



August 4, 2008

Wendy Carlin  
Cabinet for Health & Family Services  
275 East Main Street, 4W-E  
Frankfort, KY 40621

Dear Ms. Carlin:

We want to thank you again for submitting Kentucky's VERB Summer Scorecard Intervention for review by the Center of Excellence for Training and Research Translation (Center TRT).

This letter is to inform you that Kentucky's VERB Summer Scorecard has been recommended for national dissemination. Congratulations to you, your team, and your partners for preparing the application and accompanying materials, but more importantly, thank you for your efforts to help youth adopt a healthier lifestyle.

Enclosed is a summary of reviewers' comments, including strengths and limitations. Since Kentucky's intervention has been recommended for national dissemination, a liaison with the Center TRT will continue to communicate with you and Carol Bryant as we prepare your intervention for dissemination through [www.center-trt.org](http://www.center-trt.org). Our goal is to post Kentucky's intervention template, intervention materials, and implementation protocol on this website by October 1, 2008.

In the coming months, we will:

- Draft a template for your review. A template guide is attached for your information - you are NOT responsible for developing the template, but we will need your input/feedback.
- Work with you, Carol Bryant, and CDC DNPAO to prepare VERB Summer Scorecard for dissemination through our website.

Susanne Schmal, your Center TRT liaison, will be in touch as the process moves forward. In the meantime, if you have any questions or comments, please feel free to contact her at 919.966.8038 or [susanne\\_schmal@unc.edu](mailto:susanne_schmal@unc.edu).

We look forward to continuing to work with you and congratulations again for having VERB Summer Scorecard recommended for national dissemination!

Sincerely,

Alice Ammerman, DrPH, RD

CC: Carol Bryant, Sarah Kuester, Susanne Schmal, Janice Sommers, and Diane Thompson

Enclosures



## Review Summary Obesity Prevention Program Kentucky VERB Summer Scorecard

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### Strengths

Strengths of the KY VERB Summer Scorecard Intervention include:

- Built upon a nationally tested campaign, VERB...It's What You Do. This helped to provide a foundation and brand recognition for Summer Scorecard to build upon.
- Employed extensive formative evaluation to guide the development and implementation of the intervention in the local community.
- Involved a large community coalition that allowed for many perspectives to be heard and incorporated. The approach likely increased buy-in for the intervention. In addition, a youth advisory board of high school students likely contributed to “cool” appeal for tweens.
- Utilized community-based prevention marketing approach as the foundation and process was guided by expertise of faculty at USF/Florida PRC.
- Included promotional materials that were eye-catching and appealing in appearance, and that featured local youth (using feedback from a prior implementation).
- Attempted to recruit Latino community (e.g. soccer team) and provide materials in Spanish.
- Addressed accessibility issue by developing a partnership with local transportation board to allow the “scorecard” to serve as a free bus pass.

### Limitations

The reviewers identified a few potential limitations, including:

- The relationship between the national VERB campaign and the sustainability of the VERB Summer Scorecard. Can the VERB Summer Scorecard intervention exist without the national media campaign? This is an unanswered question, but it is believed that the real strength of the program is that the intervention is community-informed through a social marketing approach.
- Two measures of program success were noted: (1) process data on tween awareness of the program and numbers of scorecards completed and (2) positive differences in activity level between tweens who recalled VERB vs. those who did not. The increase in awareness and participation over time was impressive. However, the data do not allow for strong claims that the intervention increased tweens’ activity levels.
- The online aspect of the scorecard and calendar is fairly new and it is unknown just how this approach will affect implementation and impact.
- The program components (developing the coalition, getting vendors on board each year, securing prizes) are fundamental to the success of the VERB Summer Scorecard program. Therefore, institutionalization of this aspect would be an excellent goal; e.g. seeking buy-in and commitment from groups like community recreation to adopt the program into its scope of work.

- Limited participation by Latino/Hispanic children, though multiple efforts were included to address this. Interested communities should be aware that the role of the health department (a government entity) may be a potential threat to participation.
- The program is somewhat resource-intensive from both a financial and human capital perspective, which may be a concern with respect to sustainability. There was some evidence of leadership “fatigue” from initial implementation to 2007. Transition to an online format for the scorecard, calendar, and general information, in addition to a scaled-down version of the final celebration indicate that the work may be draining. However, institutionalization (see fourth bullet) could help.
- The program did not seem to optimize the peer-to-peer and parental social support components. More opportunities are available here.

### **Recommendation**

Based on strong formative data that guided its development and impact evaluation of youth physical activity behavior, the VERB Summer Scorecard program, as illustrated by the Kentucky model, appears to offer a model for increasing summer time physical activity participation in youths ages 9-13 years. Given this and its potential for public health impact, this intervention is recommended for dissemination through the Center of Excellence for Training and Research Translation.

It is important to note that VERB Summer Scorecard transitioned to an online format in 2007, and the evaluation data provided were for implementation prior to this transition. Additional data will be necessary to evaluate the effectiveness of the online format.

## INTERVENTION NAME

### INTENT OF THE INTERVENTION

(Name of intervention) \_\_\_\_\_ is designed to .... (insert intended outcomes) through... (insert level(s) of the socio-ecologic model: individual behavior change, interpersonal relationships, organizational policies or practices, community environments, social norms.)

### OVERVIEW

A very brief description of the intervention is provided with some basic information, including the intended population, the setting, and how long the intervention has been in the field.

### CORE ELEMENTS

This section outlines the aspects of an intervention that are central to its theory and logic and that are thought to be responsible for the intervention's effectiveness. Core elements are critical features of the intervention's intent and design and should be kept intact when the intervention is implemented or adapted.

- 1.
- 2.
- 3.

### RESOURCES REQUIRED

**Staff:** This includes an estimate of the number and types of staff necessary to implement the intervention.

**Materials:** This includes the essential tangible products needed to implement the intervention and approximate costs of these materials.

**Other Costs:** This includes other anticipated costs such as initial investment costs and maintenance costs, if available.

### IMPLEMENTATION

**How It Works:** Provides a succinct outline of the basic steps to implement the intervention. For many interventions, a more detailed implementation protocol is also available, and provides a more thorough description of the implementation process. This section also may describe the methods of delivery and the dose and intensity that have been found to be effective in prior tests of the intervention. This does not rule out the possibility that other methods, doses, and intensity may be effective.

**Keys to Success:** Includes insights from the intervention developer and early adopters on processes and practices that enhance or support the success of the intervention. Examples include staff training and support; stakeholder involvement, etc.

**Barriers to Implementation:** Includes insights from the intervention developer and early adopters on the primary barriers or challenges to implementation. Examples include recruitment and retention of participants; complexity of the intervention; stakeholder buy-in; up-front costs, etc.

## EVIDENCE REVIEW SUMMARY

**Underlying Theory:** This section includes the theoretical constructs and theories that informed the development of the intervention.

**Strategy(ies) Used:** This section includes the evidence-based strategies of the intervention.

**Research Findings or Evaluation Outcomes:** This section summarizes the results of the evidence reviewed.

## POTENTIAL PUBLIC HEALTH IMPACT

The potential public health impact of the intervention includes a description of the **reach** of the intervention into the intended population; the likely **effectiveness** of the intervention if implemented as intended; the ease of **adoption** of the intervention by other settings (states); and an overview of **implementation** and **maintenance** issues.

## INTERVENTION MATERIALS

Implementation and evaluation tools are described here. Intervention materials are provided by download or by link.

## TRAINING AND TECHNICAL ASSISTANCE

This section describes the training and technical assistance provided by the developer to help others implement the intervention.

## ADDITIONAL INFORMATION

**Web links:**

**Program Contact(s):**

**Related Resources:**

**Publications:**

*For more information on this intervention, visit [www.Center-TRT.org](http://www.Center-TRT.org).*