Obesity Prevention and Management Commission Report

REPORT PREPARED IN RESPONSE TO ACT 580 OF THE 2014 REGULAR SESSION

FEBRUARY 2015
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Executive Summary

Obesity is one of the most critical health concerns in Louisiana. According to the Center for Disease Control and Prevention (CDC), obesity-related conditions include heart disease, stroke, type 2 diabetes and certain types of cancer. All leading causes of death in Louisiana. These conditions also result in decreased quality of life and costly medical care. In 2013, the United Health Foundation’s America’s Health Rankings ranked Louisiana 48 out of 50 states, with 34.3% of the adult population being overweight (See Appendix 1).

Louisiana Senator and Health and Welfare Chair David Heitmeier introduced Senate Bill 513 during the 2014 Louisiana Legislative Session in recognition of the increasing need to bring a small, dedicated group of advocates from public and private organizations together to work collaboratively to address the obesity epidemic in Louisiana. The legislation passed and Act 580, which created the Louisiana Obesity Prevention and Management Commission, was signed into law on June 9, 2014 by the Governor. This report is in response to a provision in Act 580.

Commission Vision

Act 580 defined the powers, functions of duties of designated commission members (See Appendix 2). The appointed commission members (See Appendix 3) decided that the vision for the work of the commission centers around three themes:

- Identifying and pursuing opportunities for increased collaboration
- Ensuring accountability through efforts to enforce existing policy
- Delivering information, recommendations, guidelines, and suggestions

The following table includes specific plans for collaboration, accountability, and delivery identified by commission members during the October 30, 2014 commission meeting.

<table>
<thead>
<tr>
<th>Collaboration</th>
<th>Accountability</th>
<th>Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Share funding opportunities and co-author grants</td>
<td>• Legislative and high level support for commission</td>
<td>• Statewide inventory of current obesity prevention efforts across the state</td>
</tr>
<tr>
<td>• Develop a commission communication structure, such as an informal listserv for commission members</td>
<td>• Assessing gaps in policy enforcement</td>
<td>• Progress report assessing the status of existing policy, guidelines implementation, and recommendations for additional policy</td>
</tr>
<tr>
<td>• Share best practices and data</td>
<td>• Regular attendance at meetings</td>
<td>• Communication of messages and suggestions</td>
</tr>
<tr>
<td>• Member presentations and</td>
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</tbody>
</table>
The commission held two in-person meetings (August 25, 2014 and October 30, 2014) and participated in eight key informant interviews, with the goal of identifying how members wanted to collaborate, how they wanted to be accountable to the charge of the commission, and what they could reasonably achieve by March 2016 (See Appendices 4).

Identifying Opportunities for Collaboration

At the initial meeting, commission members identified a need to establish a clear and comprehensive understanding of existing obesity prevention and management programs, initiatives and policies in place across the state, and to identify a clear focus for the commission’s work. In order to identify areas of cross-organizational alignment, each commission member shared information about work related to obesity prevention and management being done by their organization, and ideas about how the commission could best meet its charge and deliver tangible outcomes.

Commission members also recognized the need to gather information about obesity-related work implemented by other organizations, not included in the commission membership, in order to ensure a complete assessment of current resources, gaps, and opportunities for collaboration across the state. Thus, commission members developed a survey in order to capture this information (Appendix 5).

Increasing Accountability and Delivery

Much of the work being done by member organizations is targeted toward prevention and management of obesity by providing services focused on nutrition, and physical activity in schools and community settings, such as churches and non-profit agencies. Some member organizations are funding or directly providing services in clinic-based settings related to improved nutrition, physical activity, and chronic disease education.

Gaps in work being done by commission member organizations include the following:

- Services targeted toward adults
- Services delivered in geographic areas outside of the New Orleans area
- Enforcement of existing policies (see Appendix 6)
- Efforts focused on increasing physical activity
- Increased access to funding

Another gap identified is the lack of work by member organizations to promote awareness of obesity-related health risks among payers, providers, and patients, although some organizations work with insurance companies to promote employee health. Addressing this gap could likely result in
significant reach, as 86% of non-elderly Louisiana residents age birth to 64 are covered by some type of insurance (Kaiser Family Foundation – State Health Facts).

The commission will conduct an analysis of the current health related legislation to assess their effect across the state. This analysis will determine what organization or individual initiated the legislation, which legislation was funded, how the legislation was implemented, and recommendations for best practice for implementation and evaluation.

**Conclusion**

Three high level areas that commission members have committed to addressing by March 2016 are enhanced collaboration, accountability, and delivery to help Louisiana address its obesity epidemic. Commission members agree that key elements of an effective statewide obesity prevention and management program include information sharing, policy implementation, policy enforcement, and ensuring accountability. Thus, the commission plans to complete the following activities during the coming year:

- Create an inventory of obesity prevention and management programs across the state
- Complete an analysis of current obesity prevention and management policies
- Provide recommendations for policy change
- Promote enforcement of existing policy
- Gather and share information, data, and research with policy makers and stakeholders
- Coordinate with state departments and obesity-related organizations statewide
- Ensure documentation of all commission activities

Factors that may enhance the commission’s ability to significantly impact the obesity epidemic in Louisiana include more multi-sector support, resources, decision-making authority, and expanding commission membership to ensure statewide representation.

Communication, or lack of communication between stakeholders was a recurring theme identified by commission members. An enhanced communication structure across the state could increase collaboration for grants and data sharing, avoid duplication of efforts, and serve as a best practice resource for established and new organizations. The commission would like to develop an inventory of statewide obesity prevention programs. A survey will be developed and disseminated to other organizations across the state to gather this information. Another recurring theme identified by commission members was policy implementation and enforcement. The commission seeks legislative support to assess current policies, and follow-up with entities that must comply with the policies in order to enhance accountability and implementation.
The following table outlines the timeline for the commission’s planned work during the following 13 months by month, deliverable, and organization(s) responsible for completing each deliverable.

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<tbody>
<tr>
<td>Finalize 2016 Act. 580 annual report</td>
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<td>Submit annual report to Legislature</td>
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<td>Disseminate survey to statewide organizations</td>
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<td>Analysis of survey results</td>
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<td>Disseminate follow-up survey to statewide organizations</td>
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<td>Initiate analysis of current obesity prevention policies</td>
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<td>Complete policy analysis</td>
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<td>Coordinate with multi-sector and statewide organizations</td>
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<tr>
<td>Ensure documentation of all commission activities</td>
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</tbody>
</table>
Bibliography


United Health Foundation, America’s Health Rankings. 2014 Louisiana State Data. Available at: www.americashealthrankings.org/LA
Appendix 1: Louisiana Obesity Data

2013 Prevalence of Self-Reported Obesity Among U.S. Adults by State and Territory

![Map showing prevalence of obesity in 2013 by state](image)

*Figure 1: 2013 Behavioral Risk Factor Surveillance System State Obesity Prevalence Map*
Figure 2: 2013 Behavioral Risk Factor Surveillance System Prevalence and Trends Data for Louisiana
Appendix 2: Commission Charge

As outlined in Act 580, the powers, functions, and duties of the commission include the following:

- Accept and expend grants and private donations
- Assist in achieving programmatic goals and provide leadership or support for the following:
  - Organizational efforts
  - Articulating standards through disseminating materials
  - Identification of experts in related subject matter
  - Identification of alternate means of developing effective population-based programs
  - Development of policy in identified health risks
  - Creating awareness among payers, providers, and patients of the health risks due to overweight and obesity conditions
  - Enhancing reporting mechanisms of latest outcomes and health trends in the area of overweight and obesity concerns
  - Conduct evaluations of program effectiveness
  - Encouraging research and the identification of resources that seek ways to promote cost-effective methods of treating overweight or obesity conditions
- Conduct exploratory research
- Conduct public meetings to discuss obesity
- Analyze state obesity prevention programs across the state
- Advise departments and agencies on the implementation of commission recommendations
Appendix 3: Commission Members

The Louisiana Obesity Prevention and Management Commission is composed of the following ten members, designated by Act 580:

<table>
<thead>
<tr>
<th>Member</th>
<th>Representative</th>
</tr>
</thead>
<tbody>
<tr>
<td>The secretary of the Department of Health and Hospitals, or designee</td>
<td>Takeisha Davis, M.D., Chair (designee)</td>
</tr>
<tr>
<td>The state superintendent of education, or designee</td>
<td>Ryan Gremillion, JD (designee)</td>
</tr>
<tr>
<td>The commissioner of insurance, or designee</td>
<td>James Donelon, JD</td>
</tr>
<tr>
<td>The president of the Senate, or designee</td>
<td>Senator David Heitmeier, OD</td>
</tr>
<tr>
<td>The speaker of the House of Representatives, or designee</td>
<td>Representative Ebony Woodruff, JD- Co-Chair</td>
</tr>
</tbody>
</table>
| The director of the Pennington Biomedical Research Center, or designee | William Celfau, MD  
Peter Katzmarzyk, Ph.D, FACSM, FAHA (designee) |
| The director of the Prevention Research Center at Tulane University, or designee | Carolyn Johnson, Ph.D, FAAHB |
| Community-based group (elected): Ochsner Health System | Avery Corenswe, BSN, MHA, RN |
| Community-based group (elected): Baptist Community Ministries | Elizabeth Sheer, RN, MSN, MBA |
| The director of the Cecil J. Picard Center for Child Development and Lifelong Learning, or designee | John LaCour, MSW (designee) |
## Appendix 4: Key Informant Survey Questions and Responses

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
</tr>
</thead>
</table>
| Q2. For the purpose of understanding your organization’s perspective on  | • “No set definition…”  
| this type of education, outreach or intervention, please define ‘obesity  | • “Heart disease, cancer, psychosocial issues…”  
| related health risks’                                                      | • “Mental health, nutrition, diabetes…”  
|                                                                           | • “Environmental factors, lack of access to healthy food…”  
|                                                                           |                                                                                                                                                                                                            |
| Q3. Does your organization work with health insurance plans to promote    | The majority of the commission member organizations are not working with health plans to promote obesity related health risks. Their organizations may work with insurance companies to promote employee health. |
| awareness of obesity-related health risks?                                |                                                                                                                                                                                                            |
|                                                                           |                                                                                                                                                                                                            |
| Q4. Does your organization promote awareness of obesity-related health    | Some member organizations are working with clinicians on programs related to nutrition, sharing information with clinicians about chronic disease as a whole, and as a funder or information sharer. The FitNOLA program works with clinicians to prescribe fruits, vegetables and physical activity to their patients. |
| risks among clinicians?                                                   |                                                                                                                                                                                                            |
|                                                                           |                                                                                                                                                                                                            |
| Q5. Does your organization work with health systems to promote awareness  | Few member organizations work with health systems to provide technical assistance.                                                                                                                                 |
| of obesity-related health risks?                                          |                                                                                                                                                                                                            |
|                                                                           |                                                                                                                                                                                                            |
| Q6. Does your organization work with community members to promote         | Many of our member organizations work with community organizations, such as, faith-based organizations, alliance for a healthier generation, non-profits, home owner associations, etc.                                      |
| awareness of obesity-related health risks?                                |                                                                                                                                                                                                            |
|                                                                           |                                                                                                                                                                                                            |
| Q7. What elements comprise an effective statewide obesity prevention      | Being a leader in information sharing, policy implementation, policy enforcement, and ensuring accountability.                                                                                                 |
| program?                                                                 |                                                                                                                                                                                                            |
|                                                                           |                                                                                                                                                                                                            |
| Q8. What tangible outcomes can the obesity commission deliver between     | • Analysis of current policies  
| now and March 2016? (Ex. Policy briefs, data analysis)                    | • Inventory of programs happening in the state  
|                                                                           | • Policy changes  
|                                                                           | • Policy enforcement  
|                                                                           | • Policy recommendations                                                                                                                                                                                  |
|                                                                           |                                                                                                                                                                                                            |
| Q9. What performance measures should the obesity commission adopt to     | Performance measures should be developed after the focus of the commission is determined.                                                                                                                                 |
| communicate the health impact of the tangible outcomes you mentioned in  |                                                                                                                                                                                                            |
| response to the previous question?                                        |                                                                                                                                                                                                            |
Appendix 5: Survey Questions

Obesity Commission Survey

Survey Introduction

Act 580, which was passed by the 2014 Louisiana State Legislature, mandated the organization of the Louisiana Obesity Prevention and Management Commission for the purpose of conducting any and all activities dedicated toward the prevention/reduction of obesity in the state of Louisiana. This newly-formed Obesity Commission is currently in the process of collecting information and data from across the state for the purpose of developing an inventory or asset map of all organizations that are currently involved in implementing obesity-related programs, projects, research and/or interventions.

We anticipate that your organization will want to be a part of this worthwhile endeavor and have your voice heard. With this in mind, we would like to ask you to take about 5 minutes of your time to respond to a few questions about your organization and about any obesity-related activities by your organization. If you are not currently involved in any obesity-related work and do not intend to do so in the near future, then we would ask that you complete the questions about your organization and let us know this. It will prevent us from contacting you again in the near future.

Thank you for participating in our survey. Your feedback is important.

1. Please provide the following information about your organization.

   Name of organization 
   E-mail address 
   Phone number 

2. The organization operates as a:

   - Non-Profit Organization
   - For-Profit Organization
   - Government Agency

   Other (please specify) 

3. How long has the organization been in existence?
4. What is the geographic area of the organization’s obesity-related work? (Please select all that apply)

- National
- Statewide
- DHHS Region 1
- DHHS Region 2
- DHHS Region 3
- DHHS Region 4
- DHHS Region 5
- DHHS Region 6
- DHHS Region 7
- DHHS Region 8
- DHHS Region 9
- Acadia
- Allen
- Ascension
- Assumption
- Avoyelles
- Beauregard
- Bienville
- Bossier
- Caddo
- Calcasieu
- Caldwell
- Cameron
- Catahoula
- Claiborne
- Concordia
- De Soto
- East Baton Rouge
- East Carroll
- East Feliciana
- Evangeline
- Franklin
- Grant
- Iberia
- Iberville
- Jackson
- Jefferson
- Jefferson Davis
- La Salle
- Lafayette
- Lefourche
- Lincoln
- Livingston
- Madison
- Morehouse
- Natchitoches
- Orleans
- Ouachita
- Plaquemines
- Pointe Coupee
- Rapides
- Red River
- Richland
- Sabine
- St. Bernard
- St. Charles
- St. Helena
- St. James
- St. John the Baptist
- St. Landry
- St. Martin
- St. Mary
- St. Tammany
- Tangipahoa
- Tensas
- Terrebonne
- Union
- Vermilion
- Vernon
- Washington
- Webster
- West Baton Rouge
- West Carroll
- West Feliciana
- Winn

Other (please specify):
5. Please select the funding source of the organization’s obesity-related work is. (Please select all that apply)

- Local government
- State government
- Federal government
- Private funding
- Profits from services/sales
- Operational funding

Other (please specify)

6. Please list and briefly describe any obesity-related work the organization is currently conducting or intends to conduct within the next year.

- Research
- Short-Term Project (less than 1 year)
- Long-Term Program (multi-year)
- Policy
- Information Provider (educational services)
- Service Provider (clinical services)
- Other

7. How does the organization’s obesity-related work fit into the overall organizational mission?


8. Who is being targeted in the obesity-related work? (Please select all that apply)

- Children
- Adolescents
- Adults

Other (please specify)
9. In what type of venue is the obesity-related work conducted? (Please select all that apply)

- [ ] Schools
- [ ] Work Sites
- [ ] Community
- [ ] Clinical Setting
- Other (please specify) 

10. Are you interested in receiving information regarding obesity-related initiatives from the Obesity Commission?

- [ ] Yes
- [ ] No

11. If you know of other individuals or organizations that should participate in the Obesity Commission, please share their name and contact information below.
Appendix 6: Obesity Prevention and Management Existing Policy

The following is a list of obesity-related state policy currently in place in Louisiana (as of January, 2015).

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Bill</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/18/2014</td>
<td>SB28</td>
<td>Provides relative to the implementation of the requirement that certain state-owned buildings be equipped with suitable accommodations for breastfeeding and lactation.</td>
</tr>
<tr>
<td>06/09/2014</td>
<td>SB513</td>
<td>Provides for the Louisiana Obesity Prevention and Management Commission.</td>
</tr>
<tr>
<td>06/04/2014</td>
<td>SB527</td>
<td>Provides for a Complete Streets Policy and creates the Complete Streets Advisory Council.</td>
</tr>
<tr>
<td>05/30/2014</td>
<td>SCR95</td>
<td>Requests the Department of Education to issue a report as to the number of joint-use agreements in place throughout the state and include a plan to promote the use of such agreements.</td>
</tr>
<tr>
<td>06/02/2014</td>
<td>SCR96</td>
<td>Requests the Department of Health and Hospitals and the State Board of Elementary and Secondary Education to submit jointly a report to the legislature regarding the availability of water for student consumption at elementary and secondary schools.</td>
</tr>
<tr>
<td>05/30/2014</td>
<td>SCR20</td>
<td>Directs Department of Health and Hospitals to submit a state plan amendment to the federal government that will permit WIC cash value vouchers to be used at farmers' markets.</td>
</tr>
<tr>
<td>06/02/2014</td>
<td>SCR21</td>
<td>Creates joint legislative committee on obesity.</td>
</tr>
<tr>
<td>05/19/2014</td>
<td>SCR94</td>
<td>Directs Department of Agriculture and Forestry and the Department of Education to implement a Farm to School Program and to assist schools with local procurement options for fresh fruit, vegetables, meats, and seafood.</td>
</tr>
<tr>
<td>08/01/2013</td>
<td>ACT87</td>
<td>Requires local public school boards to adopt policies relative to accommodations for employees to express breast milk.</td>
</tr>
<tr>
<td>08/01/2012</td>
<td>ACT88</td>
<td>Provides for the establishment and administration of a targeted coordinated school health program for the purpose of reducing childhood obesity and a grant program to assist public school governing authorizes with implementation.</td>
</tr>
<tr>
<td>06/29/2011</td>
<td>ACT351</td>
<td>Provides that elementary, secondary, or charter schools that enter into a joint-use agreement do not incur any liability for injuries to persons or property. Joint use agreements expand access to playgrounds, gymnasiums, and tracks that are already located within communities.</td>
</tr>
<tr>
<td>06/01/2012</td>
<td>ACT269</td>
<td>Requires that 10 state buildings construct at least one suitable room by July 1, 2014 for the exclusive use of women to breastfeed a child or express breast milk.</td>
</tr>
<tr>
<td>06/15/2010</td>
<td>HCR150</td>
<td>Directs the Department of Social Services (DSS) to assess efforts in Louisiana to promote healthy food choices among recipients of Supplemental Nutrition Assistance Program (SNAP).</td>
</tr>
<tr>
<td>Date</td>
<td>Bill Number</td>
<td>Description</td>
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<tr>
<td>06/18/2010</td>
<td>HCR209</td>
<td>Requests the Board of Elementary and Secondary Education (BESE) to study the feasibility of increasing PE units required for high school graduation.</td>
</tr>
<tr>
<td>06/10/2010</td>
<td>HCR231</td>
<td>Requests the Office of Group Benefits to conduct a study on the financial benefits of establishing a program to address the high rate of obesity in Louisiana.</td>
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<tr>
<td>06/21/2010</td>
<td>ACT288</td>
<td>Aims to stimulate investment in healthy food retail outlets in underserved areas and to combat food deserts by insuring everyone has access to fresh fruits and vegetables.</td>
</tr>
<tr>
<td>08/15/2009</td>
<td>ACT147</td>
<td>Provides for bicyclists and vehicle safety.</td>
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<tr>
<td>08/15/2009</td>
<td>ACT252</td>
<td>Provides for the Health Food Retail Act to stimulate investment in health food retail outlets in underserved areas. Program created in the Department of Agriculture and Forestry (LDAF) and currently not funded.</td>
</tr>
<tr>
<td>08/15/2009</td>
<td>ACT256</td>
<td>Provides for health related fitness assessments to determine physical fitness levels of students in schools. Review of current pilot program using Fitnessgram with intent to expand statewide.</td>
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<td>07/01/2009</td>
<td>ACT286</td>
<td>Requires physical activity for students (K-8, at least 30 min per day) and establishment of School Health Advisory Councils in each city, parish and other local public school board.</td>
</tr>
<tr>
<td>07/01/2009</td>
<td>ACT306</td>
<td>Amended 2005 Act331, School Vending Bill, to provide that 100 (previously 50%) of beverages sold on high school campuses adhere to healthy guidelines.</td>
</tr>
<tr>
<td>06/08/2009</td>
<td>SCR77</td>
<td>Requests the Department of Health and Hospitals (DHH) and DOE to examine the adequacy of current practices for ensuring preventive health and well-being of adolescents in Louisiana.</td>
</tr>
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<td>06/25/2009</td>
<td>SCR110</td>
<td>Created the Complete Streets Workgroup in the Department of Transportation and Development (DOTD).</td>
</tr>
<tr>
<td>06/27/2007</td>
<td>ACT180</td>
<td>Requires the Department of Education (DOE) to hire a health and physical education coordinator who will be responsible for the development, implementation, and monitoring of health and physical education curricula in all public elementary and secondary schools in the state.</td>
</tr>
<tr>
<td>08/15/2005</td>
<td>ACT331</td>
<td>Requires public schools to provide healthy choices in school vending machines. All food and beverage items sold on campus in elementary and secondary schools, and at least 50% of items offered in high schools, must adhere to healthy guidelines.</td>
</tr>
</tbody>
</table>
August Meeting

State of Louisiana
Department of Health and Hospitals

Louisiana Obesity Commission
DHH; Bienvenu; Building
1st Floor – Room 118
Monday, August 25, 2014, 1 p.m. to 4 p.m.
Meeting Minutes

Attendees Present:
Commission Members: Chair Dr. Takeisha Davis-LA DHH; Vice-Chair Rep. Ebony Woodruff- LA House of Representatives; Dr. Carolyn Johnson-Tulane; Dr. Peter Katzmarzyk- Pennington; Mary Kathryn Poole-Tulane; Dr. William Cefalu- Pennington; Ryan Gremillion-LA DOE

Quorum met: 3 members needed

Guests: Secretary Kathy Kleibert- LA DHH; Assistant Secretary J.T. Lance-LA DHH; Sheree Tailon-LA DHH; Carolee Brazeal-LA DHH; Jamila Freightman- LA DHH; Ryan Bilbo- LA DHH; Avery Corenswet- Ochsner; Dee Fuchs-BCM; David Jones II-NOCCJ; Jesse LaBauve-NOCCJ; Catherine Levendis- Ochsner; Stephanie Bridges-NOCCJ; Jordan Michael- NOCCJ; Leslie Lewis- LA DHH; Pam Romero- LA DHH; Kristie Bardelli-LPHI

I. Call to order at 1:10pm
• Chair opened the meeting by welcoming the attendees, initiated introductions and asked committee members and the secretary and assistant secretary from LA DHH to state their goals for the commission.
• Some of the goals discussed were as follows:
  o identifying actionable interventions,
  o finding alignment between various interventions,
  o addressing food deserts,
  o addressing minority health,
  o exploring social determinants of health,
  o early childhood physical activity and nutrition.

II. Overview of the current status of obesity in Louisiana
• Jamila Freightman gave a presentation on obesity rates in Louisiana.
• Ryan Bilbo presented information on how the data available is translated on a GIS map, and also noted that the current data is not useful on a local level.
• Caroline Brazeal presented information on the Centers for Disease Control and Prevention 1305 grant. She discussed the four domains and measures required in the grant.

III. Discussion: Defining opportunities for organizational alignment and collective impact to address obesity prevention in Louisiana (open discussion between commission members)
• What is the core problem driving the Louisiana obesity epidemic?
• Top three responses
• Policy Implementation
• Physical Activity
• Nutrition/Food culture

• Actions suggested:
  • Utilize data and local case studies to demonstrate to legislators the need to prioritize identifying a solution to the obesity epidemic
  • Identify the policy levers that are ‘low hanging fruit’
  • Develop an inventory of current obesity prevention initiatives and projects in Louisiana

Summary of key comments:
• School based programs
  • There is a lack of physical activity among kids and access to green space or afterschool programs.
  • Need school-based interventions
• Policy
  • Understand political realities
  • Discussed current policies and barriers to enforcing those policies
• Clinical interventions
  • Group was asked about programs with health care professionals. Current prescription program
    for exercise and increased fruit and vegetable consumption. Prescription may provide discounts
    or cash for patients.
• Culture
  • Discussed the food culture in Louisiana

(1) How should the goals and objectives of the Louisiana Obesity Commission be defined?
  a. Commission members decided to review policy recommended by the previous obesity commission
     policy subcommittee. Goals and objectives will be determined based on where the previous
     commission left off with their research and advocacy.

(2) What obesity prevention programs, interventions, or research are the organizations represented on the
commission currently conducting or participating in across the state?
  • Programs referenced by commission members included the following: FitNola, Pennington ‘Heads Up’
    project, New Orleans Council for Community and Justice: The Great Race Initiative, Well-Ahead
    Louisiana, Pennington/Baptist Community Ministries PRISM analysis.

IV. Business
Selection of Vice-Chair
MOTION to nominate Representative Ebony Woodruff as Vice-Chair, seconded and passed.

Community member application review and selection
Present community-based organizations presented their case for membership to commission members and
applications were reviewed.
VOTE by secret ballot. CBO Commission Members
Elected: Baptist Community Ministries and Ochsner Health System

V. Meeting wrap up and next steps
Schedule all future in person and conference call meetings. Jamila Freightman

Commission members will send PRIISM analysis and BCM obesity commission policy documents to Jamila Freightman. Baptist Community Ministries and Pennington Biomedical Research Center

Commission members will send an inventory of existing obesity prevention initiatives to Jamila Freightman. Commission Members

Provide commission members with the 1305 performance measures. Jamila Freightman

Develop a logic model for the commission in accordance with 1305 performance measures and CDC domains of practice. Jamila Freightman

Seek out available students or research assistants from the represented organizations to help with the commission’s data collecting and reporting efforts, and asked that these individuals participate in commission meetings. Commission members responsible for identifying individuals and sending their names to Jamila Freightman

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<td>October 28, 2014 (tentative)</td>
<td>In-person meeting</td>
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<tr>
<td>November</td>
<td>Conference Call</td>
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<td>December</td>
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<td>January</td>
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<td>February: Annual report due</td>
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VI. Adjourned at 3:40pm
October Meeting

State of Louisiana
Department of Health and Hospitals

Louisiana Obesity Commission
Benson Towers,Room 2024
1450 Poydras Street, New Orleans, LA
Thursday, October 30, 2014, 1 p.m. to 3 p.m.

Meeting Minutes

Attendees Present:
Commission Members: Chair Dr. Takesha Davis - LA DHH; Vice-Chair Rep. Ebony Woodruff - LA House; Dr. Carolyn Johnson - Tulane PRC; Peter Katzmarzyk - Pennington; Ryan Gremillion - LA DOH; Avery Corenswe; Ochsner; Chris Adams - LA Senate; John LaCour - Picard Center.

Quorum met: 3 members attended in person

Guests: Caroline Brazzel - LA DHH; Jamila Freightman - LA DHH; Joanna Toulouse - LA DHH; Leslie Lewis - LA DHH; Kristine Bardell - LPHI; Kaleb Hill - CAB; Mary Kathryn Poole - Tulane; Katherine Cain - NO Health Dept; Donna Betzer - Volunteers of America; Kathy Hill - Governor’s Council; Adrienne Warren - Organic LA; Mary Kathryn Poole - Tulane PRC; Adrienne Mundorf-Tulane PRC

I. Call to order at 10:35pm
   • Chair opened the meeting by welcoming the attendees.
   • Minutes from the August 25, 2014 meeting were reviewed and approved with an amendment under “Summary of key comments.”

II. Overview of meeting structure
   • Caroline Brazzel presented an overview of the meeting agenda and goals.

III. Presentation - Emerging Themes
   • Caroline Brazzel presented an overview of preliminary data and themes identified during commission member interviews.

IV. Break-out Activity and Large Group Sharing of Results
   Caroline Brazzel shared instructions for a break-out session and provided an overview of responses. Following are questions posed during the session and common responses.
   1. What are three areas of overlap between commission member organizations?
      a. It was decided by attendees that this question will be discussed at a later time when commission members are more familiar with the work being done by other members.
   2. Please identify three gaps in the work in which commission member organizations are currently engaged.
      a. Follow-up
      b. Asset mapping
      c. Physical activity focus
      d. Focus on adults
      e. Expansion of membership to reflect entire state
f. Policy implementation

g. Funding

3. As the statewide Obesity Commission, what are three things we care about delivering to consumers by March 2016?
   a. Asset map
   b. Communication plan
   c. Policy implementation
   d. Follow-up
   e. Evidence-based interventions

4. What are three things we can do to facilitate collaboration between our organizations between now and March 2016?
   a. Commission communication structure
   b. Grant writing collaborative

5. In March 2016, how will you evaluate the success of the Obesity Commission?
   a. Process for commission communication
   b. Defined purpose for the commission
   c. Legislative support for obesity prevention
   d. Funding
   e. Policy enforcement

V. Meeting wrap up and next steps
   • Jamila will coordinate commission member review and revision of key informant interview results.
   • A commission member presentation schedule will be developed during the next meeting.
   • Comprehensive policy analysis needs to be conducted, or current policy analysis need to be reviewed.
   • Reach out to previous commission members to increase participation in meetings and discussions.
   • A survey will be developed by Tulane, Pennington, and Picard
     • Tulane will develop possible questions for the survey
     • Healthy Communities Coalition can assist in distributing the survey
   • A meeting to review the draft report will be held on November 20th.

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<td>Conference call</td>
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<td>December 16</td>
<td>In-person meeting in Baton Rouge</td>
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VI. Adjourned at 3:00pm
November Meeting

State of Louisiana
Department of Health and Hospitals

Louisiana Obesity Commission
Conference Call
Thursday, November 20, 2014, 3 p.m. to 4 p.m.

Meeting Minutes

Attendees Present:
Commission Members: William Cefalu-Pennington; Ryan Gremillion-LA DOE; Avery Corenswe - Ochsner; John LaCaur - Picard Center; Adrienne Mundorf-Tulane PRC

Guests: Caroline Brazzel - LA DHH; Jamila Freightman - LA DHH; Joanna Tonguis - LA DHH; Kate Holmes - LA DHH; Melissa Martin - LA DHH

I. Welcome and introductions

II. Overview of agenda
   • Jamila Freightman presented an overview of the meeting agenda and goals.

III. Presentation – Well Ahead and DHH School Health Program
   • Melissa Martin gave a presentation on the Well Ahead program that is being implemented by DHH. More information about Well Ahead can be found at [www.WellAheadLA.com](http://www.WellAheadLA.com).
   • Kate Holmes gave a presentation about the school health program. Kate is working with the Alliance for a Healthier Generation in Monroe and Morehouse school districts.

IV. Meeting wrap up and next steps
   • Commission members will email report and survey feedback to Jamila Freightman by COB Monday, November 24th.
   • Ryan Gremillion will email Department of Education reports to legislature for use as an example report to Jamila Freightman.
   • Adrienne Mundorf and Jamila Freightman will begin work on dissemination plan with Adrienne Mundorf and Dr. Johnson. Schedule meeting for the week after Thanksgiving.
   • Commission members will review interview responses and email amendments to Jamila Freightman.
   • Jamila Freightman will update policy list for report.

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V. Adjourned at 3:00 pm
December Meeting

State of Louisiana
Department of Health and Hospitals

Louisiana Obesity Commission
DHH Bienville Building 1st Floor – Room 173
Dial-in Number: (605)-562-0020 Meeting ID: 255-527-544
Tuesday, December 16, 2014, 1:30-3:30pm

Meeting Minutes

Attendees Present:
Commission Members: Ebony Woodruff-House Rep.; Ryan Gremillion-LA DOE; Avery Coresnweit - Ochsner; Adrienne Mundorf-Tulane PRC; Caroline Brazee - LA DHH

Guests: Jamila Freightman - LA DHH

I. Welcome and introductions
   • Meeting began at 1:42pm.

II. Overview of agenda
   • Caroline Brazee presented an overview of the meeting agenda and goals.

III. Presentation of Survey and Dissemination Plan
   • Adrienne Mundorf from the Tulane Prevention Research Center presented the latest draft of the survey the commission will disseminate statewide to gather information about obesity-related activities. The commission members were asked to complete the survey to get an idea of how long the survey would take to complete, and shared their feedback on the flow, design and content of the survey.

Possible Contacts
   • Well Ahead designees
   • Pennington Conference attendees
   • Pit Nola
   • Healthy BR
   • Farm to School Contacts
   • DOE weekly newsletter (possible)

IV. Group Session: Timeline for 12-Month Action Plan
   • Caroline Brazee led the commission in a group session to prioritize the deliverables into the 12 month timeline in the annual report. This planning session helped the commission set deadlines to complete these deliverables over the next year.

V. Meeting wrap up and next steps
   • The commission agreed to disseminate the survey to their individual contacts.
   • The commission agreed that January 16, 2015 will be the date the survey will be disseminated, and the survey will close on January 30, 2015.
• Adrienne Mundorf and Jamila Freightman will work together on editing the survey and sending out the final draft of the survey to commission members on Friday, December 19th.
• Jamila Freightman will send the survey email prompt to commission members on Friday, December 19th.
• Ryan Gremillion will find out if the survey can be included in DOE’s weekly newsletter.
• The commission decided the January meeting will be in-person instead of a conference call. The meeting will be held in New Orleans, and the exact location is TBD. Jamila Freightman will work with commission member who will host the next meeting.
• The commission discussed hiring a consultant or student to do an analysis of policy enforcement in Louisiana.
• The commission discussed designating a “spearheader” to lead commission activities.
• The commission discussed ways to increase participation and accountability among the members by assigning work and developing Gantt charts.

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VI. Adjourned at 3:30pm