



Welcome to Fireside Chat # 372
March 04, 2014 1:00 – 2:30 PM Eastern Time
(Teleconference open for participants at 12:50 ET)

Incubating Healthy Communities in Rural and Remote Communities: Healthy Canada by Design in Newfoundland, New Brunswick and Saskatchewan

Advisors on Tap:

Kevin Gould, P.Eng, Public Health Engineer, New Brunswick Department of Health

Holly Owens, MCIP, RPP, Associate, Dillon Consulting Limited. New Brunswick

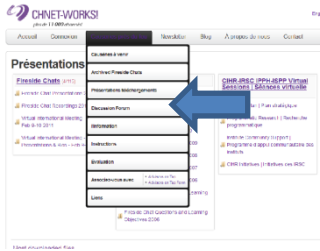
Mary Bishop, FCIP, Senior Project Manager, CBCL Limited, Newfoundland

Janet Fay Matthews, BN, RN, MHSc, Public Health Consultant, Newfoundland

Megan Jones, M.Pl, Public Health & Community Planner, Regina Qu-Appelle Health Region

Joy Sluser, CSEP, Active Living Coordinator, Health Promotion, Regina Qu'Appelle Health Region

Housekeeping : how a fireside chat works...



Step #1 : Backup PowerPoint Presentation

▪ www.chnet-works.ca

Step #2 : Teleconference

All Audio by telephone

- If your line is 'bad' – hang up and call back in
- Participant lines muted
- Recording announcement



Step #3: The Internet Conference *(via 'Bridgit' software)*

From our computer to yours

No audio via internet



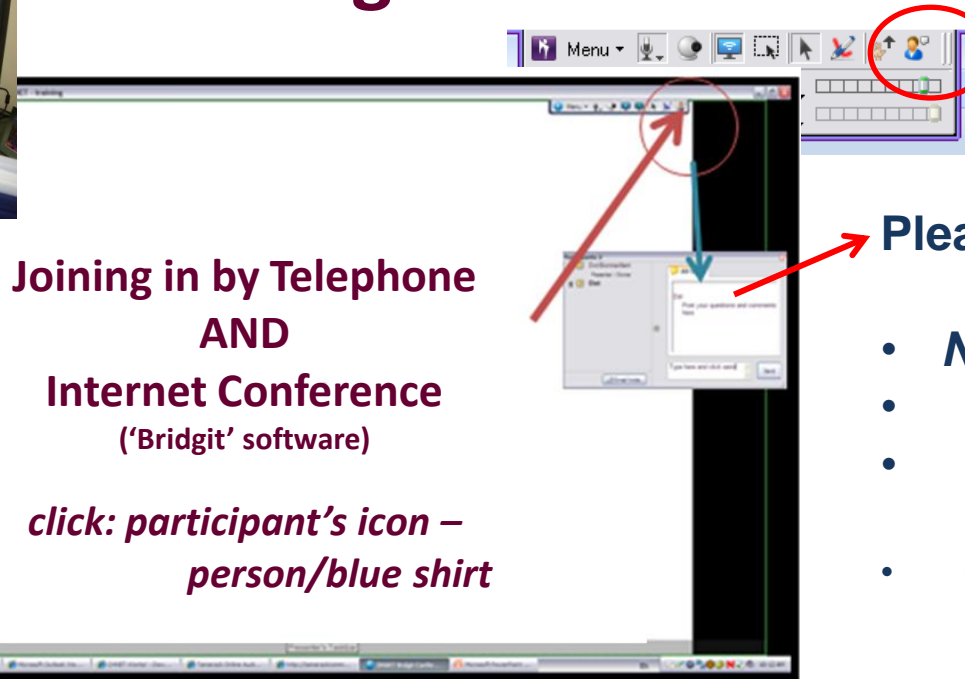
A transmission delay of 2-4 seconds is normal

Difficulties? Firewalls - slow reception, disconnection :

Use the Backup PowerPoint Presentation (Instruction Step #1)

For assistance: animateur@chnet-works.ca

How to post comments/questions during the Fireside Chat

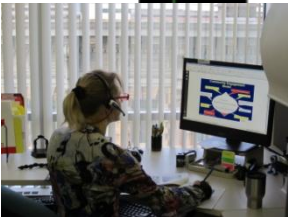


Joining in by Telephone
AND
Internet Conference
(‘Bridgit’ software)

*click: participant’s icon –
person/blue shirt*

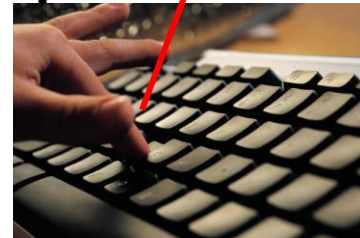
Please introduce yourself!

- **Name**
- **Organization**
- **Location**
- **Group in Attendance?**



Joining by Telephone only?

By email:
Respond to the ‘access instructions
email
animateur@chnet-works.ca



Healthy Canada by Design CLASP Initiative

5 National Organizations:

- ❖ Heart & Stroke Foundation
- ❖ Urban Public Health Network
- ❖ National Collaborating Centre Healthy Public Policy
- ❖ Canadian Institute of Planners
- ❖ Canadian Institute of Transportation Engineers



11 Health Authorities from 7 Provinces:

- ❖ British Columbia & Ontario & Quebec
- ❖ Saskatchewan & Manitoba
- ❖ Newfoundland, New Brunswick & Nova Scotia



Several Academic Institutions:

- ❖ Simon Fraser University
- ❖ University of Montreal
- ❖ Dalhousie University
- ❖ Memorial University



2 Non-Government Organizations:

- ❖ TCAT & MUEC

Healthy Canada by Design CLASP Initiative

Vision:

Health officials, planners, engineers and NGOs in communities across Canada collaborate seamlessly to:

- ensure built environments are designed to promote health and well-being,
- thus contributing to the reduction of risk factors for chronic diseases.



Advisors on Tap



Holly Owens

MCIP, RPP, Associate, Dillon Consulting Limited, New Brunswick, Planning Facilitator to HCBD NB Project Team



Kevin Gould,

P.Eng, Public Health Engineer, Healthy Environments Branch, New Brunswick Department of Health

Advisors on Tap



Megan Jones.

M.Pl, Public Health & Community
Planner, Planning Facilitator to HCBD
Regina Qu'Appelle Health
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Region



Advisors on Tap



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Incubating Healthy Communities in Rural New Brunswick

Office of the Chief Medical Officer of Health,
New Brunswick Department of Health



An initiative of:



Kevin Gould, P.Eng. | Public Health Engineer
Holly Owens, MCIP RPP | NB CLASP Facilitator | Dillon Consulting Limited

March 4, 2014

Outline

- Objectives of NB CLASP
- Projects
- Gains
- Barriers & Lessons Learned
- Benefits of Public Health & Planning Working Together
- Next Steps



City of Fredericton, Bill Thorpe Walking Bridge

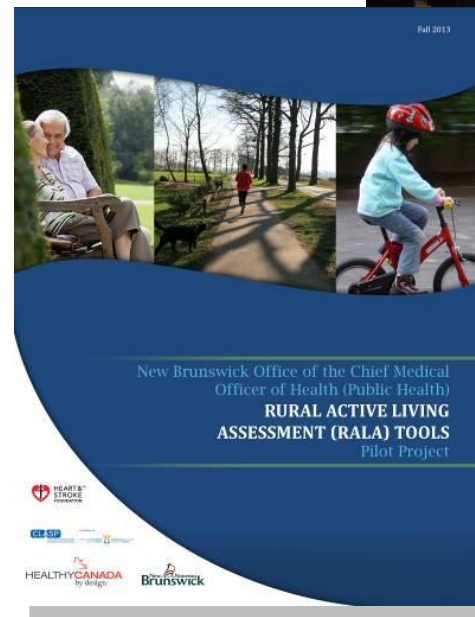
Objectives of NB CLASP

- Raise awareness
- Understand built environment decision making
- Foster relationships
- Plan for the long term



Projects

- City of Fredericton - Building a Municipal Relationship
- Provincial Planning Legislation Review
- RALA Tools
- Future of Healthy Built Environment in NB



Benefits of Public Health & Planning Working Together

- Understanding of planning processes
- Speaking the language
- Understanding rural planning and lack of tools
- Existing relationships within planning community



Gains

- Understanding and awareness of healthy built environment in NB
- New relationships
- New policy / tools

VISION AND CONCEPT: WHAT IS MAIN STREET?

3.1 Vision for Main Street

In many ways Main Street has risen in prominence with smaller towns and villages that is done with larger urban centers. The four traffic patterns, both of which are things and the diversity of use and building density contribute to a vibrant sense of place. The street is commonly thought of as a convenient local transit and supply center for northside residents. Although Main Street shared the 26, 30th Ave with the downtown, it is not really thought of as being "on the river", despite some of the best riverfront views being from the northside.

The five themes that emerged from the public and stakeholder consultations can be summarized as:

1. Pedestrian Priority
2. Improve Aesthetics
3. Go Green and Sustainable
4. Family Services
5. Village Concept

Main Street acts like a village, not like a town, so why not build on this character by making it more vibrant by building it "Village Main Street", or something similar. By utilizing the concept of the "village" it provides a sense of place that will start to build on their Street as a unique experience in a small city that doesn't give pride in its quality of the attributes "Village". Main Street is more than just a street, it is a place where other major cities have worked with in developing a unique identity in the marketplace. The following vision is recommended for Main Street.

3.2 Identity

Main Street is currently an in-between place. It is not a downtown and it is not a small town. It is difficult to market something that can't be easily described and Main Street cannot continue to be all things to all people. A more direct focus is required for communities where Main Street is on the rise. What is clear is that Main Street has been built from a suburban road on both suburban street form and automobile-oriented. This position is out of step with the recent trends toward cities looking toward people back to the urban centers. Cities that are not walkable, connected or foster a work environment that contributes to this innovation economy are destined to under achieve.

Translating Existing Regulations to Urban Form:

1. Demographic Living Preferences
 - Baby boomers who want to "age in place", downsizing, generation y's preference for urban convenience over more dense, less reliance on automobile
2. Economic Shifts
 - The "suburbanization" of transforming how we make money, socialize, research and work
 - Highly skilled workers will be key to the innovation economy and they will be attracted to urban centers that foster social and professional engagement and entrepreneurial opportunities
 - Most in an experience and not just a transaction
3. Infrastructure Expenses
 - Communities can not afford the high costs of infrastructure associated with automobile oriented design
 - Office space and retail premises will become obsolete, with less space per person and more multi-functional
 - Energy efficiency will be a standard design principle

26

CLASP GROUP ASSOCIATION OF NEW BRUNSWICK



Fredericton

apla Atlantic Provinces Association of
Landscape Architects

NBAP AUNB
New Brunswick Association of Planners • Association des urbanistes du Nouveau-Brunswick

La Grande Région de
The Greater Region of
Rogersville

New Brunswick
Nouveau Brunswick

Barriers / Lessons Learned

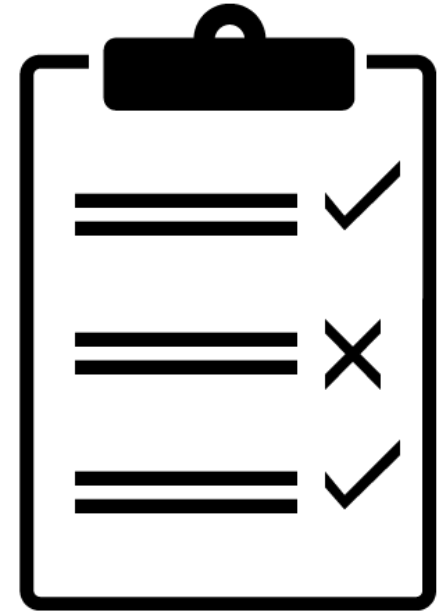
- Limited staff time & resources
- Be ready to adapt
- Value of collaboration
- Build the business case: sell the co-benefits



Town of Hampton, New Brunswick

Next Steps

- Outcomes from Karen Lee meetings
- Work with stakeholders to determine next steps
- Definition of staff responsibilities





Thank You.

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Incubating Healthy Development in Rural & Remote Communities

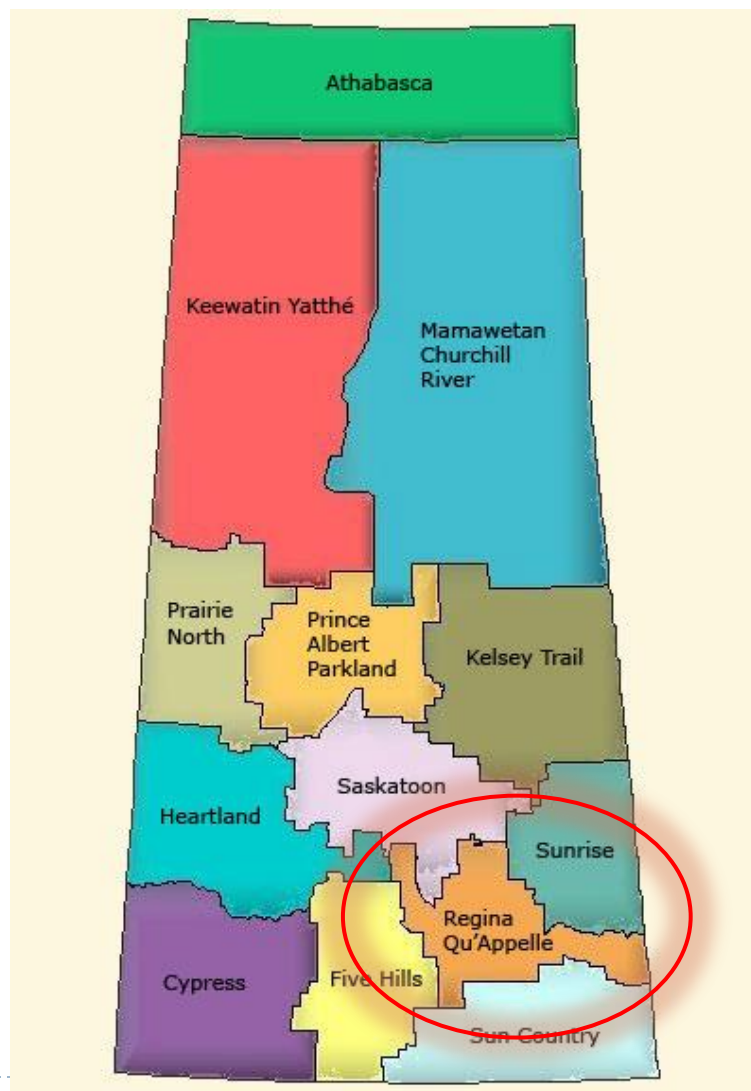
Joy Sluser, Active Living Coordinator, Health Promotion
Megan Jones, M.PI, Public Health & Community Planner
Regina Qu'Appelle Health Region

“The greatest wealth is health.”

~ Virgil

“We are only as healthy as our environment.”

Growing Healthy Rural Communities



- ▶ South-eastern Saskatchewan
- ▶ 260,000 residents
 - ▶ 210,000 urban
 - ▶ 50,000 rural
- ▶ 26,663 km
- ▶ About Us:
http://www.rqhealth.ca/inside/about_us/rqr_info.shtml

Growing Healthy Rural Communities

► CLASP Action Plan Identified 4 Actions:

- 1) Foster & Build a Relationship with the City of Regina
- 2) Education
- 3) Understand the Built Environment from a Rural Perspective
 - I. Age-friendly Communities
 - II. RALA Tools
- 4) Policy Development & Implementation

***** Overlap between Action Items *****

Growing Healthy Rural Communities

► First 3 Steps of RALA

Process:

- 1) Gauge interest
- 2) “Canadianize” the RALA Tools
- 3) Introduce Tools to community assessors



Growing Healthy Rural Communities

RALA Tools – Rural Active Living Assessment

WHAT ARE THE RALA TOOLS?
The RALA Tools have been designed to help communities collect data on the physical environment, policies and procedures that can influence levels of physical activity in your community. These Tools have been designed to examine rural communities in Saskatchewan. It provides a structure for looking at the community as a whole, how it is laid out, where people live, work and go to school and how they are likely to get from one place to another. It also includes a detailed tool to look at specific segments of your community and assess key characteristics of those segments.

PURPOSE OF USING THE RALA TOOLS IN COMMUNITIES IN ROHR
Phase II of CLASP initiative includes Health Regions/Authorities that contain medium-sized cities and a higher rural population. Therefore, part of ROHR's involvement will involve gaining a better understanding of the needs of rural communities when it comes to creating healthier communities. Rural communities in Saskatchewan are unique in their needs—we felt it was necessary to adapt the evaluation criteria and questions to fit within a local context. Much research has been conducted within and urban context on what general policies and procedures create healthier communities, but there is a large gap in research when it comes to rural communities—in particular, prairie rural communities. Using the RALA Tools, we hope to begin to provide an overview of what rural communities in Saskatchewan need/want for them to become healthier.

Although each community will differ in its needs and wants, there will be overarching principles that can guide discussions about designs, policies and operations. These overarching principles may assist in creating and maintaining healthier rural communities.

YOUR ROLE IN USING THE RALA TOOLS
Your community will use the RALA Tools in the assessment. The following Tools are available for your use:

TOOL	DESCRIPTION
Codebook & Scoring	Provides an overview of the Tools, descriptions and examples for the questions throughout the Tools.
Community Assessment Tool	Provides an overview of the community, its demographics and characteristics, list and condition of: educational, recreational, civic facilities in the community.
Program & Policy Assessment Tool	Looks at the programs and policies the community offers, their quality and accessibility of them.
Segment Assessment	Examines a segment of the community in finer detail.
RALA Tools Reporting Template	This document provides an opportunity for the community members to produce the results of the Community-wide and Programs & Policies Assessments.
Assessment of the RALA Tools	We want to know how we can make the RALA Tools better.

QUESTIONS ABOUT THE RALA TOOLS?
Contact: Megan Jones (306.766.6334), Joy Sluser (306.766.6326) or Sarafa TJ Tijani (306.697.4026) with the Regina Qu'Appelle Health Region – Health Promotion Department.

Rural Active Living Assessment (RALA) Tools

Codebook & Scoring

For assessing physical features, community programs and policies that promote physical activity in rural communities.

Rural Active Living Assessment (RALA) Community Assessment Tool

COMMUNITY DEMOGRAPHICS & CHARACTERISTICS

Community Name: _____
 Auditor's Name: _____
 Community Population: _____ Area Population: _____
 Area Measurement: _____ square kilometers
 Population Density: _____ per square kilometers
 Topography: (check all that apply):
☐ Flat ☐ River/Creek/Ocean
☐ Hills ☐ Forest/Agricultural/Undeveloped
☐ Valley ☐ Other: _____
 Presence of a Community Centre?
☐ Yes, one distinct centre ☐ No centre
☐ Yes – multiple centres ☐ Other: _____
 General Street Pattern (check all that apply):
☐ Grid ☐ No distinct pattern
☐ Radial ☐ Other: _____
☐ Cul-de-sacs

The following sections are intended to provide a picture of the educational and recreational amenities your community has to offer.

EDUCATIONAL FACILITIES

Is there a school located in the community?
☐ Yes
☐ No
 If yes, what type of school(s) is/are in the community?

School Name	Population	Location (km from Community Centre)

If no, what is the proximity of the closest school?
 Elementary: _____ kilometers
 Junior High: _____ kilometers
 High: _____ kilometers

1

RALA Information Sheet

Codebook & Scoring

Community Assessment Tool

Growing Healthy Rural Communities

Regina Qu'Appelle HEALTH REGION **HEART & STROKE FOUNDATION** **HEALTHY CANADA by design**

Rural Active Living Assessment (RALA) Program & Policy Assessment Tool

Community Name: _____
Auditor's Name: _____

Programs & Policies	Check One
Does the community have a policy that requires bikeways or pedestrian walkways in new public infrastructure projects?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know <input type="radio"/> N/A
Comments: _____	
Does the community have a program/policy in place to ensure regular clearing of snow and ice from sidewalks?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know <input type="radio"/> N/A
Comments: _____	
Does the community have a public recreation department that offers physical activity programming?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know
If yes, do they offer:	
• Programs for youth?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know
• Ages served: _____	
• Programs for adults?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know
• Ages served: _____	
• Programs for older adults?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know
• Ages served: _____	
• Are physical activity resources/facilities available for local resident use outside of formal programming?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know

1

Regina Qu'Appelle HEALTH REGION **HEART & STROKE FOUNDATION** **HEALTHY CANADA by design**

Rural Active Living Assessment (RALA) Segment Assessment

INTRODUCTION

This Assessment allows you to break your community down into "segments" (e.g. Community Centre Zone, Neighbourhood Zone, School Zone, etc...) and audit them according to their characteristics, amenities and features. Please make a copy of the Segment Assessment for each segment of the community you are going to audit. For more detailed instructions on completing each question of the Segment Assessment, please refer to the RALA Codebook & Scoring document.

Community Name: _____
Auditor's Name: _____
Date: _____ Start Time: _____ End Time: _____
Segment #: _____

PART I – QUANTIFIABLE CHARACTERISTICS

SEGMENT DESCRIPTION

Boundaries:

- North: _____ East: _____
- South: _____ West: _____

Primary Streets:

- _____
- _____
- _____
- _____

Land Use:

- Residential
- Commercial
- Industrial
- Public/Civic
- Community Park/Open Space
- Mixed Use (all more than 1 of the above)
- Other: _____
- Other: _____

Terrain:

- Flat
- Hills
- Valley
- Forest/Agricultural/Undeveloped
- River/Creek/Ocean
- Winding Roads
- Other: _____
- Other: _____

Segment Zone Type:

- Community Centre/Main Street
- Thoroughfare
- Industrial
- School Zone ...cont'd on next pg...

1

Regina Qu'Appelle HEALTH REGION **HEART & STROKE FOUNDATION** **HEALTHY CANADA by design**

ASSESSMENT OF THE RALA TOOLS: HOW CAN WE MAKE THEM BETTER?

This form is part of the assessment of the RALA tools that your community recently piloted. Please answer frankly about your experiences with the tools, and make any suggestions that you think could improve them. Your responses will be confidential.

How EASY or HARD was it to use:

	Impossible for us to do as indicated	Very hard for us to do as indicated	OK, we were able to do it easily as indicated	Pretty easy, we had hardly any problems	Very easy – we breezed through it
Community-wide tool	1	2	3	4	5
Programs and policies tool	1	2	3	4	5
Segment assessments	1	2	3	4	5

What could make this tool EASIER to use, by you or other communities?

Community-wide tool: _____

Programs and policies tool: _____

Segment assessments: _____

How USEFUL will this tool and process be for your community's planning needs?

	Completely useless	Quite useless	Some parts useful, some parts useless	Quite useful	Highly useful
Community-wide tool	1	2	3	4	5
Programs and policies tool	1	2	3	4	5
Segment assessments	1	2	3	4	5

HOW, if at all, do you expect to use the information generated by the tool?

Town-wide tool: _____

Programs and policies tool: _____

Street segment assessments: _____

	No	Maybe	Yes
Did using these tools result in new connections in the community?			
Would you use these tools again?			
Would you recommend that they be rolled out to other rural communities?			

Any other comments or suggestions for us?

Program & Policy Assessment

Segment Assessment (Optional)

RALA Tool Assessment

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► Final 3 Steps of RALA Process:

4) Assessment Completion

5) Review findings, create Vision Statement & Action Plan

6) Follow up



Town of Grenfell – RALA Committee

Growing Healthy Rural Communities

RALA Tools Action Plan

Town of Grenfell

Planning Group



Town of Grenfell		
Name	Role	Contact Information
Lloyd Gwilliam	Mayor	themayor@mygrenfell.com
Suzanne Hawkshaw	Chief Administrative Officer	townofgrenfell@sasktel.net
Regina Qu'Appelle Health Region – Health Promotion Department		
Megan Jones	Public Health & Community Planner	megan.jones@rqhealth.ca
Joy Sluser	Active Living Co-ordinator	joy.sluser@rqhealth.ca
Tijani Sarafa	Rural Health Educator	sarafa.tijani@rqhealth.ca
Heart & Stroke Foundation of Canada		
Nicole Yacishyn	Community Action Specialist	yacishynn@hsf.sk.ca

Town Vision Statement

A Vision Statement outlines what the residents, elected officials, etc...want their community to be, or how it wants the world in which it operates to be (an 'idealised' view of the world). It is a long term view and concentrates on the future. It can be emotive and is a source of inspiration. For the purposes of the RALA Tools, this Vision will focus on Healthy Community development within the Town's boundaries and the area immediately surrounding it. All members present on the 19th of November will be involved in creating the Vision Statement.

"We, the Town of Grenfell, strive to be leaders in supporting a positive, progressive, friendly, safe, healthy and accessible community for ALL."
Town of Grenfell, November 2014

Major Findings from RALA Tools

Based upon the information provided from the RALA Tool Reporting Template, I identify some of the major findings from the Assessment. These major findings should be something that the Town has some ability to change/revise/improve.

- 1) **INFORMATION** – Signage, Maps (landmarks, recreation facilities, businesses), Town Website, Billboards, Newsletter,
- 2) **USE OF EXISTING RESOURCES** – Economic Developer, Businesses, Website, Information Pamphlets for Newcomers, etc...
- 3) **QUANTITY OF ITEMS** – programs, services and facilities
- 4) **PLAYGROUND ON NORTH SIDE OF TOWN** – Railroad tracks are a barrier to those on the North of the tracks to access park space.
- 5) **QUALITY OF INFRASTRUCTURE** – Pro-active in the maintenance of infrastructure, sidewalks, snow removal, etc...
- 6) **CONVERSATIONS HAVE STARTED** – About a healthier Grenfell and how to involve many generations in Town decision making.

Growing Healthy Rural Communities

► Was the Strategy we used effective?

Objective of CLASP	Did we reach it?
Increase presence of RQHR – Health Promotion Department with ... decision-makers.	√
Build knowledge and capacity of the public... elected officials... on the impact the Built Environment has on the health and quality of life of the residents.	√
Gain an understanding of both urban and rural policies, procedures, barriers and opportunities when it comes to the existing design of the built environment.	√
Build long-term sustainability of collaborative relationships created during the CLASP Initiative.	√

Growing Healthy Rural Communities

► Was the Strategy we used effective?

Goal of Action 3 – Understand the BE from a Rural Perspective		Did we reach it?
Can we now answer the following questions?		
What is a “healthy Built Environment” in a rural setting?	✓	
What role can active transportation play in a rural environment?	✓	
What is the view of the built environment in a rural setting?	✓	...on our way...
What policies need to be included in a rural OCP and Zoning Bylaw to benefit health in relation to the built environment?	✓	...on our way...

**** More work to be done, but on our way to gaining a better understanding of health and the built environment in a rural setting ****

Growing Healthy Rural Communities

- ▶ Why did it work? Advantages
 - ▶ Tools
 - ▶ **CLASP** partners
 - ▶ **Town of Grenfell** – active and supportive administration and elected officials, growing community, .
 - ▶ **CLASP** Facilitator
 - ▶ **Heart & Stroke Foundation of Canada's** – Community Action Specialist

Growing Healthy Rural Communities

- ▶ **Barriers / Challenges**

- ▶ **Perception** – “acute” care vs. promotion & prevention
- ▶ **Funding** – Programs, Services & Infrastructure

- ▶ **Why did it work in spite of the barriers/challenges?**

- ▶ **Project Manager** – CLASP Facilitator
- ▶ **Educate** – purpose of the RALA Tools and the use of the information.
- ▶ **Open-minded**

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- ▶ *Why? So What?*
- ▶ Rural Health Promotion Information
 - ▶ More information is needed
 - ▶ Prairie Provinces unique
 - ▶ Development & Growth
- ▶ Positive Relationship



Growing Healthy Rural Communities

► The Plan...





Growing Healthy Rural Communities

▶ **Contact:**

▶ **Joy Sluser** – Active Living Co-ordinator

- ▶ Regina Qu'Appelle Health Region – Health Promotion Department
- ▶ Phone: 306.766.6326
- ▶ Email: joy.sluser@rqhealth.ca

▶ **Megan Jones** – Public Health & Community Planner

- ▶ Regina Qu'Appelle Health Region – Health Promotion Department
- ▶ Phone: 306.766.6334
- ▶ Email: megan.jones@rqhealth.ca

▶ **Lloyd Gwilliam** – Mayor

- ▶ Town of Grenfell
- ▶ Phone: 306.697.2815
- ▶ Email: themayor@mygrenfell.com

Growing Healthy Rural Communities

► References:

- *Rural Active Living Assessment (RALA) Tools*. Main Rural Health Research Center – University of Southern Maine. Portland, ME. (2009). Retrieved: June, 2013 from:
<http://activelivingresearch.org/rural-active-living-assessment-rala-tools>.
 - Includes: Codebook & Scoring and Town-Wide (Community), Program & Policy, Segment Assessments.
- *Rural Active Living Assessment (RALA) Tools Healthy Canada By Design CLASP Initiative Evaluation*. Created by: Natalie Kischuk.
- *Rural Active Living Assessment (RALA) Tools Healthy Canada By Design CLASP Initiative & Regina Qu'Appelle Health Region Implementation Tools*.
 - Includes: Information Handout and Action Plan.

Growing Healthy Rural Communities

► Image Sources:

- *Saskatchewan Health Regions Map*. Retrieved: February, 2014 from: <http://www.health.gov.sk.ca/health-regions-map>.
- *Toolbox* – Retrieved: February, 2014 from: <http://edyassociates.com/PI.html>.
- *Town of Grenfell Vision Statement* – Taken by: Megan J Jones – November, 2013
- *Town of Grenfell Photos*. Retrieved February, 2014 from:
 - <http://globalnews.ca/news/892077/town-of-grenfell-has-passed-anti-bullying-law/>
 - <http://www.grenfell.ca/community/historical-glimpse/>

Growing Healthy Rural Communities

► Image Sources:

- *Saskatchewan Main Street*. Retrieved February, 2014 from: <http://www.sceneinsaskatchewan.com/about/>.
- *Stop, Collaborate & Listen*. Retrieved February, 2014 from: <http://tempusnova.com/stop-collaborate-and-listen-with-google-apps/>.
- *Champion*. Retrieved February, 2014 from: <http://wikibrands.com/wikibrands-champion-test/>.
- *Build*. Retrieved February, 2014 from: <http://www.cfo-insight.com/corporate-strategy/ma/how-buy-and-build-works-for-private-equity/>.
- *Questions? Comments?* Retrieved February, 2014 from: <http://holisticsquid.com/qa-raw-milk-and-lactose-intolerance-beauty-products-kids-supplements-and-more/>.

Healthy Canada By Design Newfoundland and Labrador

Provincial Wellness Advisory Council Building Healthy Communities Collaborative

Mary Bishop, FCIP
Senior Project Manager,
CBCL Limited

Fay Matthews, MHSC
Public Health Consultant

CLASP Planning
Facilitator

CLASP Health Facilitator



An initiative of:



“Like stones rolling down hills, fair ideas reach their objectives despite all obstacles and barriers. It may be possible to speed or hinder them, but impossible to stop them.”

Jose Marti



Newfoundland Context

- Provincial Wellness Advisory Council (PWAC)
- Focus on the built environment
- Building Healthy Communities Collaborative



Objectives

- 13 point action plan to
 - Build strategic alliances and capacity
 - Facilitate adoption of built environment policy
 - Promote use of CLASP tools
 - Ensure a rural focus



Spring and Fall 2013

- May Workshop
- Networking
- Dr. Karen Lee visit



API-NL	SPRING WORKSHOP
MAY 30, 2013	8:30 am - 4:30 pm

***Planners and Health Professionals:
Working Together for Community Wellness***

Hosted By: API | Atlantic Planners Institute
IUA | Institut des Urbanistes de l'Atlantique
Newfoundland and Labrador Branch / Division de Terre-Neuve et Labrador

Venue: Foran Room, St. John's City Hall, 10 New Gower Street, St. John's, NL
**Please note: Parking at City Hall will not be available.

Background:

Health professionals, planners, recreation specialists and community groups share an interest in the health and well-being of citizens in our communities. Yet we seldom work together to discuss the ways in which the built form of a community can affect health outcomes. There is a growing movement of collaboration across the country between professionals involved in community design and the health sector. This meeting is the beginning of the exchange of knowledge here in Newfoundland and Labrador between planners, health professionals and others who influence community form and function.

Meet the people and learn about the process and resources that can support you in developing policies, plans and actions that will improve community health outcomes. Learn about new tools that are available, and discuss specific actions to further cross collaboration.

Special thanks to BHCC and CLASP for generously contributing toward this event.



The Healthy Canada by Design CLASP Initiative is a partnership of national health, planning and transportation organizations, regional and local health authorities, non-governmental organizations and university researchers that are collaborating to bring health considerations into land use and transportation planning processes, with the goal of creating healthy communities that support active transportation and physical activity.




Engagement

- Department of Health and Community Services
- Regional Wellness Coalitions
- Office of Climate Change, Energy Efficiency and Emissions Trading
- Office of Public Engagement
- St. John's Board of Trade
- Municipalities NL
- NL Municipal Councils and NL public directly



Policy Shift – building on what exists

- Tidy Towns Well  Minded Community Award
- 41 Communities
- 2013 winner – Norris Point - Population 685
- Communities in Bloom
- 2014 Municipal Symposium

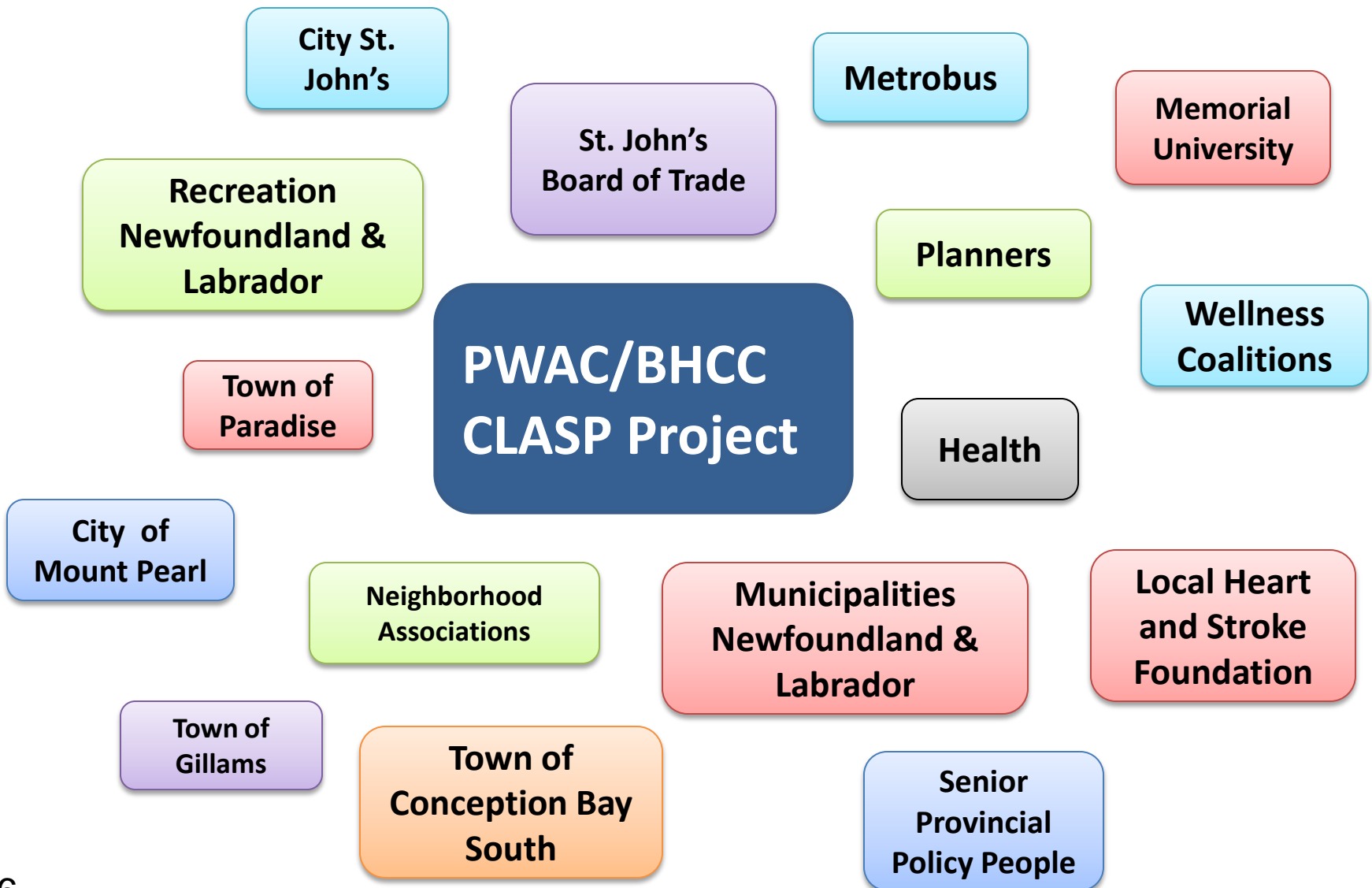


CLASP Tools

- Focus on creating awareness of existing tools
- RALA tools pilot – engaging communities to try them out
- BC Toolkit (under development) – have consent to use components to structure Provincial Wellness Paper



Growing Interest



Barriers or “Hitches in Time”

- Competing priorities for key stakeholders who support HBE
- Municipal Elections – council changes, necessary to re-engage
- Municipal human and financial resources
- Identifying person to guide RALA tool use
- Lack of comprehensive policy strategy to move HBE forward



Lessons Learned

- Important to link positive economic and sustainability outcomes for communities
- Health and planning have many mutual interests
- Municipalities, government, public supportive of HBE concept
- Implementation has to be collaborative to get the best result.
- Leadership from the health sector is essential.



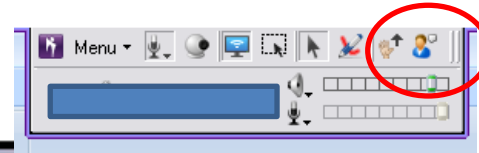
Thank you

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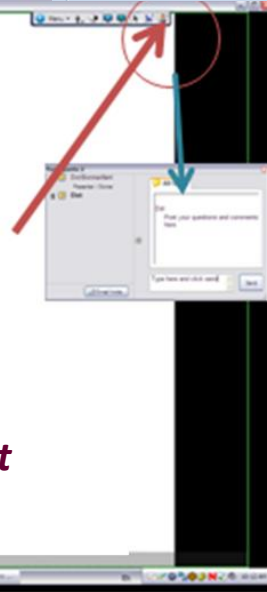


Your comments/questions please!



**Telephone
AND
Internet Conference**
(‘Bridgit’ software)

*click: participant’s icon –
person/blue shirt*



Joining by Telephone only?

**By email:
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email
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Project Evaluation Survey

Please take 5 minutes to complete an evaluation survey on this webinar at this link:

- English: <http://cpac.fluidsurveys.com/surveys/CPAC/hcbd-march-4-2014-webinar/>
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THANK-YOU!!

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