are reinforced through community activities provided by LIAs. Resources such as toolkits, print and online materials, interactive web-based assets, fact sheets, and other items are provided for LIAs to use in PSE change efforts.

Specific communication and outcome objectives are established for each campaign. All social marketing messages are based on the 2015-2020 Dietary Guidelines Communication Plan and the USDA Core Messages. Evaluation is completed to determine the impact of each social marketing campaign.

Common messages are provided during each campaign in a variety of ways, such as online advertising, radio ads, billboards, and other methods to reach large numbers of low-income mothers and their children ages 2-11. Materials featuring the campaign messages are provided in quantity for LIAs to distribute in eligible communities. Examples of these materials include posters for children and adults, a Fun Food News bulletin for children, a Fun Food News bulletin for parents, a senior bulletin, recipe cards, and nutrition education reinforcement items.

The AZ Health Zone website features the campaign messages along with recipes, videos, games, and more for parents and kids. The website also includes a special section for LIAs by providing a wide array of materials to support LIA activities for each campaign, such as special downloads that are quick, easy, and ready-to-use nutrition education activities for use with small or large groups.

### **Translation of Materials to Other Languages**

Translations should be done by a certified translator who not only is fluent in the language, but has the cultural understanding to accurately convey the meaning of the source language. A qualified professional includes someone with five or more years of relevant translation experience or certification with the American Translators Association (ATA). Computerized translation programs (such as Google Translate, World Lingo, or others) should not be used in translating materials. If seeking tribal translations, see guidance from certified language translators or knowledgeable community members to translate materials to tribal languages or interpret cultural concepts. Please see [Tribal Collaboration](#) for further information.

### **Our Commitment to You**

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Be available to assist with questions, graphics, and messaging and material content. Contact the SIT specialists and/or the social marketing manager.
- Review all developed materials (e.g., fliers, handouts, etc.) during technical assistance visits, scheduled informal site visits, and a materials audit conducted randomly throughout the year.
- Materials will be reviewed for use of the disclaimer, logos, and content.
- Provide technical assistance for future material development.

# Disparaging Messages

## Policy Expectations

All messages produced and conveyed by the AZ Health Zone program will be positive, equitable, constructive, culturally relevant, and sensitive to the community in which the message is intended to be used.

## Why Disparaging Messages Should Be Avoided

AZ Health Zone is committed to doing no harm in any and all aspects of program development and implementation, including marketing, message and material development, and curriculum implementation. Therefore, we have adopted trauma informed, healthy equity, and community engagement as the guiding principles for our state's SNAP-Ed program. Not only does the use of disparaging messages not align with those principles, it would be in direct conflict with them. The USDA Food and Nutrition Service has determined that states may not use SNAP-Ed funds to convey negative written, visual, or verbal expressions about specific brands of food, beverage, or commodity.



## Using Effective Messaging Strategies

From the [Language of Health Style Guide](#):

*We cannot deny the power of language. Through words, we share our feelings, emotions, and thoughts. Through language, we convey meaning. This meaning may be subtle, but its power is not. We can affect others. We can create change.*

*In understanding this power, we acknowledge that what we say and how we say it matters. Language plays an important role in our lives and this is especially important with respect to health. The health field is complex, sometimes contradictory, and messages to the public are often inconsistent. This can lead to confusion and doubt among the public as to what information is trustworthy. By sharing clear, consistent, effective messages, we are empowered to create healthy communities. With our words, we are helping to shape the beliefs, attitudes, and behaviors of those around us.*

*This style guide is a resource to discover best practices in the language of health. Just as the health field is in a constant state of growth and change, the language we use must change with it. This style guide summarizes the latest research in effective strategies, allowing you to create health messages that are accurate, consistent, and persuasive. With your help, we can promote a kind, optimistic, and compassionate approach to health and, ultimately, change the trajectory of lives.*

## Ensuring Messages are Appropriate and Approved

### Appropriate vs Inappropriate Messages

**Appropriate Messages:** Messages that align with the philosophy discussed in the Style Guide and are consistent with USDA Guidelines and DGA messaging.

**Inappropriate Messages:** Adding unapproved supplemental activities to a lesson to increase participant engagement and interactions.

Examples: ([See Style Guide](#))

Health Topic	Appropriate Messages	Inappropriate Messages
Health	There are multiple dimensions of health; taking care of your physical, emotional, and spiritual needs is important to your wellbeing.	Physical health is the only way to better health; regular exercise is important to live a healthy lifestyle.
Nutrition and Food	Healthy relationship with food; there is no such thing as a perfect diet. You can eat food that is good for your body and you enjoy.	A technical perspective; snack on celery and other vegetables. They are low in calories and can help with weight loss.
Physical Activity and Fitness	Focus on what can be gained; being active can decrease your risk of diabetes and heart disease.	What is lost by not being active; sitting too much can increase your risk of diabetes and heart disease.
Weight and Body Size	Health is weight-neutral; honor your body with nourishing food and movement that gives you energy, so you can do all the things that are important in your life.	Health occurs at a 'normal' BMI; aim for a healthy weight to decrease your risk of chronic disease.
Disordered Eating and Diet Culture	Promote intuitive approaches to eating; recognize your hunger and respect your fullness. Feed your body when hungry and listen to your body to tell you when you're full.	Promote a 'controlled' strategy of eating; control your calories to manage your weight; balance the calories you eat with the calories you expend.

## Reviewing Messages

LIAs must review their program messages (e.g., lesson plans, campaigns, handouts, brochures, materials, and other written materials) to ensure there are no disparaging messages about specific foods, beverages, or commodities.

All LIA media campaigns and media materials must be submitted and approved by the SIT to ensure appropriate USDA review and to ensure that all messages and activities are free from disparaging tones. Please see [Media Opportunities policy](#).

## Messaging Restrictions

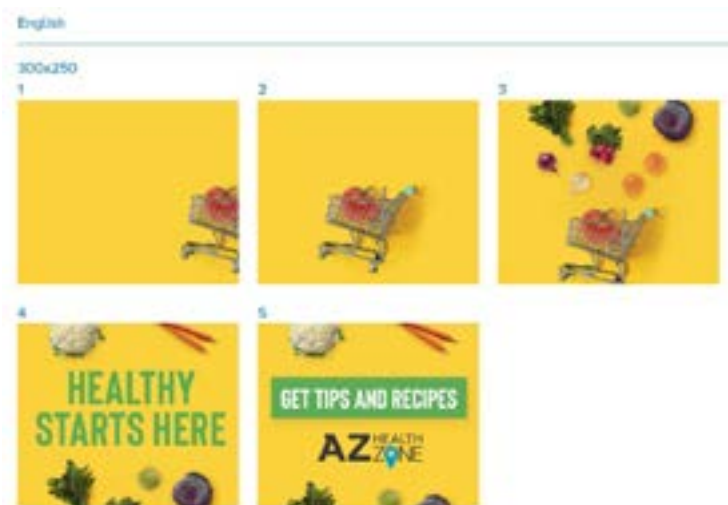
The use of AZ Health Zone program funds to convey negative written, visual, or verbal expressions about any specific foods, beverages, commodities, or food industry is prohibited. This includes messages of belittlement or derogation of such items, as well as any suggestion that such foods, beverages, or commodities are never to be consumed.

Any material that endorses or promotes brand name products or retail stores must be blurred or otherwise obscured. This includes evidence-based curriculum or validated evaluation tools with brand name products as illustrations and/or clearly identifiable logos.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and support you need to develop and share effective health messages within your communities. To support you in the successful execution of this policy, we will:

- The community nutrition specialist will be available to review materials for disparaging messages.
- The SIT will provide professional development activities and communities of practice with regards to messaging concerns.
- Provide tools and references such as [The Language of Health Style Guide](#).





# Media Opportunities



## Policy Expectations

The AZ Health Zone welcomes all media opportunities and requests. For the purposes of this policy, media contact includes, but is not limited to: responding to media opportunities over the phone, via email, print, web, and interviews on television or radio. Information about the media opportunities must be provided to the SIT prior to scheduling.

## Why is Program Representation in Media Important?

Fulfilling media requests can promote nutrition education and health engagement on a large scale. It is necessary to consult the SIT social marketing manager in order to ensure that the AZ Health Zone and SNAP-Ed principles are being represented appropriately.

## Media Request Requirements

All paid media requests **must**:

1. be part of a LIA's approved budget and action plan and
2. be coordinated with the SIT social marketing manager **prior** to any planning

The following information must be provided to the SIT social marketing manager prior to scheduling a media opportunity:

- Describe all media inquiries
- Objective and outcome
- Intended audience
- Media outlet details (e.g., station, television, radio, web, print, etc.)
- Proposed date and time
- Live or taped
- English or Spanish
- Length of the proposed segment
- Talking points
- Lesson plan and props that will be used/highlighted during segment (if applicable)
- Spokesperson

## Maintaining Professionalism

All spokespersons will be briefed prior to the interview and debriefed afterward. Journalists are to be treated respectfully and courteously by all staff at all times.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will provide information about what is allowable and provide insight to prepare LIAs for media opportunities. Contact the SIT social marketing manager.

# Release of Photographs and Videos

## Policy Expectations

All photographs and videos to be used in materials, presentations, reports, other printed materials, social media, or on webpages must have a Photo/Video Release Form completed for all persons in the photograph and/or video.

## Why are Photo/Video Releases Important?

A Photo/Video Release Form is an important legal contract between AZ Health Zone and all parties involved. It maintains the right to protect the likeness and privacy of all persons being photographed.



## When and How to Complete a Photo/Video Release Form

When photographs or videos are to be taken at events, meetings, or other activities, a photograph release must be signed by all persons included in the photograph and/or video for each event. A photo release form is not required when only the backs of those individuals are shown. Photo/Video Release Forms can be included in meeting packets or as part of meeting registration.

Parents or guardians must sign the photo release prior to pictures being taken of children in SNAP activities.

LIAs must assign an ID number to each Photo/Video Release Form and maintain a log that includes the date, person's name, and date on which the release was signed.

Stock photos, either purchased or free, included in any materials do not require a signed photo release.

## Other Considerations

If it is known ahead of time that photos are to be taken (e.g., for a nutrition-based class for children), Photo/Video Release Forms can be completed at the beginning of the class.

Permission to use the photos or video recordings is in effect from the date the images were captured until revoked by persons signing the release.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide the required [Photo/Video Release Form](#).
- Allow the use of other forms LIAs may have that include all the information on the form from the Arizona Department of Health Services.

### RASBERRY LIME FIZZ - RECIPE



#### Ingredients

1 cup cranberry-raspberry juice  
4 cups seltzer water  
1 lime

#### Directions:

1. Wash your hands with soap and warm water.
2. In a large pitcher, mix cranberry-raspberry juice with seltzer water.
3. Rinse lime and cut in half. Squeeze juice from each half into the pitcher, discarding seeds.
4. Mix well before serving.

# Food Demonstrations



## Policy Expectations

To ensure appropriate preparation, handling, and serving of food, all LIAs wishing to facilitate food demonstrations in their communities must complete AZ Health Zone Food Demonstration Training within one year of their first food demonstration. The demonstrator must have a current food handler's card. County health departments or tribal governments regulate testing for food handlers.

## Benefits of Food Demonstrations

Food demonstrations are a simple, economical way to illustrate appetizing and healthful recipes, and they can be an effective method for changing dietary behaviors of the target population.

## Food Demonstration Implementation

Food demonstrations must follow basic guidelines for recipe standards and food safety. In order to conduct a simple food demonstration, basic culinary skills, communication skills, and food safety knowledge are essential.

Before planning a food demonstration, review and use the [Food Demonstration Guide](#) that is available on the AZ Health Zone website. Use recipes from the AZ Health Zone website, approved curricula, or recipe cards in food demonstrations.

Demonstrations should be limited to one to two techniques and up to three simple recipes per one-hour class. The message should be simple and the learning objective(s) should be defined before the demonstration.

The demonstrator should practice good handwashing techniques prior to handling any food products and ensure proper use of gloves during demonstrations.

Allow the participants to taste the food after the demonstration. This is the most important part of the food demonstration. Serve only sample-size portions in the food demonstrations. Food samples associated with a nutrition education lesson are an allowable expense, but meal-size portions or a complete meal service are not.

Distribute the recipes after the food demonstration, making sure that each has a nutrient analysis and the appropriate USDA statements that are required on printed materials, as specified in the [Social Marketing policy](#).



## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and materials you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Announce the AZ Health Zone Food Demonstration Training dates as they become available.
  - This training must be repeated every five years as a refresher. A learning management system refresher course is available on the AZ Health Zone website.
- Engage in conversation around recipe creation and virtual food demonstrations.





# Nutrient Goals and Guidelines



## Policy Expectations

Recipes used in food demonstrations, that are given through material distribution, or otherwise used through AZ Health Zone should meet the following Nutrient Goals and Guidelines. As stated in the USDA/FNS SNAP-Ed Federal Guidance, “Acceptable policy interventions are activities that encourage healthier choices based on the current DGA”. In order to meet such federal guidance, the Nutrient Goals and Guidelines (formerly known as the Nutrient Standards) policy is required for AZ Health Zone nutrition-related programming. It is important

to note that there is no single ingredient, food, or meal that determines an individual’s or family’s health. There are numerous social determinants of health that affect our community members’ daily lives, decision making, and dietary intake (see [AZ Health Zone’s Principles and Framework](#)). This policy aims to provide a framework for recipes to be assessed and created to meet individuals where they are at, encourage variety, and support the enjoyment of food and healthy relationships with food.

Recipes should contain foods that are readily available, low cost, and have ten ingredients or less (excludes water, salt, pepper, spices/seasonings, and nonstick cooking spray). Preparation time for each recipe should be 30 minutes or less, if possible. This does not include inactive cooking time (marinating, soaking, or setting) that may exceed 30 minutes. The equipment utilized in the preparation and cooking must be reflective of tools and appliances used by the participants receiving the recipe, or alternative tools must be suggested on the recipe or during the food demonstration event.

## Nutrient Goals and Guidelines

The following Nutrient Goals and Guidelines have been developed in collaboration with the AZ Health Zone Nutrient Standards and Recipe Development Working Group- a group of AZ Health Zone local agency and Arizona Department of Health Services staff members who have a nutrition-related position and/or have expertise in nutrition-related concepts. The goals and guidelines reflect the AZ Health Zone guiding principles and the teams’ values and interest in providing tasty and nourishing recipe options to the various communities, families, and individuals who interact with our programs.

The following Goals and Guidelines are:

1. Recipes encourage a variety of flavors, colors, textures, and cooking methods.
2. Recipes are flexible and support a variety of options including additions or substitutions for ingredients to accommodate for seasonality, accessibility, food allergies or intolerances, and/or personal preference.
3. Recipes highlight how to add at least one, nutrient-rich option from the food groups (fruits, vegetables, protein, grains, and dairy).
4. Recipes highlight how to try different preparation and cooking methods.
5. Recipes that reflect the interests, regional foods, and cultural influences of community members.
  - a. Recipes that are inspired by ethnic cuisines must be researched through reputable sources (see Message and Materials Development) and/or community engagement with members from the specific cultural group the recipe reflects.

### **Nutrient Analysis Needs**

Past editions of this policy required recipes to meet numerical standards for various nutrients such as sodium, saturated fat, added sugars, fiber, and calcium. Nutrient analysis to determine if recipes met these standards were conducted by a Registered Dietitian Nutritionist (RD/RDN) within local agencies or at ADHS, using ADHS nutrition specialist-approved software such as Food Processor, SQL Edition, Version 9.8.1 or above, or Nutritionist Pro. Recipes created under the updated Nutrient Goals and Guidelines policy will still be analyzed for nutrient content. Analysis will be completed or supervised by RD/RDNs using an approved software, for the purposes of displaying nutritional information if desired by participants.

### **Importance of Nutrient Goals and Guidelines**

Establishing and upholding the described recipe criteria is an important foundation of AZ Health Zone programming, social marketing, and nutrition outreach. These goals and guidelines promote the consumption of nutrient-rich foods and ensure the consideration of cultural backgrounds, availability of resources, and the environmental landscape present in communities receiving and participating in AZ Health Zone programming.

### **Ensuring Recipes Meet Nutrient Goals and Guidelines**

Choosing recipes from the AZ Health Zone website is preferred, as they already meet past or present goals and guidelines. However, if there is not a relevant or appropriate recipe that meets the needs and considerations of your community and/or learning objectives, recipes from outside sources can be used if they meet these goals and guidelines.

### **Reviewing Recipes for Acceptability**

ADHS may request to review recipes used by LIAs at any time, in addition to material reviews that can occur throughout the year or during the Management Evaluation process. LIAs may be asked to collect community feedback and the recipe may undergo a taste test. All recipes should emphasize nutrient-rich options from the food groups and support healthful eating patterns for all (from USDA Dietary Guidelines for Americans' principles). When multiple recipes or a collection of recipes are being used, there should be a focus on variety. Any recipe found not to align with this philosophy may be considered unacceptable for use. Recipes containing alcohol are not allowed for use in AZ Health Zone materials or activities.

## Our Commitment to You:

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of the Nutrient Goals and Guidelines policy, we will:

- Assist in identifying appropriate recipes, reputable sources, and/or provide suggestions to adjust a requested recipe to meet the goals and guidelines. Contact the AZ Health Zone Community Nutrition Specialist for this assistance and support.
- Create a recipe check sheet to aid in reviewing recipes for appropriateness (see [Appendix J](#)).
- Conduct material reviews periodically to monitor if recipes being used are meeting the goals and guidelines (see [Message and Materials Development](#)).
- Provide specific technical assistance through the AZ Health Zone Tribal Liaison when looking for or utilizing traditional or culturally relevant ingredients/recipes that relate specifically to Arizona tribes. AZ Health Zone Tribal Liaison can assist in identifying stakeholders to ensure
- LIA also has support and assistance from appropriate tribal partners and community members.
- Provide opportunities for groups of practice and collaboration among the SIT and LIAs regarding recipe nutrient goals and guidelines and recipes selected for the website (e.g. working groups, conference sessions, etc.).
- Continue updating food and nutrition related G&P policies as we continue to collaborate, learn more best practices, and consider relevant, updated research.



# Recipe Format

## Policy Expectations

Recipes that are developed or adapted by the AZ Health Zone staff and LIAs will follow consistent formatting.

## Why is Consistent Recipe Formatting Important?

Consistent formatting among all AZ Health Zone staff and LIAs will allow nutrient standards to be maintained and provide a consistent look to and expectation of materials.

## Required Recipe Format

The required recipe format is as follows:

### Title

1. The first letter of each word will be capitalized.

### Ingredients

1. Weights and measures used in the recipe ingredient list will be spelled out. These include: pound, ounce, teaspoon, tablespoon, and cup. Abbreviations will only be used for ounce (oz.) if space is limited. The use of more complex terms, such as pint and quart, will be avoided if possible.
2. The quantities of ingredients will be left-justified when listed in whole numbers. If an ingredient contains a fraction, the denominations of the fractions will be aligned with the whole numbers
3. Do not use brand names.
4. Avoid state-of-origin descriptions. For example, use 3 Red Delicious apples, not 3 Washington State apples.
5. The descriptions of ingredients will be in lowercase letters. When using a whole ingredient, list the ingredient first, followed by preparation instructions. If appropriate, describe the size of the ingredient.
6. When an ingredient must be prepared before being measured, describe how to prepare it first, followed by the ingredient name.
7. Common preparation terms will be used, such as sliced, finely sliced, chopped, finely chopped, and cut into 2-inch strips. More complex terms such as julienne and mince will be avoided.
8. When using frozen fruits and vegetables, list the quantity of the ingredient (cup) instead of the weight of the bag (e.g., one 16-ounce bag). Describe whether the frozen item should be thawed or kept frozen.
9. When a recipe contains honey as an ingredient, place an asterisk at the end of the word 'honey' and reference the asterisk at the end of the recipe with:  
\*honey should not be fed to infants less than one year of age.
10. Ingredients in the ingredient list will be in the same order as in the preparation instructions.

## Directions

1. Directions must be written in plain language and easy to understand.
2. Each step will be numbered.
3. When space permits, begin the directions with the statement, "Wash hands with soap and warm water."
4. If there is a fresh fruit or vegetable in the recipe, include the statement, "Rinse fruit or vegetable before preparing."
5. When ingredients are placed in a bowl, saucepan, pot, or pan, describe the size of the container.
6. When a recipe is prepared on the stovetop, describe how hot the burner should be.
7. When a recipe is prepared in the oven, state the temperature in °F. When a recipe is prepared in the microwave oven, describe the power level of the microwave setting in capital letters.
8. When the recipe contains meat, state the internal cooking temperature in °F that the meat needs to reach in order to be safe for consumption.
9. End each recipe preparation description with an appropriate action statement, such as, "Serve immediately."

## Yield

At the end of the directions, include the number of servings a recipe yields and the approximate serving size (e.g., Makes 6 servings, approximately ½ cup each).

## Nutrient Analysis

Include the recipe analysis at the end of each recipe, displayed in either a vertical or horizontal format, depending on document format. The order and type style for listing nutrients will be as follows:

Nutrition information per serving: Calories, 88; Carbohydrate, 12 g; Protein, 5 g; Total Fat, 2 g; Saturated Fat, 1 g; Trans Fat, 0 g; Cholesterol, 0 mg; Fiber, 4.5 g; Total Sugars, 18 g; Sodium, 229 mg; Calcium, 200 mg; Folate, 85 mcg; Iron, 1.2 mg.

## Miscellaneous

A courtesy line is required if the recipe is used with permission from another source. Place the courtesy line at the end of the recipe. Include any required wording as specified by the publisher or owner of the recipe. An example is, "Courtesy of Cooking Light."

## Suggested Guidance

Use existing tested recipes from these or similar resources when possible:

- [AZ Health Zone website](#)
- [Eat Fresh](#)
- [Have a Plant - Produce for Better Health®](#)

Recipes that are printed, distributed electronically, or displayed on a webpage for the target audience must include the **USDA Non-Discrimination Statement**. For more information, please see the **Messaging and Materials Development** policy in the [Social Marketing policy](#).



## Recipe Format Example

See the following recipe for an example of the required format: Apple Broccoli Salad

### Apple Broccoli Salad

#### Ingredients

3 apples, chopped  
3 cups fresh raw broccoli, chopped  
1 tablespoon red onion, chopped  
1/3 cup raisins  
1/2 cup fat-free vanilla yogurt

#### Directions

1. Wash hands with soap and warm water.
2. Wash apples and broccoli. Cut the apple and take out the seeds.
3. Chop the apples, broccoli, and onion.
4. Mix all ingredients together.
5. Serve cold.

Makes 6 servings, approximately 1/2 cup each.

**Nutrition information per serving:** Calories, 96; Carbohydrate, 22 g; Protein, 2.4 g; Total Fat, 0.25 g; Saturated Fat, 0.03 g; Trans Fat, 0 g; Cholesterol, 0.42 mg; Fiber, 3 g; Total Sugars, 18 g; Sodium, 30 mg; Calcium, 63 mg; Folate, 28 mcg; Iron, 0.07 mg.

This material was federally funded by USDA's Supplemental Nutrition Assistance Program through the AZ Health Zone.

## Our Commitment to You

The AZ Health Zone SIT is committed to ensuring that you have the tools, resources, and flexibility you need to meet the needs of your communities. To support you in the successful execution of this policy, we will:

- Provide a sample of the required recipe format (see guidance above).
- Be available for further questions about developing recipes in the required format. Contact the [SIT community nutrition specialist](#).
- Provide the Recipe Evaluation and [Nutrient Criteria Check Sheet tool](#).

# Appendices

# Appendix A: Labor Activity Report

## Labor Activity Report

Department of Health Services

Pay Period: \_\_\_\_\_ To: \_\_\_\_\_

Name: LastName, FirstName

Position No: ???????????

Timekeeper's Name: \_\_\_\_\_

EIN: ?????

Telephone Number: \_\_\_\_\_

Default Funding	% Change	Description	Budget FY	Function	PPC	%	1/1	1/2	1/3	1/4	1/5	1/6	1/7	1/8	1/9	1/10	1/11	1/12	1/13	1/14	Total	
							S	S	M	T	W	T	F	S	S	M	T	W	T	F		
																						0
																						0
																						0
																						0
																						0
																						0
																						0
0.00%	0%						0%	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

### LEAVE Time

COMP	300																					0
HOLIDAY	300																					0
ANNUAL	300																					0
SICK	313/311																					0
JURY DUTY	350																					0
PARTIAL DAY	105																					0
OTHER																						0
<b>Total Leave Hours</b>							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

### Pay Period Totals

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

### NETWORK SNAP-Ed Time

# Hours **Management																						0
# Hours **Direct																						0
<b>Total SNAP-Ed Hours</b>							0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

I certify that the hours above represent, to the best of my knowledge, an accurate record of the time that I have devoted to the identified program/activities as per ADHS policies and procedures.

**NOTE:** Due to Timekeeper when signing time sheet.  
Due into Payroll Office on Monday, before close of business.  
LAR will not be processed without Signatures.

\_\_\_\_\_  
Employee Signature Date

\_\_\_\_\_  
Supervisor Signature Date

\_\_\_\_\_  
Financial Accountant Date

- \*\*Management or administrative hours include time spent:
- In travel for training or staff meeting for nutrition education
  - Performing duties related to payroll or accounting
  - Preparing invoices, quarterly or other program reports
  - In professional development activities
  - Supervising LA program personnel

- \*\*Direct hours include time spent:
- Preparing lesson plans
  - In travel to and from sites where direct delivery services are provided
  - Teaching allowable nutrition education activities to food stamp eligible persons
  - Administering surveys or evaluation questionnaires
  - Summarizing results of nutrition education activities
  - Ordering nutrition education materials
  - Conducting physical activity demonstrations and promotions that include a nutrition message
  - Making referrals to Food Stamp and WIC programs
  - Setting up for direct delivery nutrition education activities

# Appendix B: Time Documentation Tip Sheet

Tip Sheet: How to code your time appropriately?

## SNAP-Ed Time Documentation

Federal SNAP-Ed guidelines require that Local Implementing Agencies maintain a system of continuous time reporting as well as a breakdown of percent of time allocated for SNAP-Ed management/administrative duties versus time spent on SNAP-Ed direct delivery of services. Biweekly certification of weekly time and effort reporting is required. Records must be maintained and must be signed by end of pay period bimonthly or twice a month, and include a supervisor's signature.

### DIRECT TIME

Time spent on SNAP-Ed direct delivery, multilevel interventions, and community and public health approaches including Policy, Systems and Environmental (PSE) change efforts. Preparing and delivering activities related to direct services. Examples of this type of activity include:

#### *SNAP-Ed Presentations and Classes*

- Preparing, researching, reviewing, revising a presentation or training materials to be used in direct education with SNAP-eligible audiences.
- Delivering training or technical assistance to SNAP-Ed audiences/staff.
- Conducting a SNAP-approved Train-the-Trainer: Teach staff how to implement a program or class.
- Travel to/from sites to provide direct education or technical assistance or PSE activities/meetings.
- Exhibiting or presenting SNAP-Ed program initiatives at conferences when the target population is the audience.

#### *Meetings with Community and Partners to Advance SNAP-Ed Strategies*

- Participation in community taskforces or coalitions to achieve common goals in support of SNAP-approved PSE strategies that meet grant deliverables.
- Discussing SNAP-Ed activities at meetings.
- Participation with AZ Health Zone Committee Meetings.
- Strategizing with team members on how to meet grant deliverables.
- Working with SNAP-Ed families and/or staff at all approved sites.
- Researching, preparing for, and meeting with partners, either individually or through collaborations to advance PSE or direct education.
- Travel to/from sites related to SNAP-Ed PSE activities, initiatives, and/or meetings.

#### *Supporting SNAP-Ed Implementation*

- Researching and compiling information about health status, best practices, and related data and knowledge.
- Researching SNAP-Ed curricula and evidence-based strategies.
- Ordering SNAP-Ed materials and resources.
- Performing assessments and evaluations (e.g., Go NAP SACC tools, etc.) at SNAP-Ed locations.
- Evaluation tasks such as proctoring surveys, organizing survey packets, evaluation incentive.

### *Self-Audit Statements*

*I am doing something that advances a SNAP-Ed policy, system, or environmental change.*

*I am preparing and providing direct education to SNAP-eligible populations.*

*I am presenting on SNAP-Ed initiatives.*

*I am conducting SNAP-Ed assessments and evaluations.*

*I am working with a community partner to advance a SNAP-Ed strategy.*

# Appendix B: Time Documentation Tip Sheet

## MANAGEMENT/ADMINISTRATIVE TIME

Time spent on tasks related to the administration of the SNAP-Ed Program. Examples of this type of activity include:

### *Reporting & General Administration*

- Filling out time documentation (i.e., PARs/LARs).
- Filling out Travel.
- Completing Monthly AZ Health Zone reporting and SARTs/SARNs.
- Preparing reports and proposals.
- Updating grant/project management tools (i.e., Trello and Dashboard).
- Creating statistics.

### *Staff-Related Administration*

- One-on-one staff meetings.
- Planning for a regular staff meeting.
- Providing AZ Health Zone policy and procedures training to staff.
- Traveling to and providing staff training.
- Professional development activities including trainings, webinars, conferences, etc.
- Attending the AZ Health Zone Annual Conference and trainings.

### *Local Implementing Agency/Employer-Related Administration*

- Payroll responsibilities.\*
- Correcting and approving timesheets.
- Developing a job description and completing all activities related to the hiring process.
- Completing any new employee trainings.
- Conducting new employee training with staff.
- Addressing employer administrative issues such as building and parking garage badge access problems.
- Vehicle maintenance questions/concerns.
- Participating in employer-sponsored trainings.
- Discussions with staff on performance and completing performance evaluations.

### *Self-Audit Statements*

*I am completing reports.*

*I am doing something for the my employer.*

*I am participating in a professional development activity.*

*I am addressing a staff-related issue.*

\* Leave Time (e.g., vacation, sick, etc.) is paid under the grant but should **NOT** be documented under Management OR Direct Time.



# Appendix C: Acronyms

<b>ACS</b>	American Community Survey-Census
<b>ADHS</b>	Arizona Department of Health Services
<b>AHCCCS</b>	Arizona Health Care Cost Containment System
<b>ATA</b>	American Translators Association
<b>BMI</b>	Body Mass Index
<b>BNPA</b>	Bureau of Nutrition and Physical Activity-ADHS
<b>CACFP</b>	Child and Adult Care Food Program
<b>CDC</b>	Centers for Disease Control and Prevention
<b>CER</b>	Contractor's Expenditure Report
<b>CFR</b>	Code of Federal Regulations
<b>CHEA</b>	Council for Higher Education Accreditation
<b>CSFP</b>	Commodity Supplemental Food Program
<b>CLAS</b>	Culturally and Linguistically Appropriate Services
<b>DE</b>	Direct Education
<b>DES</b>	Department of Economic Security
<b>DGA</b>	Dietary Guidelines for Americans
<b>DPS</b>	Department of Public Safety
<b>EARS</b>	Education and Administrative Reporting System
<b>EFNEP</b>	Expanded Food and Nutrition Education Program
<b>ECE</b>	Early Childhood Education; Early Care and Education
<b>EBT</b>	Electronic Benefits Transfer
<b>FDPIR</b>	Food Distribution Program on Indian Reservations
<b>FFY</b>	Federal Fiscal Year
<b>FINI</b>	Food Insecurity Nutrition Incentive grant
<b>FNS</b>	Food and Nutrition Service
<b>FPL</b>	Federal Poverty Level
<b>FTE</b>	Full Time Employee
<b>LAR</b>	Labor Activity Report
<b>LIA</b>	Local Implementing Agency

<b>MNT</b>	Medical Nutrition Therapy
<b>MOA</b>	Memorandum of Agreement
<b>MOU</b>	Memorandum of Understanding
<b>NCCA</b>	National Commission for Certifying Agencies (NCCA)
<b>NERI</b>	Nutrition Education Reinforcement Item
<b>NSLP</b>	National School Lunch Program
<b>OMB</b>	Office of Management and Budget
<b>PO</b>	Purchase Order
<b>PSE</b>	Policy, Systems, and Environmental change
<b>PTO</b>	Paid Time Off
<b>RDN</b>	Registered Dietitian Nutritionist
<b>RFGA</b>	Request for Grant Award
<b>RFP</b>	Request for Proposal
<b>SARN</b>	Semi-Annual Report Narrative
<b>SART</b>	Semi-Annual Report Table
<b>SEEDS</b>	SNAP-Ed Electronic Data System
<b>SEM</b>	Social-Ecological Model
<b>SFSP</b>	Summer Food Service Program
<b>SHAC</b>	School Health Advisory Council
<b>SET</b>	State Evaluation Team
<b>SIT</b>	State Implementation Team
<b>SMART</b>	Specific, Measurable, Appropriate, Realistic, Time-specific
<b>SNAC</b>	State Nutrition Action Committee
<b>SNAP</b>	Supplemental Nutrition Assistance Program
<b>SNAP-Ed</b>	Supplemental Nutrition Assistance Program-Education
<b>SSI</b>	Supplemental Security Income
<b>TANF</b>	Temporary Assistance to Needy Families
<b>USDA</b>	United States Department of Agriculture
<b>WCFI</b>	Wilder Collaboration Factors Inventory
<b>WIC</b>	Women, Infants and Children

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix



FISCAL YEAR (FY) 2024

## CAP-CENTERED EVALUATION FRAMEWORK

FOR ARIZONA'S FY21-25 SNAP-ED PLAN CYCLE

Gray items designate [national SNAP-Ed Evaluation Framework](#) indicators.

The AZ Health Zone Evaluation Framework is designed to assess, at a minimum, progress in:

- The program's three guiding principles of Equity, Community Engagement, and Trauma Aware
- The program's three focus areas of Active Living, Childhood, and Food Systems at the *settings* and *sectors* levels
- Adult and youth behaviors at the *individual* level

<b>Cross Cutting Work in FY24-25:</b> The AZ Health Zone's SNAP-Ed Program is founded on the <b>guiding principles</b> of Equity, Community Engagement, and Trauma Aware	<b>AZ Health Zone Indicators</b> <i>How is progress related to each of these three principles measured in FY24-25?</i>
<b>Trauma-Informed Approach (TIA)</b> The State Evaluation Team measures <b>PROGRESS IN TIA IMPLEMENTATION</b> .	LIA staff survey (FY25) Qualitative analysis of optional SARN section (FY24-25)
<b>Community Engagement (CE)</b> The State Evaluation Team measures <b>LIA PROGRESS IN COMMUNITY ENGAGEMENT</b> using the <b>Spectrum of Public Participation</b> framework.	Descriptive statistics of CE reported in SEEDS (FY24-25) Qualitative analysis of SARNs (FY24-25) Analysis of CE used during the PARA process (FY25) Quantitative analysis of CE level, Student Involvement, & School Community Involvement in the SLM (FY24)
<b>Equity</b> The State Evaluation Team includes these <b>EQUITY-RELATED INDICATORS</b> to enhance the AZ Health Zone's understanding of and ability to address equity.	Equity gap scores for multiple assessments in this Framework (FY24-25) Qualitative CE Case Study: Yuma Resident Leadership Academy (FY24-25) Between- and within-groups analyses (e.g., by geography, gender, rates of free-and-reduced-price lunch, & more) for select PSE and individual-level assessments (FY24-25)

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

PSE Focus Area STRATEGY	Process Indicators <i>Where do LIAs report implementation support?</i>	FY24 <i>Analysis &amp; Reporting (FY data is collected)</i>	FY25 <i>Tentative Analysis &amp; Reporting (FY data is collected)</i>	State-Level Population Results
<b>Active Living</b>  Support <b>DEVELOPMENT OF THE BUILT ENVIRONMENT</b> to increase access to and use of community infrastructure(s) [i.e., work toward new PA resources]	<b>SEEDS: Built Environment</b>  <i>Active Living Policy</i>	<b>The FACT GO is available for LIAs to select</b>		<b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b>  PA & Reduced Sitting R7 Quality of Life R11 <sub>a,b</sub>
	<b>SEEDS: Built Environment</b>  <i>Walking, Biking &amp; Transit Networks</i>	<b>Walk Audit Pilot</b>  Special Report: Pilot Launch	<b>The Walk Audit is newly available for LIAs</b>  # communities completing pre (FY25) ST5 <sub>b</sub> Pre-only results (FY25) ST5 <sub>c</sub>	
	<b>SEEDS: Built Environment</b>  <i>Active Living Policy; Active Transport; Development of PA Resources; Walking, Biking &amp; Transit Networks; Community Engagement</i>  <b>SARN</b>  <i>LIAs describe Active Living Policy; Active Transport; Development of PA Resources; Walking, Biking &amp; Transit Networks; Community Engagement.</i>	<b>Active Living Policy; Active Transport; Development of PA Resources; Walking, Biking &amp; Transit Networks</b>  Change over time (FY22-24) Outcomes (FY23-24) ST7*, MT6,7,LT8,9,10,11  <b>Community Engagement</b>  Change over time (FY22-24) ST6 <sub>c</sub> , LT11		
	<b>SEEDS: Built Environment</b> <b>SARN: Built Environment</b> <b>LIA Conversations</b>		<b>Active Living BUILT ENVIRONMENT progress within the larger community system</b>	

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

<b>PSE Focus Area</b> <small>STRATEGY</small>	<b>Process Indicators</b> <small>Where do LIAs report implementation support?</small>	<b>FY24</b> <small>Analysis &amp; Reporting (FY data is collected)</small>	<b>FY25</b> <small>Tentative Analysis &amp; Reporting (FY data is collected)</small>	<b>State-Level Population Results</b>
<b>Active Living</b> Increase usability of and access to <b>PHYSICAL ACTIVITY (PA) RESOURCES</b> and <b>COMMUNITY PROGRAMMING</b> [i.e., work on or with existing PA resources]	<b>SEEDS: PA Resources</b> Improve Usability & Access to Resources  <b>PARA Packet</b> LIAs describe Community Engagement efforts	<b>The Community-Engaged PARA is available for LIAs to select</b>		<b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b>  PA & Reduced Sitting <b>R7</b> Quality of Life <b>R11 a-b</b>
	<b>SEEDS: PA Resources</b> Shared Use Agreements, Social Support Networks, Community Engagement  <b>SARN</b> LIAs describe Shared Use Agreements, Social Support Networks, and/or Community Engagement.	<b>Shared Use Agreements, Social Support Networks</b> Change over time (FY22-24) <b>MT7</b>  <b>Community Engagement</b> Change over time (FY22-24) <b>ST6,LT11</b>	# resources re-assessed (FY24-25) <b>MT6a</b> Pre-post change (FY21-25) <b>MT6d</b> # resources with changes (FY21-25) <b>LT6c</b> # resources with multilevel changes (FY21-25) <b>LT6a</b> LIA contribution analysis (FY21-25)	
	<b>SEEDS: PA Resources</b> <b>SARN: PA Resources</b> <b>LIA Conversations</b>		<b>Active Living PA RESOURCES progress within the larger community system</b>	

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

<b>PSE Focus Area</b> <small>STRATEGY</small>	<b>Process Indicators</b> <small>Where do LIAs report implementation support?</small>	<b>FY24</b> <small>Analysis &amp; Reporting (FY data is collected)</small>	<b>FY25</b> <small>Tentative Analysis &amp; Reporting (FY data is collected)</small>	<b>State-Level Population Results</b>
<b>Childhood</b>  Support the development, implementation, and evaluation of policies that promote nutrition and physical activity in <b>EARLY CARE &amp; EDUCATION (ECE)-BASED SYSTEMS</b>	<p><b>Go NAPSACC Portal</b></p> <p>Consultant reports TA provided to ECE using My Programs tab</p> <p><b>SEEDS: ECE Systems</b></p> <p><i>Empower Policy-Local, Staff Development, Nutrition &amp; Feeding Practices, ECE-Based Agriculture, PA Environment</i></p> <p><b>SEEDS: ECE Systems</b></p> <p><i>Partnerships, Learning Collaboratives, Community Coordination, Community Engagement</i></p> <p><b>SARN</b></p> <p>LIAs (1) describe ECE-related partnerships, <i>Learning Collaboratives, Community Coordination</i>, and/or <i>Community Engagement</i>, and/or (2) answer the target end-year SARN question about <i>Community Coordination</i></p> <p><b>SEEDS: ECE Systems</b></p> <p><b>SARN: ECE Systems</b></p> <p><b>LIA Conversations</b></p>	<p><b>6 Go NAPSACC topics available for LIAs to select: Child Nutrition, Breastfeeding &amp; Infant Feeding, Farm to ECE, Infant &amp; Child PA, Outdoor Play &amp; Learning, Screen Time</b></p> <p><b>ECE-Related Partnerships</b></p> <p>Change over time (FY22-24) <b>ST7*</b><sub>a, b, 8*</sub><sub>a, c</sub></p> <p>Outcomes (FY23-24) <b>ST7*</b><sub>c, LT8, 9<sub>c</sub>, 10, 11</sub></p> <p><b>Learning Collaboratives, Community Coordination, Community Engagement</b></p> <p>Change over time (FY22-24) <b>ST7*</b><sub>b, 8*</sub><sub>c, d</sub></p> <p><b>Community Coordination</b></p> <p>Strength &amp; influence (FY24) <b>ST7*</b><sub>a- b, 8</sub></p>	<p>Pre-post change (FY21-25) <b>MT5*</b><sub>b- d, 6<sub>b- d</sub></sub></p> <p># ECEs with changes (FY21-25) <b>LT5<sub>c, 6<sub>c</sub></sub></b></p> <p><b>Childhood ECE SYSTEMS progress within the larger Community system</b></p>	<p><b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b></p> <p>Fruit &amp; Veg <b>R2*</b><sub>a- b</sub></p> <p>Whole Grain <b>R3<sub>a- c</sub></b></p> <p>Dairy <b>R4<sub>a- d</sub></b></p> <p>Beverages <b>R5<sub>a- d</sub></b></p> <p>Food Security <b>R6<sub>a</sub></b></p> <p>PA, Sitting <b>R7<sub>a, c</sub></b></p> <p>Breastfeeding <b>R8<sub>a- d</sub></b></p> <p>Family Meal <b>R10<sub>a- b</sub></b></p>

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023



# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

PSE Focus Area STRATEGY	Process Indicators <i>Where do LIAs report implementation support?</i>	FY24 <i>Analysis &amp; Reporting (FY data is collected)</i>	FY25 <i>Tentative Analysis &amp; Reporting (FY data is collected)</i>	State-Level Population Results
<b>Childhood</b>  Support the development, implementation, and evaluation of policies that promote nutrition and physical activity in <b>SCHOOL &amp; OTHER YOUTH-BASED SYSTEMS</b>	<b>SEEDS: School Systems</b>  <i>Nutrition Practices &amp; Environments-SLM, Community Engagement</i>  <b>Scorecard Cover Sheet</b>	<b>The SLM Scorecard is available for LIAs to select</b>  Pre-post change (FY22-24) <b>MT5<sub>b,d</sub></b> # schools with changes (FY22-24) <b>LT5<sub>c</sub></b> LIA contribution analysis (FY22-24)		<b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b>  Educational Attainment <b>LT15<sub>a-d</sub></b> Diet Quality <b>R1</b> Fruit & Veg <b>R2<sub>a,b</sub></b> Whole Grain <b>R3<sub>a-c</sub></b> Dairy <b>R4<sub>a-d</sub></b> Beverages <b>R5<sub>a-d</sub></b> Food Security <b>R6<sub>a</sub></b> PA, Sitting <b>R7<sub>a,c</sub></b> Quality of Life <b>R11<sub>a-b</sub></b>
	<b>SEEDS: School Systems</b>  <i>Policy Revision &amp; Communication, Wellness Committees, Staff Development-Other, School-Based Agriculture, Community Engagement</i>	<b>The WellSAT 3.0 is available for LIAs to select</b>  Pre-post change (FY21-25) <b>MT5<sup>*</sup><sub>b,6b</sub></b> # districts with changes (FY21-25) <b>LT5<sub>a,6c</sub></b>		
	<b>SEEDS: School Systems</b>  <i>School-Based Agriculture</i>	<b>School Gardens Tool Pilot</b>  Special Report: Pilot Launch	<b>School Gardens Tool is newly available for LIAs</b>  # schools completing pre (FY25) <b>ST5<sub>b</sub></b> Pre-only results (FY25) <b>ST5<sub>c</sub></b>	
	<b>SEEDS: School Systems</b> <b>SARN: School Systems</b> <b>LIA Conversations</b>	<b>Childhood SCHOOL SYSTEMS progress within the larger community system</b>		

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

PSE Focus Area STRATEGY	Process Indicators <i>Where do LIAs report implementation support?</i>	FY24 <i>Analysis &amp; Reporting (FY data is collected)</i>	FY25 <i>Tentative Analysis &amp; Reporting (FY data is collected)</i>	State-Level Population Results
<b>Food Systems</b>  Support the PRODUCTION, DISTRIBUTION, & AVAILABILITY OF FOOD to increase access to and consumption of healthy foods	<b>SEEDS: Food Systems</b> <i>Food Systems Policy</i>	<b>The FACT GO is available for LIAs to select</b> # FACT GO communities (FY23-24) ST8* FACT GO progress (FY23-24) MT7,LT12,13		<b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b>  Diet Quality R1 Fruit & Veg R2*a-b Whole Grain R3a-c Dairy R4a-d Beverages R5a-d Food Security R6a Family Meals R10a-b Quality of Life R11a-b
	<b>SEEDS: Food Systems</b> <i>Food Retail-Store Changes</i>	<b>The STORE is available for LIAs to select</b> Pre-post change (FY21-25) MT5*d-e # stores with changes LT5a,18a LIA contribution analysis (FY21-25)		
	<b>SEEDS: Food Systems</b> <i>Food Access-Food Banks/Pantries</i>	<b>The HFPAT is newly available for LIAs to select</b> # pantries completing pre (FY24) ST5b Pre-only results (FY24) ST5c		
	<b>SEEDS: Food Systems</b> <i>Community Gardens</i>	<b>Community Gardens Tool Pilot</b> Special Report: Pilot Launch	<b>Community Gardens Tool is newly available for LIAs</b> # gardens completing pre (FY25) ST5b Pre-only results (FY25) ST5c	
	<b>SEEDS: Food Systems</b> <i>Farmers/Growers, Food Retail, Community Engagement</i>  <b>SARN</b> <i>LIAs describe Farmers/Growers, Food Retail, Community Engagement, and/or Partnerships.</i>	<b>Farmers/Growers</b> Change over time (FY22-FY24) ST7*a-b,8*a Outcomes (FY22-FY24) ST7*a-b,8*a  <b>Food Retail</b> Change over time (FY22-FY24) ST7*a-b,8*a Outcomes (FY22-FY24) MT8  <b>Community Engagement &amp; Organizational Partnerships</b> Change over time (FY22-FY24) ST6c,7*a-b,8*a		
	<b>SEEDS: Food Systems</b> <b>SARN: Food Systems</b> <b>LIA Conversations</b>	<b>FOOD SYSTEMS progress within the larger community system</b>		

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

Individual Level DESCRIPTION	Process Indicators <i>Where do LIAs report implementation support?</i>	FY24 <i>Analysis &amp; Reporting (FY data is collected)</i>	FY25 <i>Tentative Analysis &amp; Reporting (FY data is collected)</i>	State-Level Population Results
<b>Adult</b> Measures <b>ADULT NUTRITION &amp; PA BEHAVIORS AND BEHAVIOR PRECURSORS</b> before & after adult DE	<b>SEEDS: Any Focus Area</b> Any Strategy Any Activity Action: Direct Education-Adult Curriculum: Around the Table  <b>ATT Cover Sheet</b>	<b>The ATT Nourishing Families Survey is available to select</b>  Pre-post change (FY24) <b>MT1*,2*</b>		<b>ADHS statewide monitoring of trends &amp; reductions in disparities across broad time scales</b>  Fruit & Veg <b>R2*</b> Whole Grains <b>R3</b> Beverages <b>R5</b> Food Security <b>R6</b> PA & Reduced Sitting <b>R7</b> Quality of Life <b>R11<sub>a-b</sub></b>
	<b>SEEDS: Adult DE</b> <b>SARN: Adult DE</b> <b>LIA Conversations</b>	<b>Integration of ADULT DE within community PSE change</b>		
	<b>SEEDS: School Systems</b> Any Activity  <b>KAN-Q Cover Sheet</b>	<b>KAN-Q Validation</b>  Special Report: Validation Findings Cross-sectional results for nutrition & PA (FY24) <b>ST1,3,MT1*,3*</b> Correlation analysis of reported nutrition behaviors with SLM results (FY24) <b>LT1</b>	<b>KAN-Q 2.0 is newly available to LIAs in Spring</b>  Cross-sectional results for nutrition & PA (FY25) <b>ST1,3,MT1*,3*</b> Correlation analysis of KAN-Q results with Local Wellness Policy changes and School Garden tool results at pre (FY25) <b>LT1,3</b>	
<b>Youth</b> Measures <b>YOUTH NUTRITION &amp; PA BEHAVIORS AND BEHAVIOR PRECURSORS</b> when receiving MLI support	<b>SEEDS: Youth DE</b> <b>SARN: Youth DE</b> <b>LIA Conversations</b>	<b>Integration of YOUTH DE within community PSE change</b>		

\*SNAP-Ed Priority Outcome Indicator

Last updated June 2023

# Appendix D: REVISED FY23-25 Evaluation Framework Matrix

## FY24 MENU OF ASSESSMENTS AVAILABLE TO LIAS

ACTIVE LIVING	CHILDHOOD: ECEs	CHILDHOOD: SCHOOLS	FOOD SYSTEMS	INDIVIDUAL LEVEL
FACT GO	Go NAPSACC: CN	SLM Scorecard	FACT GO	ATT NF Survey
PARA	Go NAPSACC: ICPA	WELLSAT 3.0	STORE	KAN-Q Validation
Walk Audit Pilot	Go NAPSACC: BIF	School Gardens Pilot	HFPAT	
	Go NAPSACC: FTE		Community Gardens Pilot	
	Go NAPSACC: ST			
	Go NAPSACC: OPL			

### ACRONYMS

ADHS	ARIZONA DEPARTMENT OF HEALTH SERVICES
ATT	AROUND THE TABLE (AN AZ HEALTH ZONE-APPROVED CURRICULUM)
BIF	GO NAPSACC BREASTFEEDING & INFANT FEEDING MODULE
CAP	COMMUNITY ACTION PLAN
CE	COMMUNITY ENGAGEMENT
CN	GO NAPSACC CHILD NUTRITION MODULE
DE	DIRECT EDUCATION
ECE	EARLY CARE & EDUCATION
FACT GO	FOOD SYSTEMS AND ACTIVE LIVING GOALS ASSESSMENT
FTE	GO NAPSACC FARM TO ECE MODULE
FY	FISCAL YEAR
Go NAPSACC	(GO = ONLINE) NUTRITION AND PHYSICAL ACTIVITY SELF-ASSESSMENT FOR CHILD CARE
HFPAT	HEALTHY FOOD PANTRY ASSESSMENT TOOL
ICPA	GO NAPSACC INFANT & CHILD PHYSICAL ACTIVITY MODULE
KAN-Q	KIDS' ACTIVITY & NUTRITION QUESTIONNAIRE
LIA	LOCAL IMPLEMENTING AGENCY
LT	LONG TERM (NATIONAL SNAP-ED EVALUATION FRAMEWORK INDICATOR)
MLI	MULTI-LEVEL INTERVENTION
MT	MEDIUM TERM (NATIONAL SNAP-ED EVALUATION FRAMEWORK INDICATOR)
NF	NOURISHING FAMILIES (FROM THE AROUND THE TABLE SERIES)
OPL	GO NAPSACC OUTDOOR PLAY & LEARNING MODULE
PA	PHYSICAL ACTIVITY
PARA	PHYSICAL ACTIVITY RESOURCE ASSESSMENT
PSE	POLICY, SYSTEMS, & ENVIRONMENT
R	POPULATION-LEVEL (NATIONAL SNAP-ED EVALUATION FRAMEWORK INDICATOR)
SARN	SEMI-ANNUAL REPORT NARRATIVE
SEEDS	SNAP-ED ELECTRONIC DATA SYSTEM
SLM	SMARTER LUNCHROOM MOVEMENT
SNAP-Ed	SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM—EDUCATION
ST	SHORT TERM (NATIONAL SNAP-ED EVALUATION FRAMEWORK INDICATOR)
ST	GO NAPSACC SCREEN TIME MODULE
STORE	STORE OPPORTUNITIES IN THE RETAIL ENVIRONMENT
WELLSAT	WELLNESS SCHOOL ASSESSMENT TEST

# Appendix E: Management Evaluation Tool

<b>Name of Local Implementing Agency (LIA):</b>	<b>Date:</b> (Fiscal year & Quarter of financials under review: ex. FY19 Q1)
<b>LIA Staff:</b> (Names, Titles, SNAP-Ed Roles)	<b>Reviewer:</b> (Name, Title, AZ State Agency)

Please use the guidelines below to assess LIA performance using scale rating:

Scale Rating	Likert	Description
1	Never or rarely meets expectations	LIA does not have understanding of policy and is not in compliance
2	Attempts to meet expectations	LIA understands policy yet has not been able to enforce at an acceptable rate
3	Occasionally meets expectations	In compliance, yet only meets expectations 50-75% of the time
4	Always (or almost always) meets expectations	Meets expectation and is in full compliance at least 76% of the time

**\*\*All questions in grey should be completed prior to ME date at LIA site\*\***

I. Staffing: Performance, Training, and Competency					
Review Area	Assessment				Comments
1. At least one staff member attended the annual conference.	Yes	No	N/A		
2. At least one staff member attended the Guidance and Policy training.	Yes	No	N/A		
3. Supervisor observations are being conducted annually on all staff who conduct Direct Education.	1	2	3	4	(Provide observation documentation for review)
4. All staff have completed the <b>mandatory annual</b> civil rights training.	1	2	3	4	(Provide documentation of training (dates, agendas, sign-in sheet, certificate, etc.))
5. All staff providing SNAP-Ed directly to children and/or vulnerable adults have <b>current</b> fingerprinting cards on file.	1	2	3	4	(Provide a list of all staff with fingerprinting cards)



# Appendix E: Management Evaluation Tool

## AZ Health Zone Management Evaluation Tool

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6. An RD is on staff or on contract. (Recommended only)	Yes	No	N/ A	
7. A physical activity expert is on staff or on contract. (Recommended only)	Yes	No	N/ A	
8. Staffing is adequate to achieve the program objectives.	1	2	3	4
9. Describe how all staff competency is maintained and evaluated (e.g., performance evaluations).				
10. Describe any challenges with staff turnover, hiring, etc.				
11. How do you ensure that staff are trained on new curricula to ensure consistency and fidelity of education/intervention delivery?				

II. Time and Effort					
Review Area	Assessment				Comments
1. Timesheets and time documentation forms are readily available for review.	1	2	3	4	
2. Staff time spent on the program is consistent with the SNAP-Ed plan. Please indicate on assessment scale	1	2	3	4	
3. When accounting for time and effort of staff committing less than 100% time to SNAP-Ed, the total cost, including time not worked (annual and sick leave) is computed and charged as required by FNS.	1	2	3	4	
4. Time records and certifications are signed bi-weekly by both employees and immediate supervisors.	1	2	3	4	
5. All timesheets are completed after the fact and they reflect actual time.	1	2	3	4	(If no, please indicate percentage of compliance)

# Appendix E: Management Evaluation Tool

AZ Health Zone Management Evaluation Tool

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6. Staff salaries are reasonable and necessary.	1	2	3	4	(Ensure current salaries are aligned with budgeted salaries)
7. All staff salaries are documented as "actual."	1	2	3	4	(Refer to timecards)
8. What is your programs' current time split for administration/management vs. direct? (Please ask question during ME to understand LIA's perspective)	Mgmt.		Direct		Should be M: 20%, D: 80%. If not, please discuss with LIA.
9. What efforts are being made to ensure the administrative/management and direct time split meets required levels?					

III. Educational Materials and Reinforcement Items					
Review Area	Assessment				Comments
1. SNAP-Ed activities are planned and implemented in accordance with approved goals and objectives for current fiscal year.	1	2	3	4	
2. Planned activities are appropriate for the social, cultural, and/or linguistic needs and resources of the low-income population served.	1	2	3	4	
3. USDA-recommended non-discrimination statement is on sample materials.	1	2	3	4	(Indicate percentage of compliance)
4. SNAP funding statement is on appropriate materials and reinforcement items.	1	2	3	4	(Indicate percentage of compliance)
5. Materials are written at the sixth-grade reading level and free of jargon or technical language.	1	2	3	4	
6. All nutrition education reinforcement items (NERI) are requested and approved in advance of purchase.	1	2	3	4	(Provide documentation of prior approval)
7. Printed materials are free from disparaging remarks regarding single foods, commodities, or industries.	1	2	3	4	(Indicate percentage of compliance)
8. All SNAP-Ed nutrition education reinforcement items cost less than \$5 each.	1	2	3	4	

# Appendix E: Management Evaluation Tool

## AZ Health Zone Management Evaluation Tool

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9. All SNAP-Ed nutrition education reinforcement items are allowable, reasonable, and necessary.	1	2	3	4	
10. All Photo/Video Release Forms are numbered and maintained in a log.	1	2	3	4	
11. Describe how and when SNAP-Ed materials are used.					
12. Websites or online materials are up-to-date.	1	2	3	4	
13. Describe how often materials are updated and who is responsible.					

IV. General Program Implementation and Coordination					
Review Area	Assessment				Comments
1. A Lesson Observation was completed during the ME.	Yes	No	N/A		(If yes, list date, educator, and lesson observed)
2. Your LIA participates in at least some of the AZ Health Zone subcommittees.	Yes	No	N/A		(If yes, list committee(s) and member name(s). If no participation, please ask why.)
3. Information about other resources available to SNAP-Ed audience were provided.	Yes	No	N/A		(e.g., WIC, SNAP, CSFP, etc.)
4. What cross-program collaboration with other FNS nutrition assistance programs is taking place?					

V. Program Evaluation and Observation					
Review Area	Assessment				Comments
1. Program evaluations are completed and submitted by the required deadlines.	1	2	3	4	
2. Required evaluation tools are being proctored only by SNAP-Ed staff who have completed the required training.	Yes	No	N/A		
3. Evaluation tools are being used for internal evaluation purposes.	Yes	No	N/A		(Feedback from both SIT and LIA. If yes, describe.)

# Appendix E: Management Evaluation Tool

4. All other internal evaluation efforts have been submitted in the most recent Semi-Annual Report Narrative.	1	2	3	4	
5. The two most recent Semi-Annual Report Narratives were submitted by the required deadline.	Yes	No	N/A		

VI. Program Integrity					
Review Area	Assessment				Comments
	Yes	No	N/A		
1. The Guidance & Policies Manual (G&P) is available for staff reference.					
2. A curriculum schedule is available and is being implemented.	1	2	3	4	Describe implementation:
3. Program records maintained and archived for a minimum of three (3) years.	1	2	3	4	
4. A property control officer and alternate have been identified for each site where assets are located.	1	2	3	4	
5. Program assets are tagged and an inventory is maintained appropriately.	1	2	3	4	
6. A tracking system is in place for all equipment purchased per the thresholds of the AZ Health Zone G & P manual and SAAM. Is the tracking system utilized for all new applicable purchases?	1	2	3	4	

# Appendix E: Management Evaluation Tool

## AZ Health Zone Management Evaluation Tool

VII. Contractor's Expenditure Reports (CERs), Reimbursements, and Allowable Costs					
Review Area	Assessment				Comments
1. In the quarter under review, what percentage of CERs were submitted by the thirtieth of the following month?	% on time				
2. In what month was the most recent CER submitted to AZ Health Zone?					
3. There are internal procedures in place to assure monthly CERs are submitted in a timely matter.	1	2	3	4	Describe procedures:
4. All items purchased are <b>pre-approved</b> in the budget or by special request.	1	2	3	4	
5. All professional membership fees are limited to institutional memberships and are SNAP-Ed-related.	1	2	3	4	

VIII. Travel					
Review Area	Assessment				Comments
1. In-state and out-of-state travel expenditures are consistent with the approved SNAP-Ed budget submitted to AZ Health Zone.	1	2	3	4	
2. Do all travel expenses adhere to the State of Arizona General Accounting requirements?	1	2	3	4	
3. If staff commit less than 100% of their time to SNAP-Ed, their non-SNAP-Ed-specific travel expenses (e.g., general nutrition conference) are pro-rated based upon their percentage of time spent on SNAP-Ed.	1	2	3	4	
4. Staff complete a log for all travel expenses. Includes personal and fleet vehicles and TO/From addresses.	1	2	3	4	
5. Staff submit all travel receipts with travel logs.	1	2	3	4	



# Appendix E: Management Evaluation Tool

IX. Reports					
Review Area	Assessment				Comments
1. Data is entered into SEEDS in a timely manner.	1	2	3	4	
2. Internal procedures are effective in assuring monthly data is entered into SEEDS in a timely matter. (Does this internal procedure address how and by whom this data is entered?)	1	2	3	4	
3. The method in which data is collected meets the EARS standards.	1	2	3	4	(e.g., attendance sheets, demo cards, visual estimates)
4. The current contract is being followed regarding fiscal year DE requirements in each community (is completed or plan to complete).	1	2	3	4	(1 = DE is planned in each community, 4 = DE has been completed in each community)
5. Describe challenges encountered when gathering and reporting data for EARS and actions taken to resolve or address these challenges.					

X. Subcontractors' Review					
Review Area	Assessment			Comments	
1. Do you have subcontractors?	Yes	No	N/A	List subcontractors. If none, skip to page 8.	
2. What was your process for soliciting subcontractors?					
3. Are subcontracts solicited through competitive bid?	Yes	No	N/A		
4. Are subcontracts available for review?	Yes	No	N/A		
5. Are subcontracts executed in a timely manner?	Yes	No	N/A		
6. Do subcontracts contain the required clauses? <i>(civil rights clause, confidentiality clause, and procedures for breach of contract or severing a contract)</i>	Yes	No	N/A		

# Appendix E: Management Evaluation Tool

AZ Health Zone Management Evaluation Tool

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7. Do you have a training plan for subcontractors? What is it?	Yes	No	N/A	
8. What is your subcontractor monitoring plan? Have you visited each subcontractor this year?	Yes	No	N/A	Request copies of ME tool. Dates: Staff completing review:
9. Do any subcontractors have an outstanding corrective action plan?	Yes	No	N/A	
10. Do you provide technical assistance to your subcontractor who is currently under a corrective action plan?	Yes	No	N/A	

# Appendix E: Management Evaluation Tool

AZ Health Zone Management Evaluation Tool

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Corrective Action Items:

Arizona State Staff Comments:

Local Implementing Agency Representative Comments:

# Appendix F: Community Participation Reimbursement Request Form



## Community Engagement Reimbursement Request Form

**Local Implementing Agency**

**Community Action Plan Community/ies**



**Community Action Plan Strategy and Description of Planned Community Engagement**

Name the strategy and describe the community engagement activity.

**Spectrum of Public Participation**



Consult (e.g. focus group, needs assessment, qualitative interview)



Involve (community has a voice in the process and will influence decision-making)



Collaborate (e.g. ongoing advisory board/group)

**Format of the Community Engagement Activity**



In-person



Virtual



Hybrid

**Reimbursement Information**

Are you planning to reimburse for participants' incurred costs (e.g. childcare, transportation, internet)?

Yes

No (reimbursement will not be approved)

Please complete the table below.

Number of community members	
Time per session (hours)	
Number of sessions	
Reimbursement per session	
Total expenditure (# of community members x # of sessions x reimbursement per session)	

Form of payment:

Gift card

Check or e-Check

Other (describe below)

Gift cards may not be issued in amounts greater than \$25 per gift card. When reasonable, gift cards should have restrictions on what they may be used to purchase. See FY24 AZ Health Zone Guidance & Policy Manual.

**Budget Information**

The expense above is already included in the agency budget.

Yes

No, funds will be moved from

Complete this form and submit to [azhealthzone@azdhs.gov](mailto:azhealthzone@azdhs.gov). Please include any relevant attachments, such as a focus group advertisement/flyer, reimbursement agreement, etc.

This material was funded by USDA's Supplemental Nutrition Assistance Program - SNAP through the AZ Health Zone. This institution is an equal opportunity provider.

# Appendix G: Nutrition Education Reinforcement Item Request Form



## Nutrition Education Reinforcement Item (NERI) Request Form

All fields must be completed

Local Implementing Agency

Communities



Item Information (One item per request form)

Item Type and Link to Item (i.e. Water Bottle, Plant Kit)	
Nutrition or Physical Activity Message	
Total Number of Items	
Cost Per Item (must be under \$5.00)	
Total expenditure (# of items * cost per item) + shipping + tax	

Connection to DE and PSE



Curriculum NERI Supports

Example: Eating Smart Being Active



PSE Connection with NERI

Example: NERI supports efforts to increase use of the walking trails in community area

Distribution Plan

Example: NERI will be distributed to the adult attendees of the walking club at Bowlerina Community Center at the end of the Eating Smart, Being Active courses provided by our team. Courses are part of a series, and NERI will be given out at the last session. Attendance will not be taken, however, these courses are promoted as a series and it is recommended to attend all three (but not required).

Budget Information

The expense above is already included in the agency budget.

 Yes

 No, funds will be moved from

Proofs Are Included in Email:

 Yes

 No, will be sent to the communications team in a separate email (cc azhealthzone@azdhs.gov)

Complete this form and submit to [azhealthzone@azdhs.gov](mailto:azhealthzone@azdhs.gov). Please include any relevant attachments (project description, scope of work, etc.)

This material was funded by USDA's Supplemental Nutrition Assistance Program - SNAP through the AZ Health Zone. This institution is an equal opportunity provider.



# Appendix H: Photo/Video Release Form



ARIZONA DEPARTMENT  
OF HEALTH SERVICES

## PHOTO/VIDEO RELEASE

I hereby grant permission to the Arizona Department of Health Services (ADHS) to use photograph(s) and/or video recording(s) of \_\_\_\_\_ taken on \_\_\_\_\_.

(PRINT NAME) (DATE)

I agree that permission includes the use of photograph(s) and/or video recording(s) for reproduction in publications, newspapers, magazines, television, social media, websites and other media. I understand that photograph(s) and/or video recording(s) are used to promote public understanding of ADHS programs and services.

I understand that permission to use photograph(s) and/or video recording(s) **will be in effect until revoked** from the date the images were captured and that ADHS will retain a digital copy of all photograph(s) and video recording(s). I understand that permission can be revoked at any time by contacting ADHS verbally, in writing, in person, or by email.

I hereby release the State of Arizona, ADHS, and its officers, employees, and agents from any liability in connection with the use of photograph(s) and/or video recording(s).

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
*(Parent or Legal Guardian for persons less than 18 years old)*

ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

TELEPHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Please check if you would like a copy of this release sent to you by e-mail: \_\_\_\_\_

-----DO NOT WRITE BELOW THIS LINE—FOR AGENCY USE ONLY-----

Photographer: \_\_\_\_\_ Photo/Video Release ID# \_\_\_\_\_

# Appendix I: Brand Standards

## AZ HEALTH ZONE BRAND STANDARDS

LOGOS MUST NOT BE ALTERED OR AMENDED IN ANY WAY.

### PRIMARY LOGOS

The full-color logo is the preferred variant for all uses. It is available in 4-color process and 2 PMS spot colors. Secondary options are available for use only when the reproduction methods prevent the use for full color.



### SECONDARY LOGOS

1-color variants are available for reproduction that are limited to one solid color, such as embroidery and promotional materials.



(ENGLISH) LOGO ON LIGHT AND DARK BACKGROUND



(SPANISH) LOGO ON LIGHT AND DARK BACKGROUND



FULL COLOR (ENGLISH AND SPANISH) NO TAGLINE



(ENGLISH) LOGO ON LIGHT AND DARK BACKGROUND NO TAGLINE

# Appendix I: Brand Standards

## AZ HEALTH ZONE BRAND STANDARDS

LOGOS MUST NOT BE ALTERED OR AMENDED IN ANY WAY.

### SECONDARY LOGOS (CONTINUED)

Horizontal logos, with and without taglines have been added to family of approved logos. These logos follow the same principal as the standard logos as it relates to color, size and font size.



(ALT) TAGLINE AND COUNTY LOGO FULL COLOR, AND 1-COLOR.



(ALT) COUNTY LOGO (NO TAGLINE) FULL COLOR, AND 1-COLOR .  
LEVERAGE PARTNERSHIP'S OFFICIAL NAME AND DON'T USE PARTNERS LOGO.  
WHITE LOGO VERSIONS ARE AVAILABLE UPON REQUEST.

### TYPOGRAPHY

#### Primary Type

**Avenir Black**  
Avenir Medium  
Avenir Book

#### Secondary Type

**Arial Bold**  
Arial Regular

# Appendix I: Brand Standards

## AZ HEALTH ZONE BRAND STANDARDS

LOGOS MUST NOT BE ALTERED OR AMENDED IN ANY WAY.

### PRIMARY COLORS



PANTONE: 299  
CMYK: 80-18-0-0  
RGB: 0-161-223  
HEX: 00A1DF



PANTONE: 425  
CMYK: 73-66-62-67  
RGB: 38-39-41  
HEX: 262729

THESE COLORS ARE RESERVED FOR BLACK AND WHITE VARIANTS.



PANTONE: BLACK 6C  
CMYK: 0-0-0-100  
RGB: 35-31-32  
HEX: 231F20



PANTONE: WHIT  
CMYK: 0-0-0-0  
RGB: 255-255-255  
HEX: FFFFFFFF

### SECONDARY COLORS



PANTONE: 565  
CMYK: 73-75-24-7  
RGB: 95-76-121  
HEX: 5C5181



PANTONE: 107  
CMYK: 2-6-99-0  
RGB: 255-227-0  
HEX: FFE900



PANTONE: 653  
CMYK: 9-6-7-0  
RGB: 228-229-228  
HEX: E4E5E4



PANTONE: 1545  
CMYK: 0-80-93-0  
RGB: 241-91-42  
HEX: F15B2A



PANTONE: 710  
CMYK: 0-80-56-0  
RGB: 241-89-95  
HEX: F15960



PANTONE: 367  
CMYK: 48-5-99-0  
RGB: 147-190-62  
HEX: 93BC3E



PANTONE: 602  
CMYK: 10-3-70-0  
RGB: 235-227-112  
HEX: EBC370

### SIZING REQUIREMENTS AND SPECIAL USE FORMAT

The tagline should be used whenever space allows, but there will be instances when the font will be too small to read.



MOST PUBLICATIONS WILL NOT GUARANTEE FONT LEGIBILITY BELOW 6 POINTS, IF THE FORMAT REQUIRES THE LOGO BE SCALED BELOW 6 POINTS, IT IS RECOMMENDED THAT THE TAGLINE BE REMOVED.

MINIMUM SIZE 21W X 27.5H PIXELS.

# Appendix I: Brand Standards

## AZ HEALTH ZONE BRAND STANDARDS

LOGOS MUST NOT BE ALTERED OR AMENDED IN ANY WAY.

### GUIDELINES - THE DO'S AND DON'TS

All uses of the AZ Health Zone logo should maintain a consistent spacing equal to the dimensions of the "A" in "AZ" around the mark to separate the mark from surrounding elements. If the logo placement lacks sufficient space to achieve this separation, remove the tagline and use the AZ Health Zone mark.





# Appendix I: Brand Standards

## AZ HEALTH ZONE BRAND STANDARDS

LOGOS MUST NOT BE ALTERED OR AMENDED IN ANY WAY.

### REQUIRED DISCLAIMER

Documents developed, adapted, or reprinted by State and Implementing Agencies receiving financial assistance from FNS must have the following shortened nondiscrimination statement:

English:

This material was funded by USDA's Supplemental Nutrition Assistance Program - SNAP through the AZ Health Zone. This institution is an equal opportunity provider.

Spanish:

Este material fue financiado por el Programa de Ayuda de Nutrición Suplementaria de USDA-SNAP a través de la Zona de Salud AZ. Esta institución ofrece igualdad de oportunidades.

### POLICY

**Effective October 1, 2017**, a brand identity including name, logo, and tagline will be used for SNAP-Ed programs throughout Arizona. The new name, AZ Health Zone reflects the comprehensive services and programs included in SNAP-Ed including, direct education, comprehensive and multi-level interventions, community and public health approaches. Social marketing methods will be used to identify common messages used in all efforts.

AZ Health Zone - Healthy Starts Here is an aspirational new brand identity, broad enough to be appealing to target audiences and also be motivating and inspirational.

All materials developed prior to October 1, 2017 can still be used until stock runs out. All new materials will be branded with AZ Health Zone - Healthy Starts Here. All materials paid for with SNAP-Ed funds will include the AZ Health Zone logo or the LIA-specific AZ Health Zone logo provided by the SIT.

Materials developed for collaborative efforts, will require joint funding for the materials when carrying additional organizational logos.

All LIA-developed materials require review and approval by the SIT before printing.--

# Appendix J: Recipe Evaluation and Nutrient Criteria Check Sheet

## AZ Health Zone Recipe Evaluation and Nutrient Goals and Guidelines Check Sheet

Recipe Name: \_\_\_\_\_

Yes	No	Recipe Evaluation
		Recipe contains 10 ingredients or less. (Excludes water, cooking spray, and seasonings).
		Recipe features readily available, low-cost foods.
		Recipe follows standard AZ Health Zone format for capitalization, margin justification, and terminology.
		Weights and measures are specified and spelled out for all ingredients.
		No brand names are used in the recipe.
		Common preparation terms are used.
		Recipe directions are numbered, written in brief logical steps and easy to understand.
		Recipe ends with an action statement (e.g., Serve immediately).
		Cooking times and temperatures are complete.
		The number of servings is included at the end of the instructions with an approximate serving size.

Yes	No	N/A	Nutrient Goals and Guidelines	Notes
			Recipe encourages a variety of flavors, colors, textures, and cooking methods.	
			Recipe is flexible and supports a variety of options for ingredients or cooking methods (e.g. additions, substitutions, seasonality, accessibility, food allergies, intolerances, personal preference).	
			Recipe highlights how to add at least one, nutrient-rich option from the food groups (fruits, vegetables, protein, grains, and dairy).	
			Recipe highlights how to try different preparation and cooking methods.	
			Recipe reflects the interests, regional foods, and cultural influences of community members.	
			Recipes that reflect ethnic cuisines were researched through reputable sources and/or community engagement with members from the specific cultural group the recipe reflects.	

Reviewed by: \_\_\_\_\_

Date: \_\_\_\_\_

# Appendix K: Lesson Observation Tool

## Lesson Observation Tool

Educator being observed \_\_\_\_\_ Date \_\_\_\_\_  
 Curriculum/resources used \_\_\_\_\_  
 Lesson being observed \_\_\_\_\_ Grade level/Age \_\_\_\_\_  
 Location: \_\_\_\_\_ Length of lesson: \_\_\_\_\_

### *Section I: Questions to be asked of the educator*

Topic/Question	Comments
<b>A. Needs Assessment</b>	
1. How was the course promoted and advertised to generate enrollment?	
2. How was the lesson topic selected for this audience?	
3. How was the educational strategy selected for this audience?	
4. What PSE activities are aligned with this lesson?	
<b>B. Lesson Objectives</b>	
1. What are the goals and objectives of the lesson?	
2. Which local agency objectives does the lesson support?	
3. Which State goals and objectives does the lesson support?	

# Appendix K: Lesson Observation Tool

C. Audience	
1. What procedure(s) are used to document audience attendance?	
2. What system is used to document unduplicated contacts and audience demographic data?	

**Section II: Topics to be evaluated by the evaluator based on observation and input from educator.**

To what degree or level of understanding is the topic being achieved? Use the following scale and circle your rating.

1 = Very Poor 2 = Fair 3 = Good 4 = Very Good NA = Not Applicable

C. Audience <small>continued</small>					
3. The location/site is conducive to learning.	1	2	3	4	NA
4. The lesson is offered on days/time that are convenient for audience participation.	1	2	3	4	NA
5. The audience actively participated throughout the lesson.	1	2	3	4	NA
6. Education is provided at accessible locations (e.g., convenient to public transportation, free parking, etc.).	1	2	3	4	NA
7. The lesson accommodates the language capabilities of the audience.	1	2	3	4	NA
<b>Comments About the Audience</b>					

C. Audience <small>continued</small>		
8. The audience is approved as a SNAP-Ed target audience.	Yes	No
9. The local agency is approved to provide activities at the site for this lesson.	Yes	No
<b>If Response is No, Please Provide Explanation.</b>		

# Appendix K: Lesson Observation Tool

D. Educator					
1. The information was presented appropriately for the social/cultural backgrounds of the audience in a culturally sensitive manner.	1	2	3	4	NA
2. The educator treated all participants respectfully.	1	2	3	4	NA
3. The educator was knowledgeable about the information.	1	2	3	4	NA
4. The educator was well prepared.	1	2	3	4	NA
5. The educator had a good rapport with the audience.	1	2	3	4	NA
6. The educator demonstrated a variety of instructional techniques effectively (e.g., classroom discussion, asking and answering questions, individual participant activities, small group activities, psychomotor activities, demonstrations).	1	2	3	4	NA
7. The educator delivered the lesson in accordance with the AZ Health Zone Resource Guide.	1	2	3	4	NA
<b>Comments About the Educator:</b>					

1 = Very Poor 2 = Fair 3 = Good 4 = Very Good NA = Not Applicable

E. Content					
1. The lesson strategies are appropriate for the audience.	1	2	3	4	NA
2. The information was relevant to the audience.	1	2	3	4	NA
3. Recipes/cooking demonstrations are appropriate and related to lesson content.	1	2	3	4	NA
4. The recipe provided sample sizes rather than meal-sized portions.	1	2	3	4	NA
6. The lesson content was free from disparaging remarks regarding single foods, commodities, or industries.	1	2	3	4	NA
7. The content of the lesson is consistent with U.S. Dietary Guidelines for Americans and My Plate.	1	2	3	4	NA
8. The content adhered to the SNAP-Ed Plan Guidance in regards to physical activity and gardening components.	1	2	3	4	NA
9. The physical activity discussion, if provided, was consistent with the 2008 Physical Activity Guidelines for Americans.	1	2	3	4	NA
10. The lesson activities and materials are evidence-based and allowable as outlined in the SNAP-Ed Plan Guidance and approved State SNAP-Ed Plan.	1	2	3	4	NA
11. The lesson strategies are designed to change behavior based on the information and new knowledge presented in the lesson.	1	2	3	4	NA
<b>Comments About the Content</b>					



# Appendix K: Lesson Observation Tool

F. Fidelity and Modifications		
1. The lesson was delivered in its entirety and in its intended sequence.	Yes	No
2. The lesson is being taught to the audience for which the curriculum was intended (e.g. intended grade, age, or audience)	Yes	No
<b>If Response is No, Please Provide Explanation.</b>		

1 = Very Poor 2 = Fair 3 = Good 4 = Very Good NA = Not Applicable

F. Fidelity and Modifications <small>continued</small>					
3. The educator adjusted the lesson to accommodate the learning needs of the audience.	1	2	3	4	NA
4. The educator adjusted the lesson to accommodate the instruction time available.	1	2	3	4	NA
5. The educator demonstrated appropriate and effective classroom management techniques.	1	2	3	4	NA
<b>Comments About the Fidelity and Modifications</b>					

G. Lesson Materials					
1. Lesson materials reflect current information, appropriate literacy levels, and cultural relevancy.	1	2	3	4	NA
2. USDA materials are used where appropriate.	1	2	3	4	NA
3. Reinforcement items are provided and contain a nutrition message purposely included to reinforce the lesson content.	1	2	3	4	NA
4. The SNAP funding statement is on all appropriate materials and reinforcement items.	1	2	3	4	NA
<b>Comments About the Lesson Materials</b>					

G. Lesson Materials <small>continued</small>		
5. Materials contain the required USDA non-discrimination statement in its entirety.	Yes	No
6. If other statements are used in addition to the USDA non-discrimination statement, they are listed separately and after the USDA statement.	Yes	No
7. The SNAP public education outreach message is on all appropriate materials and reinforcement items.	Yes	No

# Appendix K: Lesson Observation Tool

If Response is No, Please Provide Explanation.

## H. Evaluation

1. For a lesson taught as part of an approved curriculum series: the AZ Health Zone evaluation requirements were met regarding the series.	Yes	No
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If Response is No, Please Provide Explanation.

1 = Very Poor 2 = Fair 3 = Good 4 = Very Good NA = Not Applicable

## H. Evaluation continued

2. For a single session not requiring AZ Health Zone evaluation: participants indicated their intention to use the knowledge and skills learned.	1	2	3	4	NA
--	---	---	---	---	----

How? Please Provide Description.

## I. Civil Rights Compliance

1. Program participants are aware of how to make a complaint.	1	2	3	4	NA
2. The program site is accessible to all.	1	2	3	4	NA

Comments About Civil Rights Compliance

## I. Civil Rights continued

3. USDA "And Justice for All" posters are displayed at all SNAP-Ed activities.	Yes	No
--	-----	----

If Response is No, Please Provide Explanation.

# Appendix L: Sample MOA

## MEMORANDUM OF AGREEMENT (MOA)

Between \_\_\_\_\_ [insert name of Party A] (LIA)  
and  
\_\_\_\_\_ [insert name of Party B]  
( Supporting Agency)

This is an agreement between “Party A”, herein after called \_\_\_\_\_ and “Party B”, hereinafter called \_\_\_\_\_.

### I. PURPOSE & SCOPE

The purpose of this MOA is to clearly identify the roles and responsibilities of each party as they relate to....

*Include the Key Educational Messages from the AZ Health Zone application in this section and be sure to reference the target population i.e., SNAP participants.*

*Examples of descriptive terms include: enhance, increase, reduce costs and/or establish*

### II. BACKGROUND

*Brief description of agencies involved in the MOU with mention of any current/historical ties to FSP nutrition education.*

### III. [PARTY A] RESPONSIBILITIES UNDER THIS MOA

[Party A] shall undertake the following activities:

*Examples of descriptive terms include: develop, deliver, provide, train, and evaluate*

### IV. [PARTY B] RESPONSIBILITIES UNDER THIS MOA

[Party B] shall undertake the following activities:

*Examples of descriptive terms include: deliver, support, provide, comply, train, and maintain records*

### V. IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:

*Discuss any contingencies or modifications to this understanding/agreement and terms to terminate.*

### VI. FUNDING

This MOU does not include the reimbursement of funds between the two parties.

- Approximately \$ \_\_\_\_\_ is being leveraged from \_\_\_\_\_ (Party B) for the \_\_\_\_\_ (Party A).
- None of the funds used in this MOA are federal funds or funds being used to match other federal funds.
- \_\_\_\_\_ (Party B) will provide documentation as requested by \_\_\_\_\_ (Party A).

*Program activities do not supplant existing nutrition education and obesity prevention programs, and where operating in conjunction with existing programs, enhance and supplement them. This applies to all activities and costs.*