

# Guidance for Incorporating Health into Kent County's Comprehensive Plan

Prepared by Planning4Health Solutions, October 2017

## Acknowledgements

**Delaware Chapter of the  
American Planning Association**

[www.delawareapa.org](http://www.delawareapa.org)

**Delaware Academy of Medicine/  
Delaware Public Health Association**

[www.delamed.org](http://www.delamed.org)

**Delaware Coalition for Healthy  
Eating and Active Living (DE HEAL)**

[www.deheal.org](http://www.deheal.org)

**Planning4Health Solutions**

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**CRJA-IBI Group**

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# Table of Contents

<b>1 Overview .....</b>	<b>3</b>
Introduction - Plan4Health	3
Guidance Document Purpose	3
Planning and Public Health	4
Health Challenges	4
<b>2 Principles for Incorporating Health into Dover's Comprehensive Plan .....</b>	<b>5</b>
The Seven Core Principals	5
<b>3 Recommendations for Dover's Comprehensive Plan Update .....</b>	<b>7</b>
Summary of Recommendations	7
Population and Demographics	8
Land Use	8
Community Design	9
Community Facilities	13
Transportation	15
Economic Development	17
Housing	19
Agriculture	20
<b>Appendix .....</b>	<b>21</b>

## Figures

- 10** Figure 1. Felton East - Conceptual Master Plan
- 11** Figure 2. Felton East - Bird's Eye Perspective
- 11** Figure 3. Felton East - Bicycle Network Enlargement
- 12** Figure 4. South State Street Conceptual Master Plan
- 16** Figure 5. Heart of Delaware Trail - Proposed Bicycle Network

# 1 | Overview

## Introduction - Plan4Health

In 2016 the Delaware Chapter of the American Planning Association (APA) was awarded a Plan4Health grant to combat two determinants of chronic disease—lack of physical activity and access to nutritious foods. Their project, Delaware Plan4Health, brought together the Delaware Chapter of the APA and the Delaware Public Health Association (DPHA) to work with the Delaware Coalition for Healthy Eating and Active Living (DE HEAL) on integrating health equity into future planning efforts in the City of Dover and Kent County.

Delaware Plan4Health used surveying, geospatial analysis, document review and community charrettes to understand community health issues and how they may be addressed (see Appendix). Based on their findings, the Delaware Plan4Health team developed a series of recommendations for incorporating healthy living into Kent County's future comprehensive plan update. The comprehensive plan update is an opportunity to benefit public health by codifying elements into the plan that support healthy communities.

## Guidance Document Purpose

The purpose of this guidance document is to aid the Kent County Department of Planning Services in integrating health and equity concepts into the future comprehensive plan update. This document contains recommendations to strengthen the plan with regard to public health. It is hoped that the Planning Services Department, the Regional Planning Commission, the Levy Court and the public will consider these recommendations for the comprehensive plan update with the goal of impacting a healthier future.

### DE Plan4Health: Tools

**Resident Survey:** The Dover and Kent County resident survey captures self-reported information and perceptions regarding physical activity and eating patterns

**Geospatial Analyses:** The equity composite, retail food environment, park density and active transportation density maps summarize data from the U.S. Census Bureau, State of Delaware, the City of Dover, and Kent County. The maps illustrate priority areas in terms of: health equity; healthy food access; park and open space access; and active transportation networks, respectively.

**Scorecard - Plan Review:** The Scorecard summarizes an in-depth review of the City of Dover's Comprehensive Plan and the Kent County Comprehensive Plan, providing a measure of how well written plans integrate key modern public health concepts.

**Community Design Charrettes:** Charrettes are public/stakeholder engagement exercises that often involve visioning project designs and community plans. Kent County's charrette included community stakeholders, planners and members of the public in reviewing maps and data, identifying community priorities, and developing actionable strategies.

*See Appendix for information about these tools and their findings.*

## Planning and Public Health

Today there is a broad understanding that better planning for our neighborhoods and communities can positively influence many factors that affect people's health: land use patterns; air and water quality; urban design; transportation; and parks and recreational facilities to name a few. Given that comprehensive plans touch on so many aspects of a community, they offer a unique opportunity to holistically promote community health by proposing modifications to built and social environments. Specifically, comprehensive plans can be used to promote healthy eating and physical activity by encouraging development that provides residents opportunities to be physically active and have access to high quality, healthy foods in their neighborhoods.

## Health Challenges

Like so many other communities, obesity is a major challenge in Kent County. Kent County is the most obese county in Delaware, with one third of all adults in the county having obesity<sup>1</sup>. Being overweight or obese can lead to chronic diseases, including heart disease, diabetes, stroke, hypertension and some cancers. Kent County ranks last in terms of length of life, quality of life, health behaviors, and clinical care. Cancer and heart disease are the leading causes of death in those under 75 years of age<sup>2</sup>.

Physical inactivity and poor nutrition are risk factors for overweight/obesity, and chronic diseases. Physical inactivity is high (28%) and access to exercise opportunities is relatively low (69%) in Kent County<sup>1</sup>. And while food security and access to healthy food levels were on par with the state average<sup>1</sup>, our mapping indicates there are geographic disparities in terms of healthy food retail. Over half of all Census Tracts (13 of 20) in Kent County are considered food deserts by the U.S. Department of Agriculture<sup>3</sup>.

In terms of equity, Kent County ranks last in social and economic factors<sup>1</sup>. Median household income (\$56,000) is lower than the state average (\$61,000), and a relatively high proportion of children live in poverty (21%)<sup>1</sup>. Kent County is somewhat more diverse than Delaware overall, with over 24% of the population identifying as black<sup>3</sup>. Communities that are low income and communities of color may be at elevated risk for overweight/obesity and certain chronic diseases.

## Comprehensive Plans

Comprehensive plans are policy guides for a city or county's long-range development. They anticipate and respond to population change and other challenges by proposing strategies to meet transportation, utilities, land-use, housing, recreation, community facilities, and economic development goals.

<sup>1</sup> Source: County Health Rankings, 2017

<sup>2</sup> Source: CDC WONDER (primary), County Health Rankings, 2017 (secondary)

<sup>3</sup> Various data sources accessed through Community Commons



## The Seven Core Principles

1. Guided by health equity
2. Mobility for all modes of transportation
3. Recognize health value of park system
4. Community facilities to support health
5. Healthy food systems planning
6. Economic value of healthy communities
7. Compact, mixed-use, place-based land use

# 2 | Principles for Incorporating Health into Kent County's Comprehensive Plan

## Principle 1 - Health Equity | let health equity guide the planning process

- Use health data and mapping to evaluate community health needs and opportunities
- When drafting plan chapters, goals and policies, consider health data and maps, and policy systems and environmental change strategies

## Principle 2 - Transportation | promote all transportation modes and prioritize mobility

- Prioritize active transportation (walking, biking and transit)
- Planning for automobiles should not come at the expense of pedestrians, cyclists and transit

## Principle 3 - Parks and Recreation | let community health needs guide parks and recreation planning

- Evaluate the entire park system (not just individual park facilities), identifying “park deserts” and assessing adequacy of existing facilities
- Improve access to parks, particularly pedestrian and bicycle access
- Provide for programming and a range of recreational activities for all ages and abilities
- Promote passive recreation and trails in natural areas

## Principle 4 - Community Facilities | provide facilities that help keep people healthy

- Identify public and private sector facilities that contribute to healthy communities (e.g. libraries, schools, health care facilities)
- Explore opportunities to leverage these facilities and their associated programs/activities to improve health

## Principle 5 - Food Systems | promote a vibrant agricultural industry that focuses on rural and urban agriculture

- Strongly focus on maintaining a viable agricultural industry
- Promote urban agriculture and gardening in neighborhoods as a means to expand access to fresh, healthy food

**Principle 6 - Economic Development | emphasize strategies to alleviate poverty and improve employment opportunities while expanding healthy food retail**

- Evaluate opportunities to expand healthy food retail
- Build the business case for and support healthy food retailers
- Incorporate farmers markets, produce carts, mobile markets and other initiatives into an economic development strategy for healthy food retail
- Generally, emphasize strategies that alleviate poverty, and improve employment opportunities and quality of life, particularly for disadvantaged groups

**Principle 7 - Land Use | create compact, walkable, mixed-use, vibrant communities**

- Synergize transportation strategies with land use planning to promote walkable and bikable places
- Emphasize proximity and accessibility of parks and community facilities to neighborhoods
- Promote community gardening in neighborhoods
- Provide for a range of housing types and prices
- Encourage place-making and community cohesion, and create places people want to live, work and play

### 3 | Recommendations for Kent County's Comprehensive Plan Update

#### Population and Demographics

**Recommendation 1.** Include relevant health and demographic data and discussion of trends

#### Land Use

**Recommendation 2.** Encourage compact, mixed-use development

**Recommendation 3.** Let equity guide sub-area planning

#### Community Design

**Recommendation 4.** Leverage participation strategies to promote health and equity

**Recommendation 5.** Encourage community-centered design and complete communities

#### Community Facilities

**Recommendation 6.** Include health benefits of parks and recreation areas, and active transportation/recreation

**Recommendation 7.** Promote shared-use, temporary-use and adaptive reuse of properties for parks and community space

**Recommendation 8.** Support the establishment of a Local Food Hub

**Recommendation 9.** Leverage capital projects for health

**Recommendation 10.** Explore a Healthy Food Zone around schools and/or places populated by youth

#### Transportation

**Recommendation 11.** Create pedestrian and bicycle-friendly places

**Recommendation 12.** Improve pedestrian and bicycle connectivity between schools and points of interest

**Recommendation 13.** Support the expansion of facilities that encourage walking

**Recommendation 14.** Support the expansion and improvement of transit services

**Recommendation 15.** Explore new opportunities for greenways and trails

#### Economic Development

**Recommendation 16.** Collaborate across sectors

**Recommendation 17.** Promote inclusive workforce development programs, strategies and partnerships, especially for disadvantaged groups

**Recommendation 18.** Pursue economic development linked to active recreation

**Recommendation 19.** Pursue economic development linked to improved healthy food access

#### Housing

**Recommendation 20.** Emphasize the link between housing and health

#### Agriculture

**Recommendation 21.** Emphasize the link between agriculture and health

The following recommendations are organized by the chapter from the 2008 comprehensive plan for which they are most relevant. Recommendations provide example goals, actions and text (in italics) to include in the future comprehensive plan update, and other ideas for incorporating health principles.

## Population and Demographics

The Population and Demographics chapter identifies population trends and demographic characteristics of Kent County. The chapter update should include relevant health and demographic data and a discussion of trends.

### Recommendation 1 | Include relevant health and demographic data and discussion of trends

Below is sample language to integrate into the Population and Demographics chapter that describes health determinants, health equity and health disparities.

*Health status is influenced by a range of personal, social, economic and environmental factors. Built environment factors influence our ability to engage in healthy behaviors, like regular physical activity and healthy eating habits, as well as safety and economic opportunities where we live, work and play. To achieve health equity, the attainment of the highest level of health for all people, we must eliminate obstacles to health, particularly for groups with socioeconomic disadvantages. Using a lens of health equity, we can take a targeted approach to improving transportation, land use and other built environment factors that influence health.*

*When health outcomes differ by income, race/ethnicity and other social determinants, we observe health disparities. For example, we see health disparities in terms of race with African-Americans having a higher risk for developing Type 2 Diabetes. We also see health disparities by income with low-income families less likely to have access to healthy, affordable foods, thus increasing their risk for chronic conditions, such as obesity, diabetes, and hypertension. By identifying equity priority areas, planners and policy-makers can focus efforts in these areas to improve health outcomes.*

Gather up-to-date data for Kent County to describe community health characteristics. See example indicators.

## Land Use

The Land Use chapter delineates a Growth Zone, describes Kent County's agricultural character, and articulates a town-center focused development strategy. The chapter update should encourage compact, mixed-use development, and promote equity as an organizing principle of future sub-area plans.

### Recommendation 2 | Encourage compact, mixed-use development

Sample language for a new compact, mixed-use development goal is below.

**Compact, Mixed-Use Development:** *Explore opportunities to promote compact, mixed-use development patterns. Mixed-use development helps create complete neighborhoods and a compact, walkable urban form that encourages physical activity and cohesive, vibrant communities. Compact development: limits sprawl which undermines efforts improve transit and active transportation; and conserves vehicle miles traveled which benefits air quality. The following specific actions are recommended:*

- *As old subdivisions are expunged, promote new subdivisions and land developments in compact, mixed-use locations*
- *Encourage mixed-use developments around existing town/community centers*
- *Prioritize connectivity for bikes and pedestrians, especially between residential and commercial areas*
- *Reevaluate areas designated for sub-area plans to promote a more compact, mixed-use development pattern*

### Example Indicators for Kent County<sup>4</sup>

#### Healthy Food Access

22% - Low Food Access  
19% - Low Income/Low Food Access  
79% - Inadequate Fruit/Vegetable Consumption  
13% - Food Insecurity  
13 - Food desert Census Tracts  
55 per 100K - Fast Food Restaurants  
15 per 100K - Grocery Stores

#### Physical Activity

4% - Biking or Walking to Work  
27% - Physical Inactivity  
9 per 100K - Recreation/Fitness Facility Access

#### Health Outcomes

33% - Obesity (+37% Overweight)  
12% - Diabetes  
15% - Asthma  
15% - Poor or Fair General Health

#### Employment, Housing, Transportation, Etc.

5% - Unemployment  
34% - Substandard Housing  
34% - Housing Cost Burden: 30%  
3% - Public Transportation Use  
18% - Lack of Social or Emotional Support

<sup>4</sup> Various data sources accessed through Community Commons

### Recommendation 3 | Let equity guide sub-area planning

Sample language for a new goal to let equity guide sub-area planning is below.

**Equity in Sub-Area Plans:** Evaluate sub-area plans on the basis of spatial equity: that is how well public resources for health, like parks, grocery stores and pedestrian/bicycle facilities, are distributed across geographic areas. The following specific actions for future sub-area plans are recommended:

- Develop targeted strategies that promote health and equity
- Include an active living goal
- Inventory grocery stores, convenience stores, farmers markets, farm stands and other food retailers
- Identify opportunities for active recreation

## Community Design

The Community Design chapter aims to preserve and enhance Kent County's beauty, history and livability through strategies to: protect rural character, environmental features and historic places; and encourage development that is mixed-use, respects local character and creates a sense of place. With the plan update, it is recommended that this chapter emphasize public engagement and community-centered design.

### Recommendation 4 | Leverage participation strategies to promote health and equity

Public engagement activities commensurate with the comprehensive plan update should be leveraged to understand community health needs and opportunities, and future sub-area and community plans should encourage public engagement and community-centered design approaches.

Community design can better support health and equity by elevating the prominence of community engagement in planning and design processes. Community engagement can surface local health issues, priorities and implications of a development, and help developments maximize their potential to improve health equity. There are many ways to engage the public around topics of health and development in their communities, including facilitating design charrettes, interviewing key informants, conducting focus groups, and surveying residents. Health priorities identified through Delaware Plan4Health's engagement activities are given at right. See Appendix for example tools.

The design charrettes for Kent County conducted through Plan4Health indicate that residents desire more vibrant town and community centers, with coffee shops, parks and other destinations of interest. They would like to see safer pedestrian facilities, more bicycle facilities and improved access to transit. Renderings for the City of Felton (Pages 10-11) and south Dover (Page 12) were developed through the charrette process.

## Health Priorities

Residents who participated in Plan4Health suggested various strategies for improving physical activity levels and access to healthy foods. Participants were in favor of produce carts and healthy corner stores to improve access to affordable produce in residential neighborhoods, among other strategies to improve healthy food access. Participants were also in favor of improving pedestrian and bicycle facilities to support physical activity.

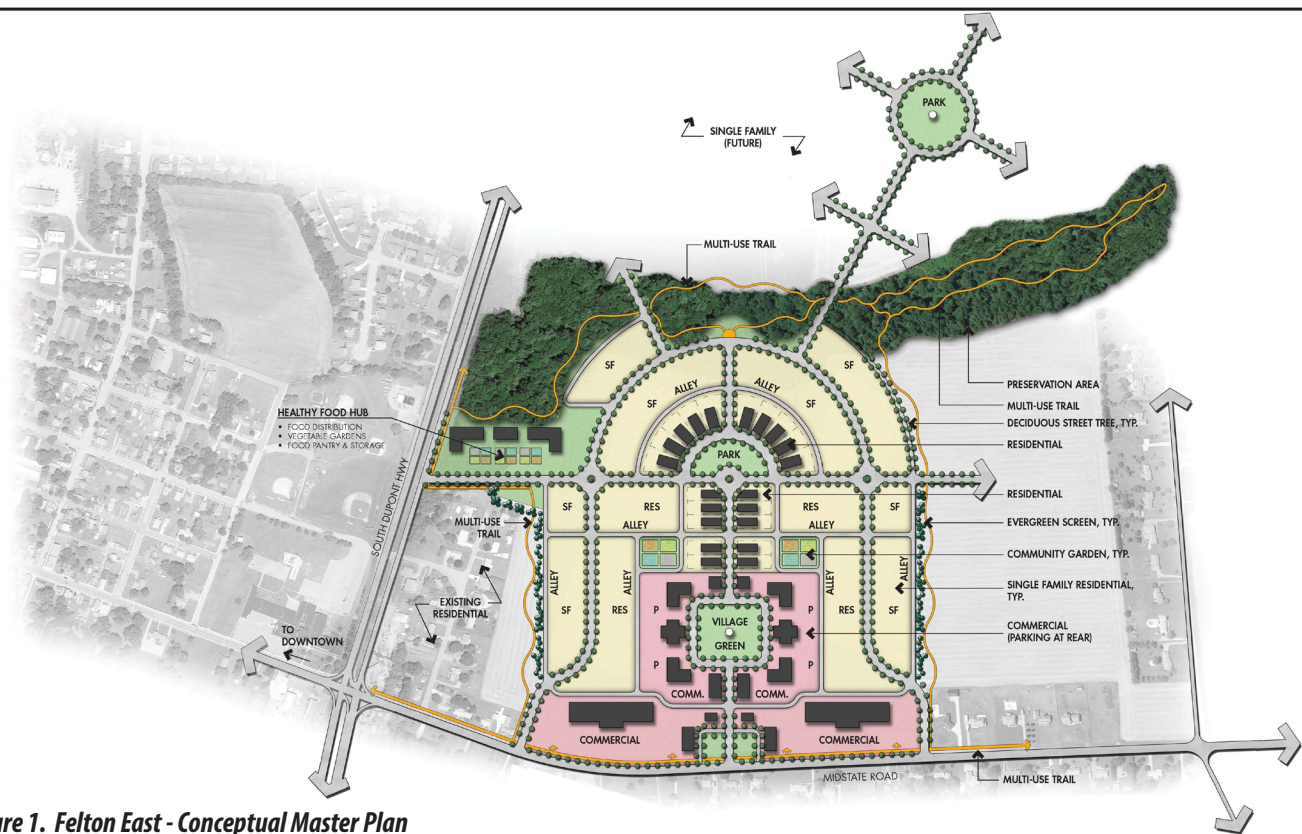
## Community-Centered Design Concepts

1. **Community-Engaged:** Community as part of the design process
2. **Advantageous Location:** New development sited near existing infrastructure/resources
3. **Open Space:** Creates community open spaces
4. **Active Transportation:** Fosters walking, biking and transit use
5. **Mixed-Use:** Building block of complete communities
6. **Sense of Place:** Creates unique, places with character
7. **Housing Mix:** Different housing types and pricing, for all ages and abilities
8. **Local Food:** Integrated food production and retail

### Suburban Subdivisions and Health

Suburban subdivision development can contribute to health inequities. New subdivisions are often sited away from existing schools, healthcare facilities and commercial centers, so residents may lack good access to these facilities and services. Subdivision development often occurs at the edges of urban areas which makes car ownership a necessity, and can undermine efforts to improve transit networks and increase ridership. Their locations may increase vehicle miles traveled which results in more air pollution, a public health hazard. Typical suburban subdivision design emphasizes culs-de-sac that restrict connectivity. Moreover, suburban development can be a symptom of "white flight"/flight of the middle class which has implications for school funding, urban disinvestment and other social ills. Compact, mixed-use development promotes: access to important resources for health, like grocery stores, healthcare facilities and schools; and walkable, well-connected neighborhoods.

# Felton East Conceptual Master Plan



**Figure 1. Felton East - Conceptual Master Plan**

FELTON EAST- Conceptual Master Plan  
Kent County, DE December 31, 2016

0 100' 200' 400' 1000'



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## Community-Centered Design Features

**Advantageous Location** Near existing town (Felton), schools and major transportation corridors

**Open Space** Includes multiple parks and a village public green, and delineates a preservation area

**Active Transportation** Provides a multi-use trail and bicycle network

**Local Food** Features multiple community gardens and a Healthy Food Hub with distribution, storage and food pantry facilities

**Mixed-Use** Plans for mixed residential and commercial uses





**Figure 2. Felton East - Bird's Eye Perspective**

FELTON EAST- *Bird's Eye Perspective*  
Kent County, DE December 31, 2016

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**Figure 3. Felton East - Bicycle Network Enlargement**

FELTON EAST- *Bicycle Network Enlargement*  
Kent County, DE December 31, 2016

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# South State Street Conceptual Master Plan



**Figure 4. South State Street - Conceptual Master Plan**

SOUTH STATE STREET- Conceptual Master Plan  
Kent County, DE  
December 31, 2016



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## Community-Centered Design Features

**Advantageous Location** Near schools, faith communities and major transportation corridors

**Open Space** Includes multiple parks, and delineates a preservation area

**Active Transportation** Provides a multi-use trail and bicycle network

**Local Food** Features multiple community gardens and a Healthy Food Hub with distribution, storage and food pantry facilities

**Mixed-Use** Plans for mixed residential and commercial uses



## Recommendation 5 | Encourage community-centered design and complete communities

In addition to elevating community engagement in planning and design, the updated Community Design chapter should emphasize community-centered design concepts that benefit community health, and development of complete communities. Sample language is given below.

**Complete Communities:** Complete communities are defined as those that can meet residents' daily needs within a short trip, providing good access for all to jobs, shopping, learning, healthcare, open space, recreation and other amenities. Complete communities prioritize all transportation modes, including for pedestrians, cyclists and transit-riders. In effort to create complete communities, the following specific actions are recommended:

- Review zoning and subdivision ordinances to identify barriers to designing and improving "complete community" designs
- Develop community-centered design guidelines for developers and the design review process
- Revise ordinances to promote complete communities<sup>5</sup>

## Community Facilities

The Community Services and Facilities chapter discusses the various public services and facilities of the County, including public safety, parks and recreation, as well as public education and healthcare. There are many connections between the discussed services and facilities, and health that could be better emphasized by expanding upon their health-promoting qualities in the chapter update, and identifying opportunities to achieve community health benefits.

## Recommendation 6 | Include health benefits of parks and recreation areas, and active transportation/recreation

Include the following language to describe the link between nature, parks and recreation, active transportation and health.

**Nature and Health:** Open space and outdoor recreation areas can improve physical and mental health by: providing opportunities for physical activity (e.g. walking, biking, sports) and community gatherings; reducing stress and depression; and improving cognition in adults and behavioral issues in children. Ensuring good access to outdoor recreation areas and their amenities will help maximize the potential public health benefit of the County's natural resources.

**Parks and Recreation and Health:** Parks and recreation facilities are important public health resources that confer certain physical and mental health benefits, and enhance wellbeing and quality of life. Parks provide opportunities for a spectrum of structured and unstructured physical activities for people of all ages, including trails; playground equipment; and sports facilities (e.g. fields, courts, pools). They are natural gathering places that promote community connectivity and cohesion. Greenspace helps mitigate air and water pollution, and reduce heat island effects which can impact public health. The following strategies are recommended for maximizing public health benefits of parks and recreation facilities:

- Develop a Parks and Recreation Master Plan, identifying "park deserts"
- Improve active transportation networks to parks, open space and natural areas
- Support programming for parks and recreation facilities for all ages and abilities
- Explore opportunities for new parks and trails, including through shared-use, adaptive reuse and/or transitional use zoning
- Support programming for parks and recreation facilities for all ages and abilities

**Active Transportation and Active Recreation:** Active transportation refers to walking, bicycling and transit use. Prioritizing these transportation modes enables residents to integrate physical activity into their daily lives.

<sup>5</sup> The subdivision ordinance could be revised in a way that mainstreams community-centered design. It could make standard single family subdivision a conditional use requiring extra hearings. Developers would be incentivized to build according to a set of "complete community" guidelines to avoid extra hearings, time and money.

*Increased levels of physical activity that result from active transportation help reduce/prevent overweight/obesity, Type II diabetes and other chronic diseases, and minimize healthcare costs. Similar health benefits are conferred through active recreation - walking, running, bicycling, kayaking, swimming, playing sports and other physical activities done for recreational purposes.*

## Brownfield Redevelopment

Brownfields are former industrial or commercial sites for which expansion, redevelopment or reuse may be complicated by real or perceived contamination. Brownfields are often vacant or underutilized properties and sources of blight in neighborhoods. Brownfield redevelopment programs take actions on designated brownfields to restore sites to productive uses. Brownfield redevelopment projects can be leveraged to increase park and community space permanently or temporarily, while remediating environmental contamination in urban communities. The U.S. Environmental Protection Agency provides resources for communities interested in pursuing brownfield redevelopment projects.

## Transitional Use Zoning

Transitional use zoning can support temporary use of vacant lots for parks, community gardens and other public spaces. Partnerships with nonprofit organizations or churches may facilitate this use of space.

## Recommendation 7 | Promote shared-use, temporary-use and adaptive reuse of properties for parks and community space

Include the following new goal to expand park and community space.

**New Parks, Pocket Parks, Community Space:** Explore opportunities to develop new temporary or permanent parks, pocket parks and community space through shared-use programs, redevelopment or adaptive reuse of vacant and underutilized properties, and transitional use zoning.

- Encourage policy development (e.g. transitional use zoning) that expands parks, community gardens
- Promote shared use of publicly-held properties (e.g. schools) with potential to provide needed community resources such as playgrounds, recreational facilities and community kitchens
- Support brownfield redevelopment programs and neighborhood cleanup programs
- Support Better Block programs<sup>6</sup>
- Found a Kent PARK(ing) Day<sup>7</sup>
- Pilot a pocket park program

## Recommendation 8 | Support the establishment of a Local Food Hub

Below is language for a new goal for a Local Food Hub.

**Local Food Hub:** Establish a local food hub with the mission to increase community access to local food. Food hubs link local producers with networks for distribution to local consumers. Hubs typically manage aggregation, distribution and marketing of food products. Both private and public-private partnership food hub models exist. Local food distribution hubs have the potential to source local produce for schools and other institutions, healthy corner stores, mobile markets, produce carts and local food retailers.

## Recommendation 9 | Leverage capital projects for health

Include the following new goal to maximize the potential health benefits of capital projects and investments.

**Maximize Health Benefits of Capital Projects and Investments:** Future investments and capital projects can be leveraged to promote health through the following:

- Prioritize projects that address gaps in community health resources, including parks and trails, and a food distribution hub
- Require or incentivize projects to incorporate design features that support public health, including pedestrian, bicycle and transit facilities, green infrastructure and community-accessible space

## Recommendation 10 | Explore a Healthy Food Zone around schools and/or places populated by youth

Below is language for a new Healthy Food Zone goal to include.

**Healthy Food Zones:** Explore opportunities to establish Healthy Food Zones near schools, community centers, parks and recreation facilities and other places populated by youth. Healthy Food Zones aim to create healthier food environments for youth by: restricting new fast food restaurants and convenience stores from locating near schools; and finding solutions to expand fresh produce and healthy food availability at/near schools.

- Evaluate policy options, such as ordinances and zoning code amendments, to restrict new fast food and convenience stores near schools
- Target healthy corner store and produce cart programs near schools
- Partner with schools on CSA and farmers markets program

<sup>6</sup>Better Block programs, commonly community-based initiatives, reimagine built environments as for people first. They typically use temporary installations to calm traffic and activate spaces in order to demonstrate the potential and build support to improve public spaces and build more vibrant neighborhoods.

<sup>7</sup>PARK(ing) Day is an annual global event that brings together diverse stakeholders from across a community to temporarily transform parking spaces into temporary public places with the mission to call attention to the need for more public open space.

## Transportation

The Transportation chapter describes elements of Kent County's transportation system, and emphasizes the need to create a County-wide system that is safe, supports economic development, emphasizes mobility, and meets public needs while reinforcing community character. The chapter update should elevate the prominence of walking, biking and transit use (i.e. active transportation) for commuting, recreation and other trips to promote physical activity and health equity.

### Recommendation 11 | Create pedestrian and bicycle-friendly places

The updated chapter should include the following goal to create pedestrian and bicycle-friendly places through environmental design and policy development.

**Create Pedestrian and Bicycle-Friendly Places:** *Create more pedestrian and bicycle-friendly places by: encouraging compact development and complete communities; improving bicycle and pedestrian networks; investing in bicycle and pedestrian infrastructure; and pushing for traffic revisions that enhance safety. The following specific actions are recommended:*

- *Implement land use strategies that promote compact, human-scale development (e.g. mixed-use zoning, parking requirements)*
- *Pursue traffic calming measures (e.g. lane reduction or narrowing, woonerfs, speed bumps) on principal arterials and other busy roads*
- *Evaluate reducing speed on major pedestrian and bicycle arterials*

### Recommendation 12 | Improve pedestrian and bicycle connectivity between neighborhoods and points of interest

Include the following new goal to improve pedestrian and bicycle connectivity to neighborhoods.

**Improve Pedestrian and Bicycle Connectivity:** *Improve pedestrian, bicycle and transit connectivity between neighborhoods and points of interest, like schools, neighborhood/commercial centers and healthcare facilities, particularly for transit-dependent groups, including seniors, youth and people with disabilities, and in unincorporated areas. The following specific actions are recommended:*

- *Use analyses of sidewalk and bicycle connectivity to prioritize actions*
- *Improve way-finding, and designate key walking/biking routes*
- *Support rural trail projects*

### Recommendation 13 | Support the expansion of facilities that encourage walking

Include the following new goal to improve pedestrian facilities throughout the County.

**Improve pedestrian facilities:** *Support the expansion of transportation facilities that make walking an attractive and accessible form of transportation for all, especially for children, elders and people with disabilities. The following specific actions to support the expansion of facilities that encourage walking are recommended:*

- *Install seating, benches and other street furniture*
- *Ensure adequate street lighting is provided*
- *Address gaps in sidewalk connectivity*
- *Support the maintenance of sidewalks*
- *Ensure ADA compliance for sidewalks and crosswalks*
- *Improve pedestrian crossings*



# Heart of Delaware Trail

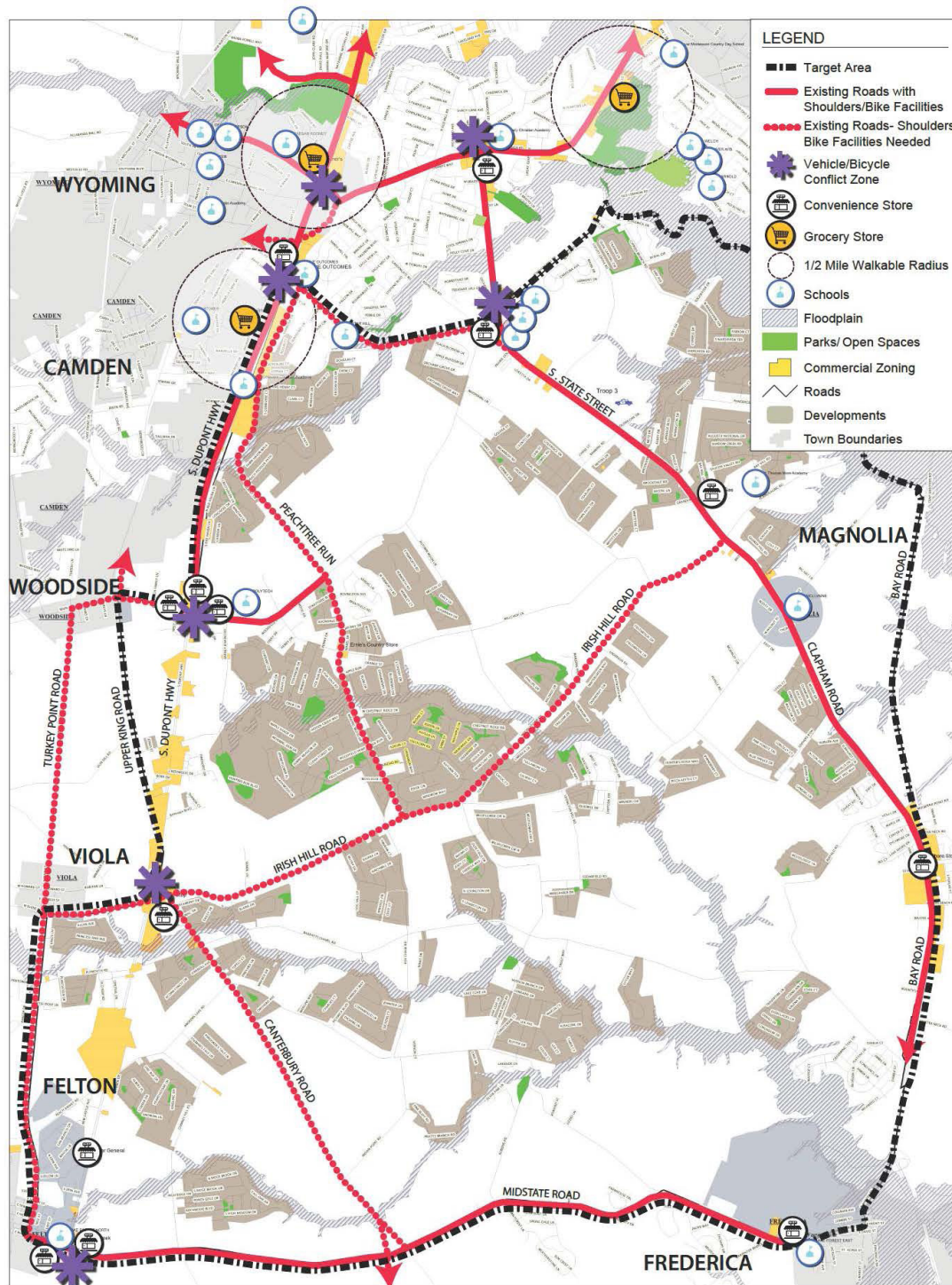


Figure 5. Heart of Delaware Trail

Heart of Delaware Trail- Proposed Bicycle Network  
Plan 4 Health Kent County, DE



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## Recommendation 14 | Support the expansion and improvement of transit services

Include the following new goal to expand and improve transit services.

**Expand and Improve Transit Service:** *In collaboration with DART, enhance transit connections between neighborhoods and employment centers, institutions, commercial areas, schools and recreational facilities- particularly neighborhoods with large transit-dependent populations such as retirement, nursing and group-living facilities and economically disadvantaged areas. Enhancing transit shelters and increasing stops increases mobility, improves the transit experience and makes transit use more appealing. The following specific actions to support the expansion and improvement of transit services are recommended:*

- *Support the addition of new transit stops*
- *Enhance existing transit stops with good pedestrian and bicycle facilities*
- *Build transit shelters that protect riders from inclement weather*
- *Advocate for more frequent and reliable transit service to attract and retain ridership*

## Recommendation 15 | Explore new opportunities for greenways and trails

Public engagement conducted through Delaware Plan4Health showed that there is strong support for greenway trail projects across rural areas of Kent County. There was support for the two previously proposed trails- the Clayton to Easton Rail Trail and the St. Jones Greenway, and also for the "Heart of Delaware Trail", a trail concept developed by residents during the Kent County Plan4Health charrette. The Heart of Delaware Trail (see Page 16) was envisioned as an economically feasible option<sup>8</sup>, with the potential increase connectivity for many suburban neighborhoods.

The below goal for new greenways and trails is recommended to maximize their potential public health benefits.

**Greenways and Trails:** *Greenways and trails are tremendous public health resources. They promote active recreation and active transportation, enhance connectivity for communities, and expose us to nature. The County should explore new opportunities for greenways and trails across Kent County, in collaboration with municipalities, local trail groups, public health and others. The following specific actions are recommended.*

- *Evaluate public health opportunities/considerations of Clayton to Easton Rail Trail and the St. Jones Greenway (i.e. health impact assessment)*
- *Take next steps in developing the Heart of Delaware Trail*

## Economic Development

The Economic Development chapter discusses Kent County's major economic drivers and key sectors. The chapter update should emphasize economic development strategies that promote equity. The chapter should highlight economic development that is linked to active transportation/recreation, and healthy food access.

## Recommendation 16 | Collaborate across sectors

Include the below text about economic wellbeing and health equity.

**Economic Opportunity and Health Equity:** *Our jobs and income are major determinants of health. For example, our jobs may determine if and what kind of health insurance we have, and thus the healthcare we can access. Our jobs determine the conditions under which we work, and the hazards to which we are exposed. Jobs determine our incomes - and if they are livable. Income influences where and the conditions under which we live. How far we are from our jobs, and how we commute and how long it takes. Our ability access to healthy foods, parks and other resources for health are tied to income and housing too.*

*Not all groups and communities have the same opportunities to access quality jobs and earning a livable income, resulting in health inequities and disparities. The County can seek to address some of these issues through the following specific actions.*

<sup>8</sup> Many of the roads suggested for the loop have wide shoulders that could be converted to marked bike lanes at relatively low cost.

- *Encouraging economic development that increases job opportunities for low income, communities of color, young adults, people with disabilities, ex-offenders, and others that face economic injustices and barriers to employment people*
- *Collaborate with government and civil society partners initiatives to develop a plan to address disparities in income and employment opportunities in Kent County*
- *Support the development of workforce housing, especially in mixed-use communities and gentrifying areas*
- *Promote the development of complete communities with access to jobs*
- *Support the expansion of transit to job centers*
- *Evaluate potential barriers and opportunities for support home-based businesses across Kent County*

## Produce Carts

Produce Carts are mobile units that sell fresh fruits and vegetables. The mobile unit model allows produce carts to easily locate in neighborhoods with low access to healthy food retail. Produce carts may be outfitted to accept EBT vouchers for customers with WIC or SNAP benefits. Produce cart programs provide new opportunities for entrepreneurship and jobs. Local governments can offer financial incentives for produce cart operators through subsidized or waived permit fees and other tools.

## Healthy Corner Stores

Healthy Corner Store initiatives seek to transform corner stores and small food retailers into healthy corner stores that increase access to healthy, affordable food, especially in communities not well served by grocery stores, and other healthy food retailers. Local governments can stimulate healthy corner store development by: launching recognition programs; providing financial incentives like fee waivers or tax credits to recognized participants; marketing for recognized participants; providing technical assistance, including perishable inventorying, nutrition education and business management; and sharing investments with would-be participants to upgrade store interiors and equipment.

## Urban Agriculture Networks

School gardens, community gardens, urban farms and small-scale agriculture projects can provide fresh produce to local food pantries, schools and other institutions, and food distribution hubs, mobile markets, produce carts and local food retailers. Coordinated approaches to link local producers with community consumers are termed Comprehensive Garden/Urban Agriculture Networks. To expand productive lands, local governments can temporarily or permanently transition suitable vacant and underutilized lots into community gardens or urban agriculture projects.

## Recommendation 17 | Promote inclusive workforce development programs, strategies and partnerships, especially for disadvantaged groups

Include the below goal to promote inclusive workforce development initiatives.

**Inclusive Workforce Development:** *Support the development of workforce development programs, strategies and partnerships that increase employment opportunities for low income, communities of color, young adults, people with disabilities, ex-offenders, and others that face economic injustices and barriers to employment. The following specific actions are recommended.*

- *Collaborate on workforce development programs for low income, communities of color, young adult, people with disabilities, ex-offenders and other priority groups*
- *Prioritize contracting with women and minority-owned businesses*
- *Evaluate and promote strategies (e.g. tax incentives, technical assistance, marketing assistance) that encourage local employers to utilize apprenticeship and other job training programs for targeted industries (e.g. agriculture) and job-seeker groups (e.g. ex-offenders, older adults, youth from disadvantaged backgrounds)*

## Recommendation 18 | Pursue economic development linked to active recreation

Include the following new goal to promote business entrepreneurship linked with active transportation/recreation.

**Business Entrepreneurship and Active Recreation:** *Promote business entrepreneurship linked with Kent County's trails, parks, natural areas and other active recreation resources. Entrepreneurship may take many forms, including retail, tour operators, concessions, and maintenance services. The following specific actions are recommended.*

- *Contract with local businesses to provide services, such as maintenance, concessions services and equipment rentals, to County-owned park and recreation facilities*
- *Identify opportunities to use parks and trails as catalysts for economic development, such as mixed use development and other zoning changes near key parks*
- *Evaluate and promote economic development strategies (e.g. fee waivers, technical assistance, marketing assistance) linked to active transportation/recreation (e.g. tour operators, retail)*



## Recommendation 19 | Pursue economic development linked to improved healthy food access

Include the below new goal to encourage new ventures that expand healthy food options.

**Expand Healthy Food Access:** Encourage new ventures that expand healthy food options across Kent County, including CSAs<sup>6</sup>, corner markets, produce carts, food hubs, farm stands and farmers markets. And support existing grocery stores and other food retailers in expanding healthy food availability through distribution chain development, technical assistance, marketing and incentives. The following specific actions are recommended.

- Identify priority areas for which healthy food is least accessible
- Create financial incentives (e.g. permit fee waivers) for healthy food operators to locate in priority areas
- Support farmers markets programs, and seek to expand them in priority areas
- Support the development of City or County-sponsored produce cart programs
- Advocate for the development of a local food hub
- Support the development of City or County-sponsored healthy corner store programs

## Housing

The Housing chapter describes Kent County's housing stock, and projected housing needs. The chapter update should describe the link between housing and health, and recommend specific actions that further address health equity.

## Recommendation 20 | Emphasize the link between housing and health

Include the below text that describes links between housing and health, and suggests specific strategies for the County to employ:

**Housing and Health:** Factors related to housing have significant impacts on health. The links between housing and health fall into three broad categories: the physical conditions of our homes; the conditions of the neighborhoods surrounding our home; and affordability and other economic dimensions of housing. For instance, housing in disrepair can present a range of physical safety hazards, from shoddy wiring that is a fire hazard, to leaks that create damp conditions and lead to mold growth. The materials from which our homes are constructed can also present health hazards, including Asbestos and lead paint. The neighborhoods we live in determine our access to resources that support health and opportunity like grocery stores, community gardens, healthcare facilities, recreation facilities, employment centers and schools. Neighborhoods influence our safety and perception of safety. The amount we spend on housing; if we are able to access financing for home loans and rental assistance; and issues that affect renters, like cause/no cause evictions and discriminatory leasing practices determine where we live, if we experience housing insecurity or homelessness and our economic and financial wellbeing. The following specific actions are recommended to promote healthy housing for all.

- Collaborate with public health agencies, housing authorities, advocacy groups and others on matters concerning housing and health
- Emphasize multi-modal connectivity between residential areas, healthcare services, schools and commercial centers through: compact, mixed-use development, complete neighborhood development; healthcare sector development;
- Use Crime Prevention Through Environmental Design (CPTED) strategies to improve public safety and security in residential areas
- Promote community gardening initiatives such as: revising zoning ordinances to allow community gardens in all neighborhoods; developing a grant program for new school and community gardens, especially in neighborhoods with poor access to fresh produce.

## Planning for an Aging Population

Age-friendly communities are those that are livable for people of all ages and abilities. As populations age their needs in terms of transportation, housing, public spaces and other domains change. Communities can undertake age-friendly planning initiatives that: enable older adults to participate in the planning process; highlight the values, vision and needs of elders in the community; and develop community action plans for improving livability. Kent County's population is aging, and communities within Kent County would benefit from age-friendly planning. Resources are available from American Association of Retired Persons (AARP) and the APA.

Housing is a significant challenge as communities prepare for aging populations. A growing aging population means more demand for retirement communities, assisted living, independent living, and other levels of care. There may be more demand for apartments, granny flats, and other flexible housing options too given that many older adults are choosing to downsize to smaller, less expensive, less maintenance intensive-housing close to services, and many others are creating new multi-generational households. Increasingly, people are also choosing to "age in place" or stay in their homes as they age. Aging in place may require homes to be adapted for wheelchair accessibility and for those with other mobility constraints.

## Agriculture

The Agriculture chapter describes Kent County's agricultural heritage and continued significance to the County's economy. The updated chapter should emphasize its public health benefits in terms of jobs/economy, and source of healthy food.

### Recommendation 21 | **Emphasize the link between agriculture and health**

The below text that describes the link between agriculture and health, and recommends actions for the County, should be included.

**Agriculture and Health:** *Agriculture plays a role in community health in two important ways: as a key player in Kent County's economy (jobs, sector importance/impact); and as a key supplier of fresh, healthy produce and other products. The following specific actions are recommended with the aims of strengthening the local agricultural economy and expanding healthy food access:*

- *Support development of a local food hub that links local agricultural producers with distribution chains*
- *Support healthy corner store, produce cart and other programs that expand local healthy food availability*
- *Support initiatives to preserve farmland, and enhance existing programs, such as the TDR<sup>9</sup>*
- *Advocate for municipalities to develop urban agriculture networks*

<sup>9</sup>Transfer of Development Rights is a mechanism that can be used to permanently protect farmland and other cultural resources. TDR enables landowners to sell development rights for their land to another party who can use the rights to increase the density of a development elsewhere. The current TDR program can be enhanced to protect farmland and target growth.



# Appendix

## Background

Despite much county-wide data, the Delaware Plan4Health Team desired more targeted data within the county. While there have been various community surveys conducted in this community, the purpose of this survey was to capture specific healthy eating and active living data and identify potential inequities. Results from this survey will help identify priority areas and population groups for policy change and targeted interventions to improve health and equity.

The Delaware Plan4Health Team requested the services of the National Research Center to administer a community survey to residents of Kent County. The National Research Center (NRC) works with nonprofit organization and government agencies in providing research and evaluation services, including survey research. NRC focuses on survey design and analysis, needs assessments, and program evaluation. Their experience and specialty in survey research includes transportation, community health, parks and recreation, human services, and environmental issues.

Through coordination with the Delaware Plan4Health Team, NRC was commissioned to create and conduct a survey to assess the following:

- Health status
- Behaviors related to health eating
- Behaviors related to physical activity and active living
- Perception of the built environment supporting healthy living
- Access to parks and grocery stores
- Barriers related to healthy eating and active living

The 10-to 15-minute phone survey was designed by identifying questions from existing, validated surveys in the literature. Due to the growing trend of cell phones replacing home-based landlines, more than 50% of interviews came from cell phones of residents living in Kent County. As a result, survey administrators began the survey with the qualifying question of determining the callers place of residence.

A total of 500 completed interviews were required for this project, with quotas for race/ethnicity, sex and age by area within Kent County. The first area was the parts of the County within zip codes 19901, 19904, 19952 and 19963. This area was considered to be at higher health risk, based on preliminary equity analysis, and where the grant efforts will be focused. The second area was the rest of the County. With this many quota cells, a flexible approach was taken to filling these quotas.

## Key Findings of Survey Results

### *Health Status*

- Across the entire sample, the majority of respondents stated their health status was very good/excellent. With regards to race, both Non-Hispanic Whites and Blacks stated to have excellent/very good health. However, there was a disparity as it relates to income level such that respondents participating in WIC/SNAP were more likely to state their health as fair/poor.
- Body Mass Index (BMI) was calculated by the respondent's self-reported height and weight. Overall, 32.2% reported to be overweight (BMI=25-29.9), 31.8% reported to be obese (BMI=30-39.9), and 9.3% reported to be morbidly obese (BMI>40).
- Respondents who reported being food insecure, lower income (householder income <\$15,000) and participate in WIC/SNAP, were more likely to be morbidly obese (26%, 18.6%, and 17.2%, respectively).
- In terms of race, non-Hispanic Blacks were more likely to be overweight and obese than non-Hispanic White (76.6% and 73.7%, respectively). For just obesity, the rates for non-Hispanic Blacks and non-Hispanic Whites were 40.4% and 42.9%, respectively.
- According to the Behavioral Risk Factor Surveillance System (BRFSS), Delaware's adult obesity was 29%. These survey findings report higher rate of adult obesity at 41.1%

### *Healthy Eating/Access to Healthy Foods*

- Overall, regardless of demographics, respondents reported not eating the recommended amount of fruits and vegetables each day. Median servings of fruits and vegetables consumed each day was one each.
- As it related to income, average number of vegetables consumed was higher among respondents with higher incomes (>\$65,000). In terms of race, 18.4% of Black respondents averaged eating less than 1 vegetable serving a day, compared to 6.7% of Non-Hispanic Whites.
- A lack of access to healthy food has been linked to increased risk of obesity. Overall, most respondents travel at least 3 miles to get to their food stores with the exception of respondents in ZIP code 19901.
- Most respondents reported using the car/drive to get the food store. However, respondents participating in WIC/SNAP are more likely to use transit/take the bus compared to those who do not participate in WIC/SNAP (9.7% and 0.4%, respectively).
- In terms of food security (having enough to eat), non-Hispanic Blacks were more likely to report being food insecure compared to non-Hispanic Whites (15.2% and 5.0%, respectively). Similarly, those reported participating in WIC/SNAP were more likely to report being food insecure compared to those who do not participate (14.9% and 5.5%, respectively).
- Respondents who reported being food insecure reported they would not likely go to a farmers' market if there was one available compared to those who reported food secure (45.6% and 17.6%, respectively).

### *Physical Activity/Active Living*

- About 70% of respondents reported doing some kind of physical activity (such as walking, exercise, biking, etc.). However, physical activity participation increased with increased income. About 57.2% of respondents with income less than \$15,000

participated in some kind of physical activity compared to 82.6% of those with income greater than \$75,000.

- Respondents living in Dover ZIP codes were more likely to have a park or recreational facility within walking distance compared to rest of Kent County. However, A majority of respondents reported travelling more than 3 miles to reach the nearest park.
- In terms of race, 68.2% Blacks were able to walk, jog or ride a bike to ANY park, outdoor recreation areas, walking paths or bike paths that are near where live compared to 50.4% non-Hispanic Whites.
- About 51.7% respondents reported participating in WIC/SNAP reported being within a 5-minute walk from a park or walking trail compared to 36.3% who do not participate in WIC/SNAP.
- Only 61.0% of respondents with household incomes less than \$15,000 strongly or somewhat agreed to feeling safe from crime if walking in their neighborhoods compared to 91.5% and 95.1% of households with incomes \$60,000-\$74,999 and more than \$75,000, respectively.
- As income increased, the ability to walk to destinations (e.g. restaurants, grocery stores, schools, retail, service, automobile, employment, government, civic organizations, entertainment, religious, and health services) decreased. In addition, perception of sidewalks conditions (e.g. a lot of cracks, lifted sections, tree or bush overgrowth or other problems that make it difficult to walk on them) declined with declining income.
- Respondents living in ZIP codes 19901, 19904 and 19977 were more likely to report having sidewalks in their neighborhoods compared to rest of Kent County. Parks were too far away to participate in physical activity or exercise.
- Respondents living in ZIP codes 19901 and 19977 were more likely to strongly agree with the statement, "It is easy to walk to a bus stop from my home" than the rest of Kent County.

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## Introduction

The effort compile this chapter consisted of an in-depth review of the City of Dover's Comprehensive Plan and the Kent County Comprehensive Plan through the lens of the *Healthy Living and Active Design: A Scorecard for Comprehensive Planning*. The scorecard was developed through Nemours Children's Health System and Cedar Creek Sustainable Planning Services.

The Scorecard represents a comprehensive evaluation of various health elements of Comprehensive Plans in an attempt to better measure how such plans incorporate key modern public health issues and needs. The Scorecard also exhibits desires for communities to make the critical linkage between planning and implementation. One critique of the planning profession over the past few decades has been limited ties between the goals and objectives of a comprehensive, or other subject area plan, and the timeline and partners needed for implementation. Given the current re-emphasis on linking health and planning, these links to implementation become vital in measuring the ultimate success of a planning effort.

## An Overview of Scorecard Applicability

The goal of any plan should be to make it comprehensive to the subject matter for which it is undertaken. Anyone who has worked through a Comprehensive Planning effort has probably realized that it is nearly impossible to accomplish everything you set out to do. This is important when trying to view plans strictly through the lens of how it addresses a multitude of ever-evolving public health needs.

For a Comprehensive or Land Use Plan, particularly in a state like Delaware that mandates certain elements be addressed, the ability to be truly "comprehensive" is limited by factors such as:

- **Budget for the plan:** This impacts how comprehensive and in-depth the plan can be. Smaller communities, especially when under state law orders to develop a plan, are sometimes left to simply meet the minimum requirements due to a variety of good, economic reasons. Larger communities or counties may be able to invest more resources. These factors greatly impact the breadth, depth, and overall content of a plan.
- **Timeline for the plan:** Depending on development pressures, political change or other external influences, the timeline for developing a plan can vary greatly. If under pressure to develop a full plan in 6 months to a year, the community may not be able to mobilize all necessary resources to have a fully comprehensive plan.
- **Resources (staff and/or consultant) available to develop the plan:** Related to the budget, the resources from a time commitment perspective to develop a plan is another limiting factor to its comprehensiveness. If municipal planning staff are tasked with developing the plan in-house, their time commitments are oftentimes fragmented among other day-to-day planning duties. If consultants are hired for a plan there can be more focus given, but review times, budget and schedule are dictated by municipal staff.
- **Urgency and meaning of the plan:** Plans that are developed in response to a pressing issue (e.g. a major mixed use development that the public feels impacts the look and feel of a neighborhood), legislative changes, or political desires can impact what a plan means to a community when it is complete. If the planning effort is viewed as an exercise in going through the motion, it is likely to be less meaningful in the long-term.

- **Who was involved?:** A key endeavor of any planning process should be to engage a broad range of stakeholders, from business to residents to public agencies and others. It doesn't always turn out that way. What is the health department official asked to be on the committee had other commitments or could not participate as much as originally anticipated? This could impact the results of the plan.

Taking the factors into account when applying any scorecard or evaluation methodology is important. For purposes of this evaluation, no background information was known so a more objective analysis of the two plans could occur.

### General Themes

The two plans were adopted in 2008, which was in a time period when health was just emerging as a more important modern-day influence on planning. It is important to understand that a retrospective evaluation be mindful of this time period, just as if we were evaluating a Comprehensive Plan from 1960 that projected that highway funding and capacity would be ample enough to accommodate all the growth in the plan. This is why planners work methodically to update plans as growth trends change and there is a greater understanding of planning influences.

With that, the Dover and Kent County Comprehensive Plans are strongest in the areas that dominated the planning lexicon nearly a decade ago. Air quality issues, mixed use development, and emerging trends in active transportation were more prevalent a decade ago than discussions on community gardens, farmland preservation from a food security standpoint, and more nuanced understanding of the impact of built environment decisions on many facets of community and personal health. Where they are mentioned, the plans generally do not include the type of direct linkage to long-term health incomes that we ultimately desire. Working with stakeholder, particularly the health profession, can strengthen those elements further.

**Dover Comprehensive Plan.** Dover's plan was written nearly 10 years ago. With this in mind, "public health" as a guiding principal was very much an emerging topic. This plan reflects that and the scores achieved using the scorecard underscore the just how rapid public health has entered the discussion. There are many strong tenets within the body of the plan though it lacks measurable goals and objectives in the body.

Many chapters include dedicated subsections that address the goals and action steps stated. This subsection is one that helps readers to understand the general approach to how the City intends to follow through in implementation. Though in many cases they are very specific to agency or implementation mechanism, they are light in content with regard to targeted populations, cohorts, or temporal reference.

The dedicated implementation section within the Dover plan is strong in that it identifies, in a succinct way, many steps to be taken by the City. The section is only a few pages, but demonstrates a significant commitment to completing objectives identified in the plan and within a relatively short time from the date of adoption. The section could be strengthened with metrics associated with the stated goals. As an example, the plan talks about the need to expand the trail system and does so through ongoing efforts. One of the ongoing efforts is a Bike and Pedestrian Plan. However, in a general plan it is appropriate to state a goal such as: "expand the system by XX miles in the \_\_\_\_ part of Dover by the

Year 20\_\_.” Such measurable goals may be found in other documents but could in a general sense be stated in the City’s Comprehensive Plan.

[Kent County Comprehensive Plan](#). The Kent County Comprehensive Plan was also written nearly a decade ago. This plan is a user-friendly document in the many charts, graphics, maps, photos, and explanatory elements are included. Particularly well done is the section describing Transfer of Development Rights. This topic is often misunderstood by the public, but the County did a great job of making the term relatable and understandable.

Additionally, the “Policy emphasis” and “Specific recommendations” subsections are succinct targeted and directly related to the goals. However, many of the recommendations come without specific responsibility or any reference of time to complete the suggested task. The County is very committed to preserving lands, specifically for agriculture and open space. The plan has significant language on walkable, active and vibrant communities but also gives direction on how such an environment is achieved.

The implementation chapter can be improved by identifying those partners tasked with implementing specific actions. The targets could be not only time to complete, but also target populations, cohorts or even cities within the county.

One area to improve with the next iteration is the transportation element. For all that the plan states regarding a desire to reduce single occupancy vehicle trip, reduce pollution, and to change the land use pattern into a more walkable environment, the transportation chapter is very auto centric and reflects a focus on level of service that dictates a response of widening or preserving wider roads and reducing peak hour congestion instead of finding healthier alternatives.

[Scorecard](#). The overall topic spectrum and specific examples and languages that should be considered when scoring a plan are thorough. The scorecard runs the gamut of all things health, beyond healthcare and physical activity. Areas such as pollution, crime, spiritual health, economic security are suggested in many elements of the Scorecard, which is important for those who use the plan to understand the many dimensions of health.

Again, the Scorecard is thorough and well crafted. If the hope is to get planners and other to understand details and necessary policy statements, objectives, and recommendations that are instrumental in fostering improved community health, this nails it.

The tool is new, therefore unless the plan being scored is newer it likely won’t score very well due to the growth in recognition that health is a critical theme to be included. As time moves forward, more plans should do better.

Testing the Scorecard through the Plan 4 Health revealed the following:

- The plans scored best in Section C: Active Design. This is expected from a Comprehensive Plan that is geared toward policies related to the built environment.
- Overall, the two plans were lacking in content related to Section A: Overall plan, vision, and strategy related to health. This is likely a result of the time period in which they were developed, as health was not as much of a topic at that time.

- The lower scores in Section A reflects a possible point of emphasis in future plans to improve this element. It would stand to reason that better incorporation of health themes in the overall plan, vision and strategies would lead to higher scores in the other sections, as well as in the implementation element.
- The low score in Section D: Implementing a Plan of Action is also an indicator of the time period in which it was developed. This is also an important point of emphasis to not only strengthen, but better engage the health professionals in a community to work with planners to better identify and understand implementation actions that address health. Since it is a new concept, the implementation steps might not be as obvious as other planning programs, projects, or policies.

### Comprehensive Plan Measure Scores

Measure	Dover Score	Kent Co. Score
Section A – Comprehensiveness	1	0
Section A – Strength	1	0
Section B – Comprehensiveness	7	9
Section B – Strength	11	14
Section C – Comprehensiveness	10	13
Section C – Strength	10	22
<b>Total – Comprehensiveness</b>	<b>18</b>	<b>22</b>
<b>Total – Strength (out of 100 possible)</b>	<b>25</b>	<b>36</b>

### Implementation Plan Measure Scores

Measure	Dover Score	Kent Co. Score
Section D – Implementing a Plan of Action	1	1
Section E – Healthy Living	5	8
Section F – Active Design	1	9
<b>Total (out of 29)</b>	<b>7</b>	<b>18</b>

### Next Steps / Recommendations

After the review of these plans, the consultant team undertaking the review made the following general observations that can be considered in future efforts to improve the applicability of the tool:

- **Use it for scoping a plan:** Using the tool in a retrospective manner can be a great springboard for better incorporation of key health themes into future comprehensive plan. A suggested way to do this is to utilize the tool to assess a current plan just before a new plan is adopted. This will help identify gaps and linkages to current planning themes and help planners, consultants and health professionals better understand what they can address as a new plan is developed. The scorecard result can help identify gaps or points of emphasis for a new plan.



- **Make adjustments for context:** The parallel review of Dover and Kent County reveals that different jurisdictions will examine certain issues while not addressing others. The types of growth, growth pressures, and land use policies evaluated by a city and a county differ greatly. It would not be a common expectation to have a city address farmland preservation just as it might not be as likely for a county to address community gardens in unincorporated areas. A county may not address active transportation or transit in the same way that a city might. Similarly, large cities and small towns will differ in how they address these themes as the scale and context of the community varies greatly.
- **Find a way to reward brevity:** Plans that have dozens, or even hundreds, of goals and objectives, can sometimes create conflict when a planning board is making a decision and trying to determine if it is “consistent” with the comprehensive plan. With a plan filled with many goals it is easy to find conflict or simply say that a development is supported because of these sometimes conflicting goals. Also, planning is becoming a more visual process in an age where technology is changing rapidly and fewer and fewer stakeholders want to pore through a 150-page document. With this trend, it becomes more and more difficult to address all comprehensive planning themes as well as expectations contained in a comprehensive scorecard. If applied literally to a succinct, yet very useful plan, the Scorecard could yield a low score simply because a method was chosen to prioritize big picture planning needs or make the topics more illustrative. The thoroughness could eventually prompt those drafting such plans to write plans that are either redundant or contain too much information which could lead to the Comprehensive Plans being longer than necessary.
- **Provide suggested methods for incorporating health themes:** The Scorecard is comprehensive, which is great, but planners should be cautious so that the Scorecard does not seem intimidating to small communities or those with limited resources and time. The great opportunity in this lies with the interest in health. Encouraging a health-specific focus group or steering committee for a plan can help by explicitly tasking that group with the responsibility to develop health themes. This would help bolster the implementation score.
- **Account for different methods of planning:** The common comprehensive planning approach is to address growth and development through a variety of subject areas. Health is one theme that is comprehensive enough to warrant an examination through the lens of all of the other common planning themes. So, there are two different ways to address it: 1) An independent health chapter or section of the plan that resembles other subject area elements of the plan; or 2) A health component that includes health-specific goals, objectives and implementation measures, along with a feedback loop that examines the likely health impacts of the goals, objectives and implementation measures identified through the other thematic chapters.
- **Incorporating tenets of HIA as a planning method:** As this section acknowledges, it is nearly impossible for a community to do a truly comprehensive plan. That does not mean, however, that we have to simply leave a plan without a set of evaluation components or next steps. Adding a Self Evaluation section to allow communities to better understand how the process unfolded could yield better results. A key element of Health Impact Assessment is an evaluation step that evaluation the HIA process itself and identifies the challenges and opportunities that

may not have been fully addressed in the plan. It's ok to say "We didn't address all the health themes because of a limited budget and if we had more funds, we could address them." This would help communities acknowledge the limitation and reduce the intimidation factor of the tool if a community felt they received a "low" score. This Self Evaluation could identify, for instance, that a health department representative was not able to make the meetings, which impacted the results of the plan. It might also identify a stakeholder group that was underrepresented in the plan.

- **Determine how well the subject matter makes the link to health:** Planning concepts identified in a plan can be strengthened from a health perspective in how well the plan acknowledges the likely health impacts of a goal or action step. Making the connection between a planning action and health helps bolster the case for the concept for public officials, developers, citizens, businesses and others. It may be generally acknowledged that outcomes such as walkability are inherently healthy, but making a stronger case for them in a plan can help lessen the likelihood that a waiver of policy is allowed (e.g. claiming the building of a sidewalk fronting a development is a hardship). A bonus point could be added to those elements that more explicitly make this link.
- **Work to develop a "What it means" section:** Testing several plans developed in a common timeframe (e.g. 2008-2012) would allow better comparison to understand what differentiates a strong plan from others. In terms of the overall "strength" score, Dover received a 25 and Kent County received a 36 out of a maximum total score of 100 available points. When there are 100 point scales, people tend to view them as they view grades in schools. If a student brought home a score of 25 or 36 out of 100 on a test it would likely result in a negative response from a parent. Does a score like this mean that both plans are substandard? Absolutely not! They are good comprehensive plans that illustrate a positive trend toward addressing health issues. A test of several plans could produce a range of scores to determine if, for instance, the highest ranked plan scored a 50 then that is the barometer by which others are measured instead of measuring it against a maximum 100 points available.
- **Continue to strengthen the Implementation Section:** The State of Delaware requiring an Implementation chapter is a great planning tool. The Scorecard could have clearer direction on whether the Implementation chapter is to be scored separate from determining the direct linkage with the plan, or if the implementation steps identified throughout the document are to be scored in the separate scoring area in the tool.

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
<b>A. Overall</b>					
P-1	0	There is one brief mention of the Built Environment and it is specific to ozone levels. Otherwise it gives no measure, goals, or other specific relationship to the built environment other than a obligatory reference to travel choice.	2	Built environment language exists but does not explicitly mention this relationship.	
P-2	0	One sentence in the document refers to working with the State Public Health Department, though it isn't specific on what, how, under what topics and conditions or the intent.	0	Public health is recognized as a benefit from park and open spaces, but the input and collaboration piece doesn't exist.	
P-3	0		0	Health as a topic is mentioned several times, but the specific inequity language is not mentioned. There is a brief section on affordable housing, but it doesn't go into the vulnerable population realm.	
P-4	0		0		
P-5	0		0		
P-6	1		0		
<b>B. Healthy Living</b>					
P-7	1	The plan does mention reducing VMT for the sake of Greenhouse Gas emissions, with a brief tie to public health, specifically	2	The plan has significant language about reducing the need for single occupancy vehicle trips and building communities that	

## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
		repository ailments. However, the plan also includes numerous proposed studies and plans for new non-existent routes which could also increase VMT.		foster walk, bicycling etc. for an overall improved design and land use interaction.	
P-8	2	Plan has significant language about the desire to increase walking and bicycling participation rates. The Plan also has specific direction about the update of the Bike/Ped Plan and the creation of an Advisory group as well as development standards, collaborations with agencies, and numerous other goals.	1	No direct or specific language states that the objective is to increase walking and bicycling. However, significant language exists that support walkable places with regard to design, layout and proximity.	
P-9	0		0		
P-10	2	The Plan does mention numerous times the existence of a Bike/Ped Plan with the desire to update and improve it. The Plan mentions repeatedly the desire for paths to link destinations but also to be installed in areas such as open spaces, City Park spaces, new developments and through existing facilities.		There is a transportation section and it does mention bicycle and pedestrian objectives, but there are no specifics with regard to particular projects, design standards or measurable goals. The section is mostly about typical VMT, peak hour and capacity language synonymous with vehicle travel. There is mention of the TID concept and that such facilities would be included in those. The TIDs take up a significant area in the County.	
P-11	0	No traffic calming measures were mentioned in the plan. The plan is very heavy on improving traffic	0		

## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
		congestion, more direct routes and reconstructing problematic intersections.			
P-12	1	There are measure mentioned in the plan specific to bike/ped. The plan includes language describing the objective to enhance the current network, improve "alternate" transportation and to construct facilities through development, safety is mentioned, though on a limited basis.	2	The TIDs are specifically intended to improve bike/ped facilities and that Plan states that the County will work with the DOT/MPO and Cities to ensure these are incorporated.	
P-13	2	The Plan mentions that developers are required to construct sidewalks but that additional facilities in the bicycle realm are being sought. The plan references bike parking, the desire of developers to have the Bike/Ped Plan updated, and the inclusion of crosswalks.	2	The plan explicitly states that such facilities are to be included in multiple land use designs and applications. It is one of the strongest components within the transportation realm.	
P-14	2	Significant language about trail improvements, connections between existing trails and the value the hold. Specific trails and implementation steps is included.	1	The plan mentions these things and seeks for them to be built. However, the plan also more specifically recommends the development of a County-wide plan and the TID concept. These elements are likely heavily concentrated in those plans.	
P-15	0		1	The plan mentions parking should be placed to the side or behind the structures to improve accessibility. The plan does not	

## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
				mention a reduction of parking but rather adequate, not excessive.	
P-16	0	No mention, only discuss rising senior population in the demographics section.	1	minimal language is included but does state the need to improve access to health care for an aging population.	
P-17	0		0		
P-18	0		0		
P-19	0		2	There is specific mention of co-locating events at school sites and specific direction to pursue them.	
P-20	0		2	The Ag portion of the plan is extensive with an entire chapter and numerous strategies including TDR.	
P-21	0		2	Local food production is a major tenant of the plan.	
P-22	0		1	The plan mentions food security but not in any great detail like this section intends.	
P-23	0		0		
P-24	0		0		
P-25	0		1	Within the land use designations there is mention of grocery outlets and a desire to improve uses that could include such opportunities.	
P-26	0		0		
P-27	0		2	The plan thoroughly examines why and how drinking water should be protected and through a bevy of methods.	
P-28	1	The plan does include pursuing additional Open Space and Park sites in Dover. The Plan is strong in it's support, though it does not	1	The plan certainly mentions the importance of open space and parks. It mentions ways to achieve more of both, though it fall short of the specifics with	

## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
		provide data on how or why these areas should be pursued, when, or how much money they may cost.		respect to acreage needs, geographic areas with no or limited space, etc.	
P-29	0		0		
P-30	0	No mention of such things though the plan does mention playground equipment and some degree of water source protection.	1	The plan mentions enhancements and has a program dedicated towards them, but no real specifics are mentioned.	
P-31	0	No such language exists only the requirement of bike parking.	2	The plan is strong in its requirements for developers to provide various facilities including open space, parks and more.	
P-32	0		0		
P-33	0		0		
P-34	0		1	Some language mentions accessing such places, but nothing in terms of collaborating.	
P-35	0		1	The plan discusses aging in place and the need to access health services but doesn't get into details on goals or objectives.	
<b>C. Active Design</b>					
P-36	2	Plan does include Mixed Use development, code language and overarching goals.	2	The plan is highly supportive of mix use, walkable neighborhoods.	
P-37	1	Plan does mention the concept of the connections via streets and pathways to mixed use areas and transit.	2	The plan does provide details on what a walkable community looks like and how the land uses can be designed to afford such a lifestyle.	

## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
P-38	1	The plan does mention compact development once, and does mention affordable housing.	2	The plan does mention compact development and attempts to limit sprawling development patterns through TDR.	
P-39	0		1	While not specifically stated as TOD, the plan does include language about accessing transit and fostering its use through land use design.	
P-40	1	The plan does mention the village type development pattern and specifically the appeal for walking and bicycling.	2	The plan is highly supporting of this land use pattern.	
P-41	1	The plan does mention in-fill development patterns as a goal and to help ease annexations. Though there are no measurable goals set.	1	the plan is supportive of redevelopment and limiting fringe development as much as possible.	
P-42	1	The plan has a Historic Preservation section and does promote reuse and re-purpose.	1	The plan has a Historic Preservation section and does promote reuse and re-purpose.	
P-43	1	There is language that supports connections between developments and parts of the existing community.	2	The plan is very clear on the intent to link development and valued areas within the County and stop disconnected properties.	
P-44	2	The plan does include a specific policy on ADW's though they are seemingly very restrictive.	2	The plan calls for removing barriers to constructing ADU's.	
P-45	1	The plan does support the use of green spaces, park spaces, open spaces and vibrant places in the City, though no mention of third	2	The plan does include specific goals about trying to create places that fill this ideal.	



## APPENDIX

## COMPREHENSIVE PLAN SCORECARD REVIEW

Dover			Kent County		Overall Comments
Measure	Score	Notes	Score	Notes	
		place or specific related terminology or policies.			
P-46	0	No such language was included. The City apparently is ripe with existing and older growth trees. No real mention of new trees in development precess was given.	2	though a limited statement, the plan does include language about the need and guidance of street trees, specifically to shade sidewalks along streets.	
P-47	0		0	This was not mentioned, though orienting the buildings with parking areas to the side and back was, with the expectation that the building front the street.	
P-48	0		1	The plan does reference LEED as one type of environmentally sustainable practice that is encouraged.	
P-49	0		0		
P-50	2	Significant language is included on the relationships with numerous other agencies. This may be the strongest section with regard to the tool.	2	An entire chapter is devoted to the nature of the intergovernmental arrangements.	

This map prioritizes each zip code in Delaware by its Bikability Density Index (BDI) value, and indicates where expanding and improving bicycle infrastructure is most needed. Building safe and accessible bicycle infrastructure promotes physical activity, an important determinant of health. Providing good bicycle infrastructure improves real and perceived safety for cyclists which helps attract new riders commuting to/from school or work and riding for recreation and other trips. Bicycling has a low carbon foot print, helping reduce health impacts of air pollution.

BDI values were calculated for each zip code using the following formula:

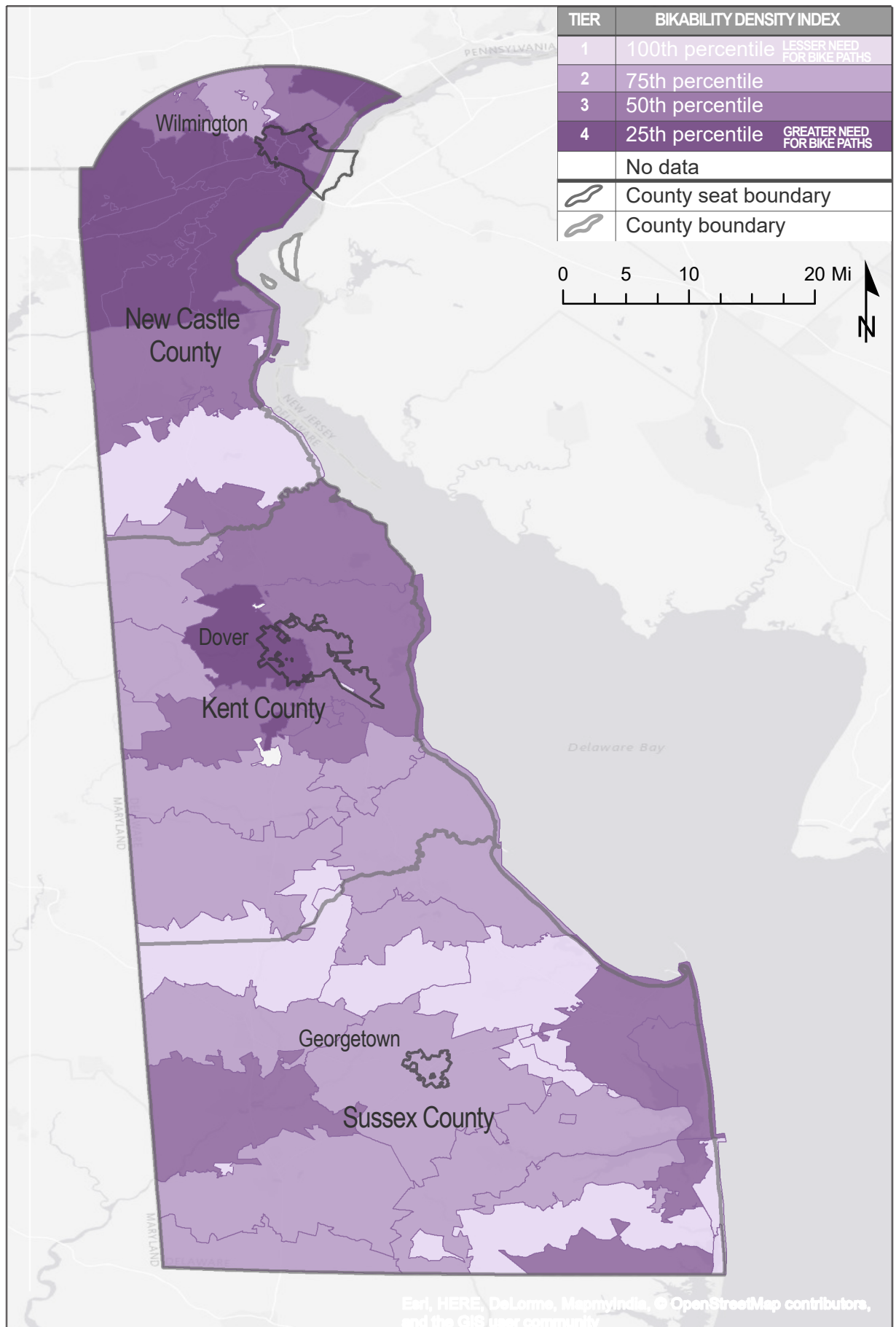
$$BDI_{zip} = \frac{\sum \text{path lengths (miles)}}{\text{population}_{zip}} * 100$$

BDI values represent "low stress" bicycle path mileage per person, and are tiered by percentile rank.

Zip codes in Tier 4 (the darkest purple) have the lowest quarter BDI values, meaning they have least sidewalk mileage per person in Delaware.

BDI values are calculated from "low stress" bicycle path layers provided by the State of Delaware Department of Transportation, and 2015 American Community Survey data, and aggregated to the zip code level.

NOTE: The "Low Stress Bicycle Network" is currently in draft form. It may not be used without permission from the Delaware Department of Transportation.



## Bikability Density by Zip Code, Delaware

Calculated from 2011-2015 American Community Survey 5-Year Estimates and "Low Stress Bicycle Network" data provided by Delaware Department of Transportation.

Prepared by Planning4Health Solutions for Delaware Planners4Health

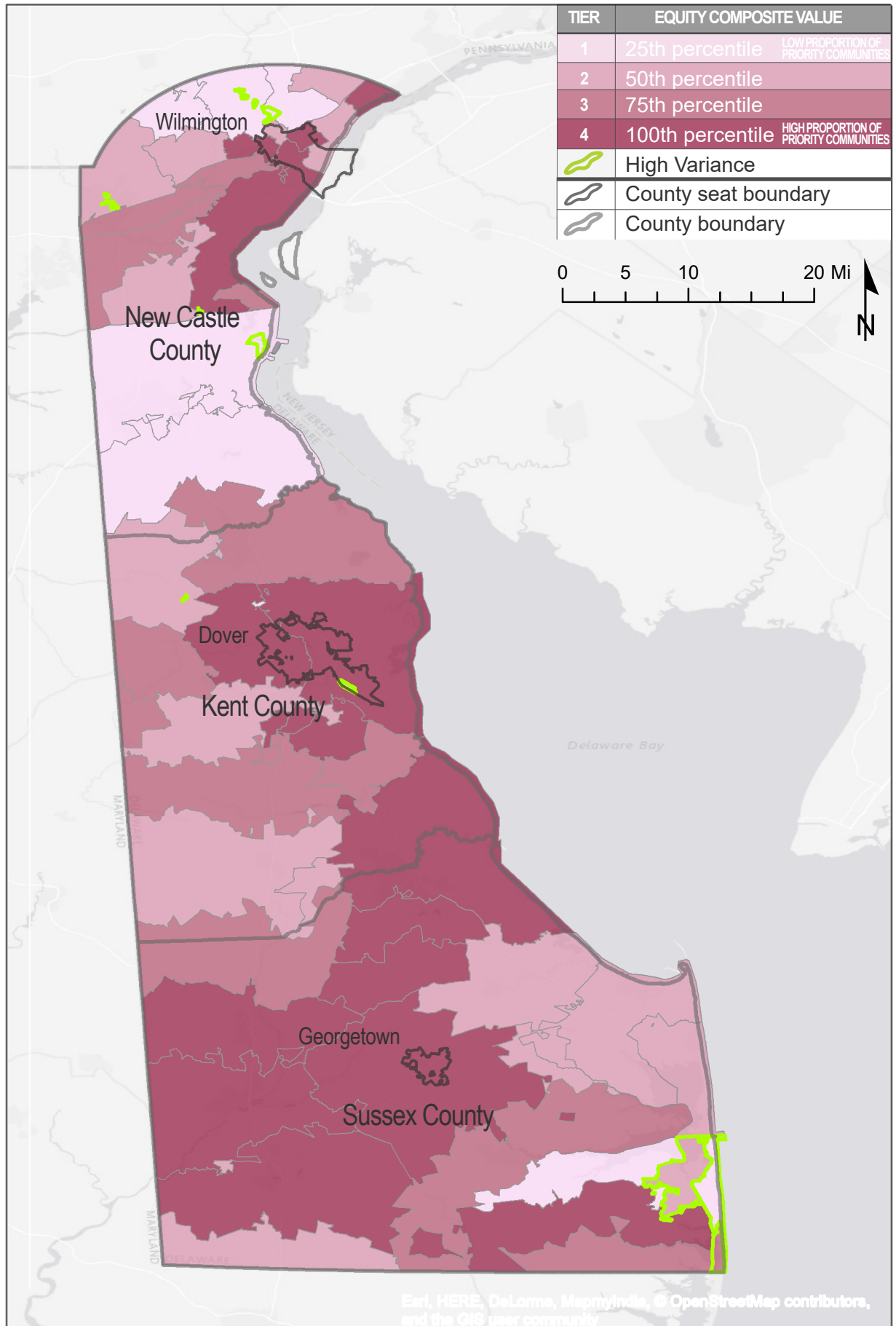
Delaware  
PLAN4Health  
An American Planning Association Project

This map prioritizes each zip code in Delaware by its Equity Composite Value (ECV,) and indicates where communities of concern are most concentrated.

The ECV summarizes 2015 American Community Survey data for the following groups: elders, children, SNAP-receiving households, low-income households, households with poor vehicle access, communities of color and people with limited English proficiency. These groups disproportionately experience health disparities that lead in health inequities. Zip-code level data for each indicator is averaged to determine each zip code's ECV.

ECVs are tiered by percentile rank. Tier 4 comprises zip codes with the highest quarter ECVs (darkest pink); these are the zip codes with have the highest proportions of priority groups.

In some zip codes one or more equity indicators differ significantly from the ECV - an average of all equity indicators. These high variance zip codes are outlined in green. By examining the individual equity indicators (see Individual Equity Indicator Map) for these zip codes we can understand what circumstances underlie the deviation.



## Equity Composite Values by Zip Code, Delaware

Calculated from 2011-2015 American Community Survey 5-Year Estimates.

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for Delaware Planners4Health

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This map prioritizes each zip code in Delaware by its Park Density Index (PDI) value, and indicates where expanding park and open space access is most needed. Publicly-accessible parks and open spaces are often used for sports, play and other physical activities which promote healthy lifestyles and communities.

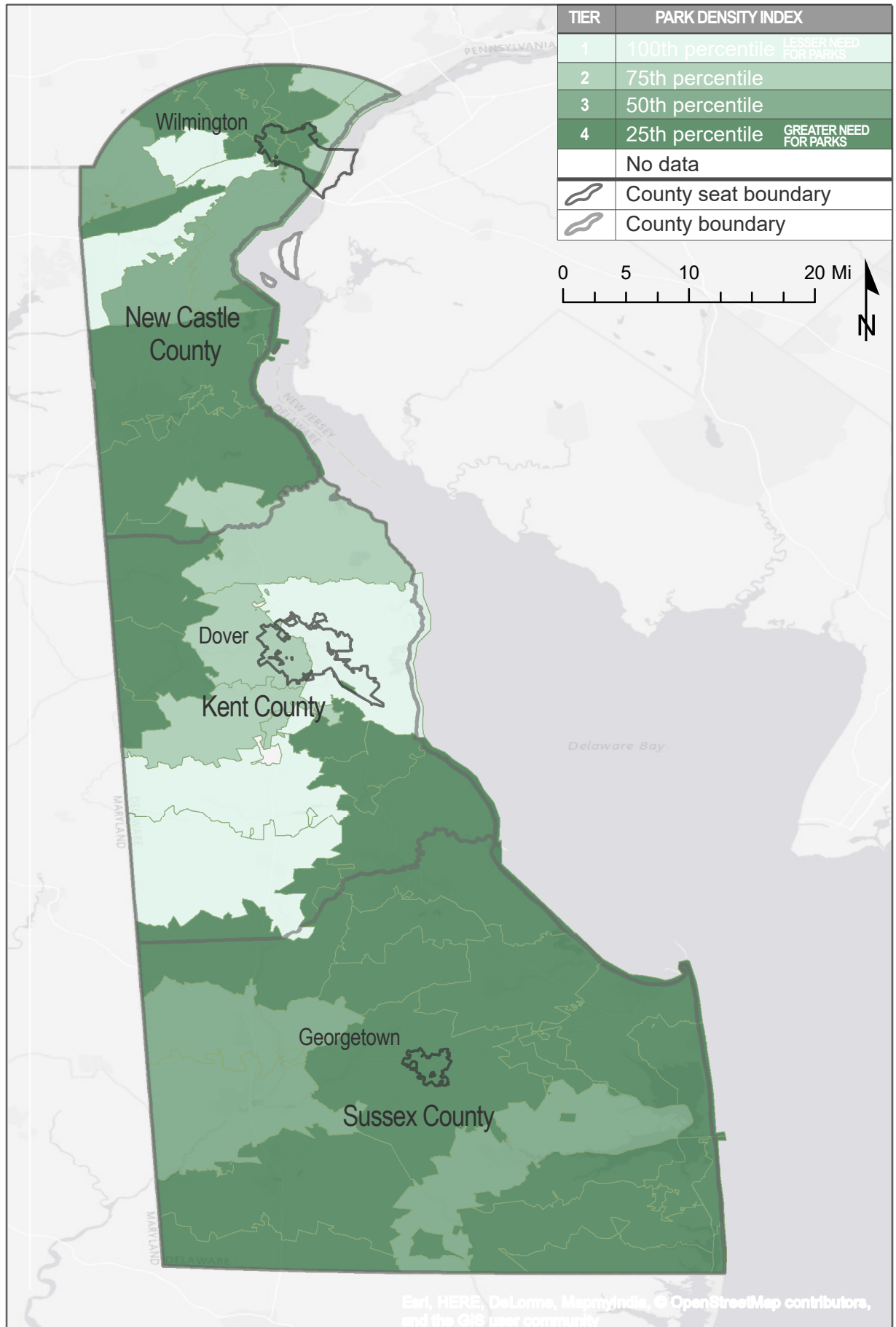
PDI values were calculated for each zip code using the following formula:

$$PDI_{zip} = \frac{\sum (\text{park space} + \text{open space}_{zip} \text{ (acres)})}{\text{population}_{zip}} \times 100$$

PDI values represent park and open space acreage per person, and are tiered by percentile rank.

Zip codes in Tier 4 (the darkest green) have the lowest quarter PDI values, meaning they have the least park and open space per person in Delaware.

PDI values are calculated from Sussex County, New Castle County and Kent County parks data, State of Delaware, Open Space Program Land Inventory data, and 2015 American Community Survey data. Data are aggregated to the zip code level. Parks and open spaces that were not publicly accessible, or did not provide opportunity for physical activity were excluded from analysis.



## Park Density Index by Zip Code, Delaware

Calculated from Sussex, New Castle and Kent County parks data, and the State of Delaware *Open Space Program Land Inventory data*

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This map prioritizes each zip code in Delaware by its Retail Food Environment Index (RFEI) score, and indicates where improving healthy food access is most needed. Access to healthy foods is an important determinant of health.

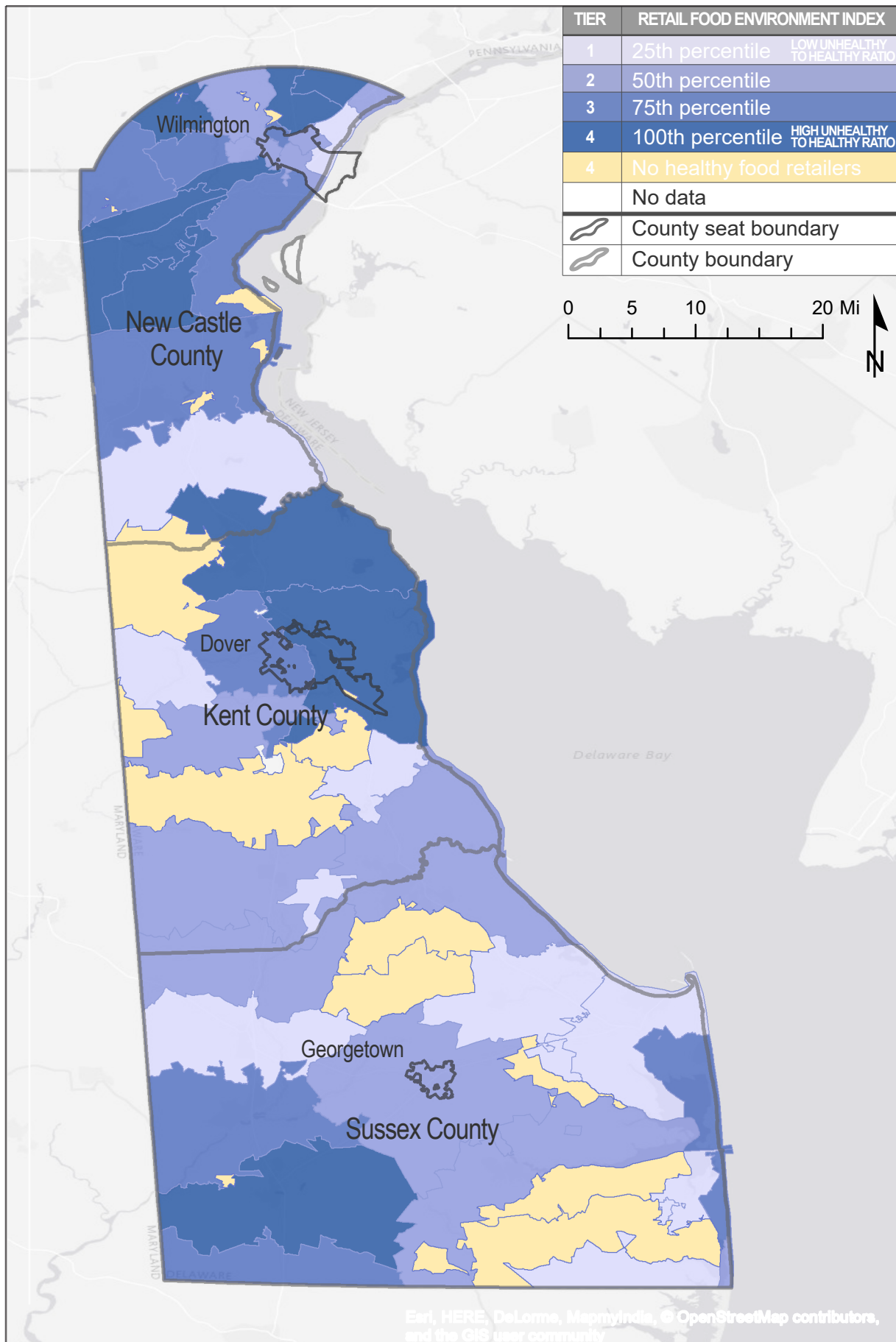
RFEI values were calculated by dividing the total number of unhealthy food retailers (fast foods, convenience stores) by the total number of healthy food retailers (grocery stores, farm stands, farmers markets) per the following formula:

$$RFEI_{zip} = \frac{\sum(\text{fast foods} + \text{convenience stores})_{zip}}{\sum(\text{grocery stores} + \text{farm stands} + \text{farmers markets})_{zip}}$$

RFEI values represent the ratio of unhealthy to healthy food retailers, and are tiered by percentile rank.

Zip codes in Tier 4 include those with the highest quarter RFEI values (the darkest blue) and those without any healthy food retailers (golden colored). Respectively, these zip codes have the largest ratios of unhealthy to healthy food retailers, or totally lack healthy food retailers.

RFEI values are calculated from U.S. Census Bureau data, using specific North American Industry Classification System (NAICS) codes, and are aggregated to zip code level.



This map prioritizes each zip code in Delaware by its Sidewalk Density Index (SDI) value, and indicates where expanding pedestrian infrastructure is most needed. Accessible pedestrian infrastructure encourages physical activity (e.g., walking), an important determinant of health, and can improve mobility for users of all ages and ability levels.

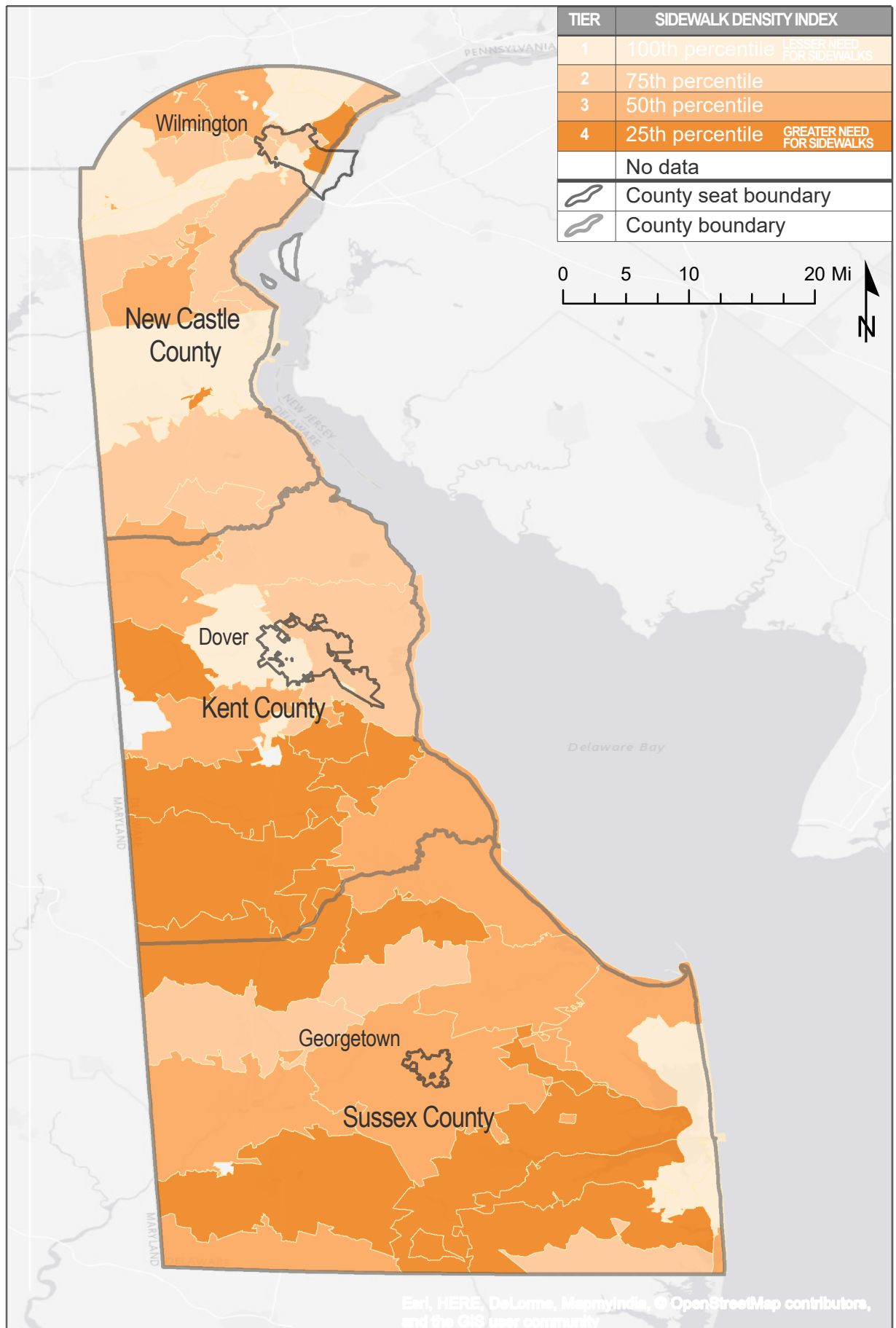
SDI values were calculated for each zip code using the following formula:

$$SDI_{zip} = \frac{\sum \text{sidewalk lengths (miles)}}{\text{population}_{zip}} * 100$$

SDI values represent sidewalk mileage per person, and they are tiered by percentile rank.

Zip codes in Tier 4 (the darkest orange) have the lowest quarter (25th percentile) SDI values, meaning they have least sidewalk mileage per person in Delaware.

SDI values are calculated from sidewalk layers provided through the State of Delaware First Map, and 2015 American Community Survey data, and aggregated to the zip code level.



## Sidewalk Density by Zip Code, Delaware

Calculated from 2011-2015 American Community Survey 5-Year Estimates and State of Delaware First Map open data.

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## Kent County Charrette Proceedings

July 25-27, 2016





## **Kent County Charrette Proceedings—July 25-27**

### *Introduction*

The Delaware Plan4Health project aims to address obesity in Dover and Kent County by focusing on efforts to improve opportunities for healthy eating and active living. By leveraging the timing of the comprehensive plan updates, Delaware Plan4Health will address healthy behaviors through policy and the built environment by creating a process to understand how health and equity can be assessed and integrated in the comprehensive plan. This process includes carrying out a planning charrette by bringing together the public and disciplines in planning, design and public health for an intensive session of exploring opportunities linking health and planning, with a focus on equity. With the preliminary analyses and results from the charrette, the Delaware Plan4Health team will have a framework and guidance in incorporating health and equity to the comprehensive plan updates for the City of Dover and Kent County. For this project, there will be two 3-day charrettes—one in Dover and the other in surrounding Kent County.

### *Purpose*

Delaware Plan4Health conducted a 3-day planning charrette in Kent County July 25-27. A charrette is a public participation and stakeholder engagement exercise that explores creativity and community vision for a design of a project or community plan. For the Kent County charrette, community stakeholders, city planners and the public came together to review work that has been done to date, identify priority concerns and review potential strategies. The results from the charrette, combined with the preliminary analyses, will contribute to the guidance document for the County's comprehensive plan update.

### *Preliminary Work*

Prior to the charrette, Delaware Plan4Health conducted a public survey and a mapping analysis of healthy food retail, active transportation and active recreation priority areas. Results from these analyses led to identifying priority areas and leading concerns/barriers to healthy eating and active living within Kent County, which contributed to the format of the charrette.

In June, during the Dover charrette, the Delaware Plan4Health Leadership Team discussed the review of the policy analysis, using the Nemours Health & Prevention Score Card for Comprehensive Plans. The analysis was conducted by a consultant with Designing4Health who was unfamiliar with Dover and Kent County. Following review of the analysis, the Team discussed an approach to develop the guidance. The approach will include language addressing health impact in planning and its influence in chronic disease burden and obesity. In addition, each chapter of the comprehensive plan will include language that addresses health and impact, as well as, strategies and recommendations to implement health-related efforts. The Team agreed that a stand-alone health chapter will not suffice as that does not support the idea of health having an impact in the different aspects of planning.

### *Charrette Selection—Kent County*

The Plan4Health Team selected a rural area south of Dover including the town of Magnolia and parts of Camden, Felton and Frederica. The boundaries include:

North: Voshells Mill Star Hill Road and Sorghum Mill Road

East: Delaware Route 1

South: Midstate Road (DE Route 12)

West: South Dupont Highway





couple days. The team went on a windshield tour in select areas of the community. The tours highlighted the following concerns and needs:

- Accessible, safe parks
- Sidewalk connectivity
- Pedestrian/bicycle friendly streets
- Healthy food access/ unhealthy food proximity to schools
- Connectivity to various uses
- Transforming corner stores
- Shared use of recreation facilities

Following the tours, team members and stakeholders discussed opportunities, including partnerships to develop and implement efforts, and policy-related recommendations to be incorporated in the comprehensive plan update.



In the evening, the team prepared an open house that included a presentation of the project and goals for the charrette and public engagement exercises, “What makes a “Healthy Kent County?” and a “dot” exercise. Participants were asked to respond, in two words, what makes a healthy Kent County. During the “dot” exercise, participants were asked to place dot stickers on images that appeal to their interest for the community. Next to each image board, residents had an opportunity to provide some written feedback on the reason for their selections. The images were categorized into the following themes—Healthy Food Access, Active Transportation and Active Recreation. These images involved examples of potential opportunities for the community and included:

- Active parks/recreation space (including adult “playgrounds”)
- Passive recreation/parks space
- Street furnishings
- Lighting
- Transit Stops
- Underground utilities
- Sidewalks and connectivity
- Safe Biking
- Trails
- Street trees
- Traffic calming
- Safe pedestrian crossing
- Community gardens
- Farmers market with EBT
- Trailside healthy food
- Produce carts
- Transit to healthy food
- Wayfinding signage



### Day 2

Day 2 of the charrette allowed for an open house for stakeholders and the public. The Delaware Plan4Health team, along with statewide and local stakeholders, brainstormed strategies and current efforts as it related to healthy food access, active transportation, and active recreation. Throughout the day, residents had an opportunity to continue the “dot” exercise.

A couple members of the leadership and consultants continued with a windshield tour of specific areas of the study area. Upon return, Bill Bruce from CRJA-IBI Group, a consultant for the Delaware Plan4Health project, worked with County planning and transportation staff to review ideas for a town center conceptual plan for Felton and South State Street, and a bicycle network in the area.

### Day 3

Based on the windshield tour and conversation with stakeholders, the Team focused on addressing healthy food access, bicycle network, and developing a town center concept. Michelle Eichinger from Designing4Health began creating models for healthy food access through produce carts and a local food distribution hub. Bill Bruce continued drafting conceptual plans for a local food distribution hub and town centers.

In the evening, the Delaware Plan4Health Team provided a final presentation to the public. The presentation identified some of the charrettes findings and potential strategies.

### *Charrette Participants/Roles*

Other than the members of community, the table below lists those participating from the Plan4Health Team and other stakeholders.

<b>Participant</b>	<b>Role/Organization</b>
David Edgell	Plan4Health Team/Delaware Office of State Planning Coordination
Mary Ellen Gray	Plan4Health Team/Kent County Planning
Michelle Eichinger	Plan4Health Team Consultant/Designing4Health
Bill Bruce	Plan4Health Team Consultant/CRJA-IBI Group
Patti Miller	Plan4Health Team/Nemours Health & Prevention Services
Rich Vetter	Stakeholder/Dover/Kent MPO
Herb Inden	Stakeholder/ Delaware Office of State Planning Coordination
Dorothy Morris	Stakeholder/ Delaware Office of State Planning Coordination
Bill Brockenbrough	Stakeholder/Delaware Department of Transportation
Connie Holland	Stakeholder/ Delaware Office of State Planning Coordination
Kris Connelly	Stakeholder/Kent County Planning
David Marvel	Stakeholder/Farmer/Delaware Food Bank
Nancy Mears	Stakeholder/UD Cooperative Extension

### Statement of Findings: Healthy Eating/Food Access

While the study area is not in a USDA-defined “food desert,”<sup>1</sup> there was evidence from the preliminary analysis suggesting concerns with healthy food access and affordability. In the periphery of the study area, there are 3 grocers, including stores. However, within the study area, there are none. Instead, there are convenient stores a Family Dollar, which are often located adjacent to neighboring schools. Food sold in these stores are often of poor nutritional value—high calorie, high fat, and/or high sodium. While the Family Dollar may be affordable, it is known that food and other items sold at smaller retail stores, as in corner stores, are often more expensive than comparable food sold at full service grocery stores or supermarkets. These stores often do not sell fruits and vegetables. Overall, there is clearly a need to improve access to healthy foods, fruits and vegetables.

Based on the public feedback, residents expressed the need for healthy, fresh, and affordable fruits and vegetables. Figure X lists the comments and feedback from the public regarding the need for healthy foods.

#### Access to Affordable Healthy Foods



##### Comments:

- Traveling green grocer
- Vegetables- don't have to be fresh for a healthy diet / Process local foods for off season
- Produce stands and healthy food in convenient stores
- Bring healthy food to neighborhood-Mobile Markets and Produce Carts
- Healthy food more affordable than junk
- Transit to grocery stores
- Community Gardens
- Food Hub needed in Central Delaware
- Incentivize corner store owners to accept EBT
- Farmers Market with EBT Access

Residents and stakeholders would like to see affordable, healthy food that is easily accessible. Specifically, they are looking for opportunities for EBT access at farmers' markets or produce stands. In addition, residents are interested in community gardens.

### Healthy Food Access Recommendations

#### **Community Gardens**

Through various partnerships, community gardens can provide a source of fresh, affordable produce for residents. A Comprehensive Garden / Urban Agriculture Network is an approach that combines collaborative partnerships with programs to support and sustain community gardens. Produce from gardens can provide fresh fruits and vegetables to local food pantries, contribute to local food procurement in institutions, be sold to the community through mobile markets and produce carts, and be a part of a local food distribution hub. Figure 2 demonstrates the uses and partnerships needed for a sustainable garden and agriculture network.

#### **Produce Carts**

Many residents expressed interest in having fresh fruits and vegetables available in their neighborhoods. Produce Carts are mobile carts that can locate in priority areas and in partnership with nonprofit and government agencies, and can accept EBT vouchers for those receiving WIC or

<sup>1</sup> The United States Department of Agriculture defines a “food desert” in an urban area as being a low-income area (census tracts with at least 20% of household are at poverty level) and low access to a grocery store or supermarket (census tracts with a grocery store/supermarket greater than 1 mile to at least 33% or 500 people).



SNAP benefits. Produce carts can provide job opportunities and cities can offer financial incentives for cart operators through fee waivers.

### Local Distribution Hub

With gardens and partnerships with local farmers, a local food distribution hub can offer affordable, even free, produce to vulnerable populations. Convenient stores can enter in a food distribution cooperative through the food distribution hub to help reduce the cost of distribution and transportation. In addition, a local food distribution hub can source local, fresh produce for institutions such as schools, hospital, community pantries, senior centers and prisons.

### Farmers Markets Accepting EBT

There is a roadside farmer's market located in the study area. Based on preliminary analysis, residents who are low-income or receive WIC or SNAP benefits have expressed that they are not likely to shop at Farmers' Market due to lack of affordability. Markets partnering with those administering these public benefits can help promote affordability and EBT use at these markets.

## Opportunities— Comprehensive Garden / Ag Network

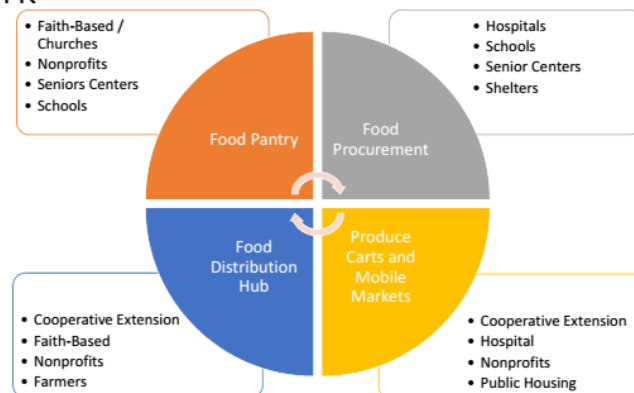


Figure 2 Comprehensive Agriculture/Garden Network

### Statement of Findings: Active Living

The study area is a rural area, and as such, opportunities for active transportation such as walkability is limited. Similarly, there are no specific bike routes linking destinations such as food stores, schools, parks, etc. In addition, the area has no active recreation amenities for the public such as a community park. However, there is a Little League community baseball field.

Part of a healthy lifestyle includes engaging in physical activity. This does not always mean individuals engage in structured exercise, but rather activity as part of a lifestyle. Physical activity through active recreation and active transportation (e.g. walking or biking) are approaches to engage in active living.

Residents are interested in amenities and features that support and promote walking and biking. Figures 3 and 4 list some of the comments from the public regarding support for active transportation.

## Active Transportation– Improve Walkability and Bikability



Safe Biking



Transit Shelters

Sidewalks and Connectivity

### Comments:

- Have a coffee shop or places to gather
- Community Centers with transport to rural areas
- Sidewalks to destinations
- Marketing campaign for biking as a mode of transportation vs leisure activity
- Sidewalks create accessibility; walking is an affordable mode of transit

Residents expressed interest in having places to go, such as a coffee shop or parks. They desire town or community centers with safe sidewalk connectivity with easier access to public transit. Residents would also like to see more promotion for bicycling as a mode of transportation. The perception is that bicycling is a form of recreation. Supporting bikability includes safe bike paths and bike racks at destinations. In addition, residents would like to see more lighting for safety. Since the study area is rural, lighting is

Figure 3 Public comments for active transportation

## Active Transportation– Amenities



Street Furnishings

Street Trees



Lighting

Underground Utilities

### Comments:

- Pleasant ways to get to destinations
- Easier access to public transport
- Need bike racks
- Need to feel safe when bike
- Lighting supports safety- encourages more walking

In addition to support for walking, biking and using transit, residents shared feedback for opportunities to support parks and recreation. Figure 5 provide some comments from the public regarding interest in parks. The study area does not have a park. However, there are three County Parks including Brecknock, Han Construction area, and Tibury Creek, as well as a State Park, Killens Pond, nearby.

Figure 4 Public comments for active transportation

residents expressed interest in naving more parks and trails. They commented on taking advantage of the rural setting with opportunities to connect with nature and the serenity that it brings. In addition, residents would like to see a trail system connecting the surrounding small towns.

Residents commented on opening existing school sites to the public. Felton Elementary School, Lake Forest North Elementary School and McIlvaine Early Childhood Center are all within walking distance of residential neighborhoods. With the exception of the McIlvaine Early Childhood Center, the playgrounds at these sites are currently locked and not accessible to the general public or neighboring families. In addition, Lake Forest High School opens their indoor fitness facilities to the public for a fee. Local community members stated they would like to see this as a model for other schools in providing indoor recreation facilities for the public.

## Active Living Recommendations

### Pedestrian and Bicycle Network and Supporting Amenities

## Parks and Recreation



Active Recreation

Passive Recreation



Trails

### Comments:

- Need more parks
- Attractive passive environments with recreation opportunities
- Trails connecting to surrounding areas and communities
- Active sites open to public
- Kent County has locations providing serenity and contact with nature
- Ensuring safety will support activity

Figure 5 Public comments for parks and recreation



Residents would like more opportunities to walk and bike. While the area is not dense for a comprehensive sidewalk network, there are some roads include very wide shoulders that can be converted to multi-use trails or bike lanes. Because the road is already wide enough, it would be inexpensive to convert these roads since it would only require paint and street reflectors. During the charrette, Team members outlined a potential bicycle network, the Heart of Delaware Trail. The Kent County Bike Loop includes Lebanon Road, Midstate/Johnny Cake Landing, Turkey Point Road, Main Street (Woodside)/Walnut Shade, Peachtree Run, and South State Street. By coordinating with Tourism and Economic Development, the Kent County Loop can be an attraction for residents and visitors to explore small towns in Delaware and/or the Amish and farming community. Figure 6 shows the conceptual layout of the Heart of Delaware Trail.

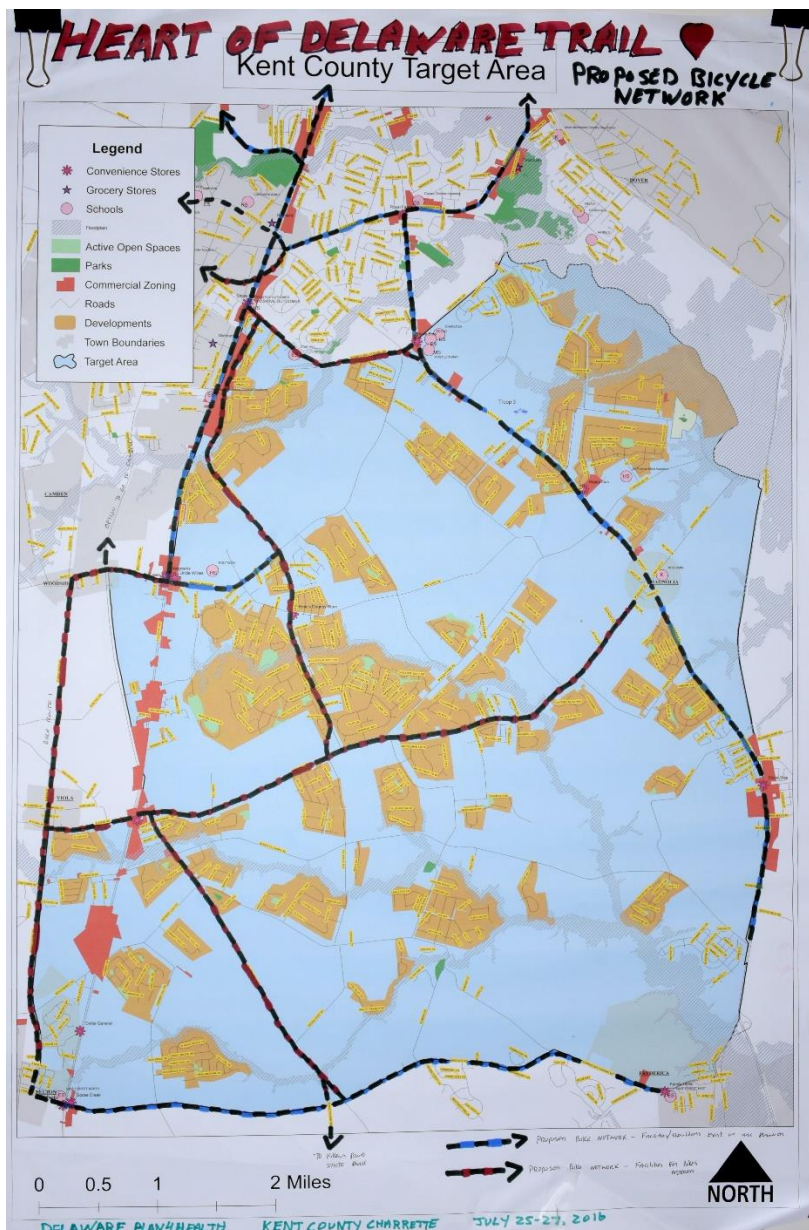


Figure 6 Proposed Heart of Delaware Trail Network

### Village/Town Centers

There is a growing interest in transforming communities to include a village or town center that supports walkability in a mixed-use community. Village centers offer a vibrant and active community for residents and visitors with opportunities for social gathering and walkable destinations. Figure 7 displays a conceptual plan for the town center for Felton.

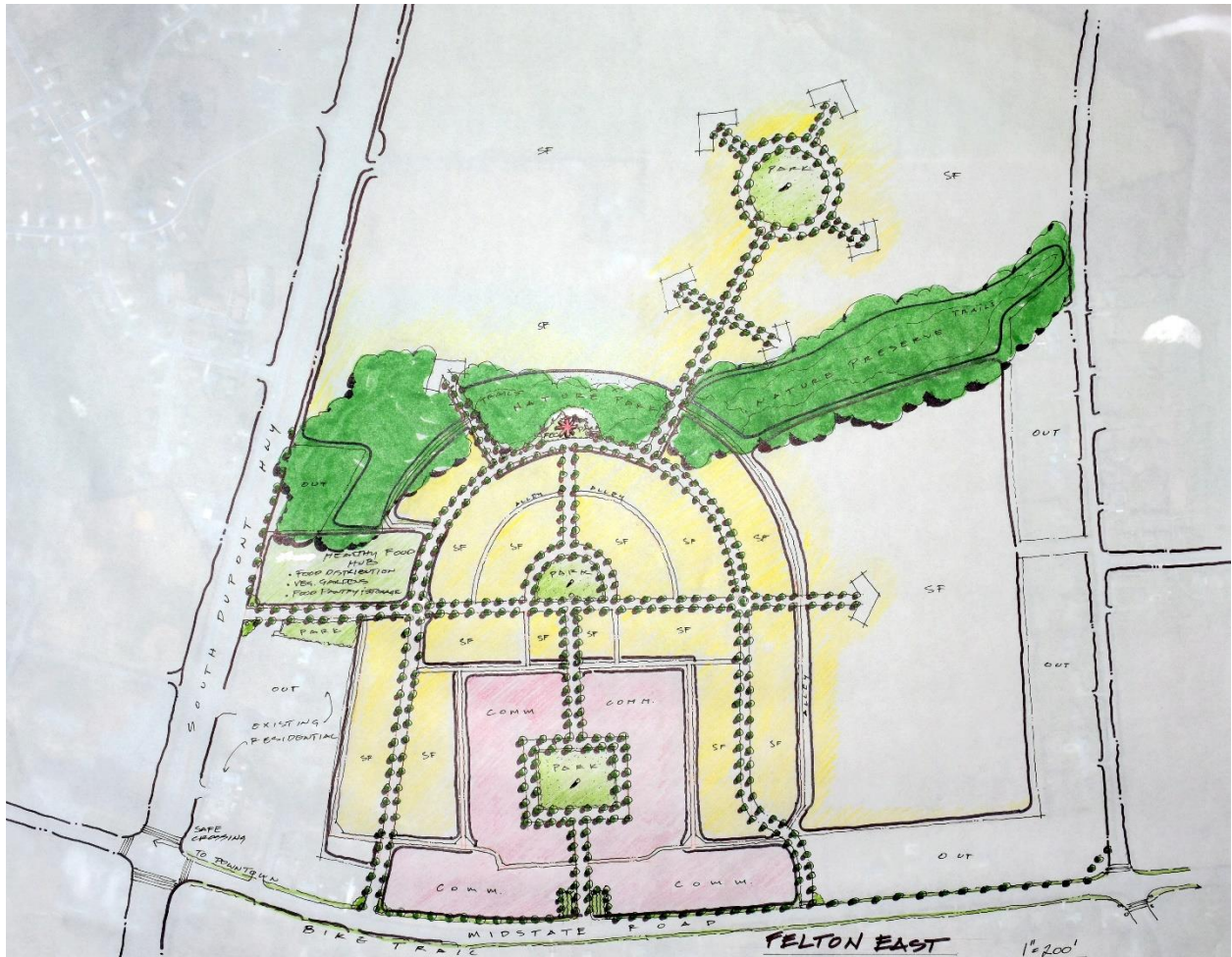


Figure 7 Conceptual Plan for a Town Center in Felton

### Parks and Recreation

There are a couple of DNREC-owned boat recreation areas in the study area. These areas have the potential to provide passive recreation with benches while connecting to the serene environment. In addition, there are several opportunities for public use of playgrounds and indoor recreation and fitness facilities through the schools. By working with the schools and community partnerships, shared use agreements allow for public use of these spaces, providing residents and their families with opportunities for physical activity and active living.

Next Steps  
Guidance Document

Results from the preliminary analysis and the charrette will be analyzed for recommendations and strategies to be incorporated in the comprehensive plan update for Kent County. The guidance document will provide County officials with the language detail linking health and equity and their impact in planning and policy. In addition, the guidance document will include targeted and specific draft language addressing health and equity for each relevant chapter of the comprehensive plan, including:

- Population and Demographics
- Community Facilities
- Transportation
- Economic Development
- Housing
- Intergovernmental Coordination
- Implementation

In addition, to provide health and equity language, the guidance document will include recommendations and strategies to address healthy eating and active living through partnerships, and will include examples of these strategies from other communities. These examples will address policy changes, partnerships and implementation.

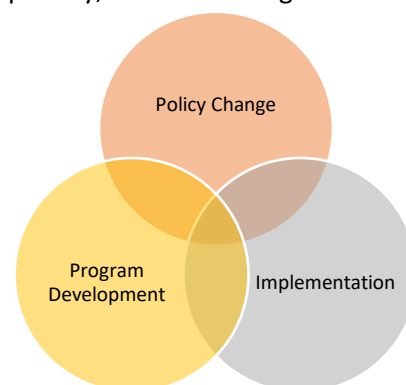
#### Capacity Building and Program Development

Many strategies and recommendations require partnerships—private and public—to develop and implement. There are many organizations with focused attention to the target populations of the study area or the neighborhood. These efforts align with the recommendations developed from the preliminary analysis and charrette.

#### **Task Force**

There are many organizations engaged in the area. A Task Force would bring together partners to develop a coordinated, strategic approach to identify priority, feasible strategies to implement. This would allow partner organizations to review resources and leveraging existing work. In addition, the Task Force can detail roles of organizations to pursue efforts—policy change, program development, and implementation. Figure X can help organize resources and identify organizations that may have overlapping roles. Organizations that can be a part of this effort include, but not limited to:

- Delaware Housing Authority
- Kent General Hospital
- Delaware Division of Public Health
- Nemours Health and Prevention Services
- Dover/Kent MPO
- Delaware State University—Cooperative Extension
- Central Delaware Chamber of Commerce
- Bike Delaware
- DART
- Lake Forest School District and Caesar Rodney School District





- Delaware Food Bank
- DelDOT
- Members of the Public

### **Produce Carts/Mobile Markets**

Starting a produce cart/mobile market program requires private - public partnerships. This effort will need a lead organization, such as Delaware Food Bank, to develop and implement the program. There are several model programs and toolkits available, including NYC Green Carts and ChangeLab Solutions' Model Produce Cart Ordinance. The following are steps to consider in executing a produce cart/mobile market program:

- Policy Change  
The Task Force will need to review existing County policies that may inhibit the use of produce carts/mobile markets and identify policy strategies to encourage produce carts/mobile markets. These may include financial strategies, such as business permit fee waivers for cart operators, and ordinance amendments to allow for sidewalk vendors.
- Program Development  
Program development will need to consider securing funds for cart purchase(s), produce procurement, cart operations, Supplemental Nutritional Assistance Program (SNAP) application, site locations and agreements, and marketing.
- Implementation  
An organization will be needed to oversee and implement programs. In addition, organizations can partner with this effort to promote produce carts and provide supplemental programs to encourage the purchase of healthy foods and healthy eating habits (i.e. cooking classes, social marketing, etc.)

**Addendum**  
**Kent County's Healthy Food Access Model**

**Healthy Food Access—Kent County**

After interviewing stakeholders, there is much interest in addressing food access. However, current efforts seem to be geared toward food security by incorporating food pantries/closets. In Kent County, there does not appear to be any current effort to address healthy food access. The table below lists current and potential partners for any healthy food intervention efforts. Intervention efforts discussed during the charrette include:

- Food Pantry
- Local Food Procurement
- Food Distribution Hub
- Produce Carts/Mobile Markets
- Small Grocer/Healthy Corner Store
- Community Gardens

Partner	Current/Future	Role
Kraft	Future	Supplier
Food Bank of DE	Current	Supplier Program Development
Nemours HPS (FBO link, Troy Hazzard)	Current	Implementation Program Development
Catholic Charities	Future	Implementation
Fifers	Current	Supplier
Fruit and Vegetable Growers	Current	Supplier
Angel Food Ministry (Whatcoat UMC)	Current	Program Development Implementation
Cooperative Extension- Paradee Center	Current	Supplier Program Development
Kent County Economic Development	Future	Program Development
Caesar Rodney School District	Current	Implementation
Lake Forest School District	Current	Implementation
Senior centers (Modern Maturity)	Current	Implementation
Housing Authorities	Future	Program Development Implementation
City/County Planning and MPO	Future	Policy Change
Delaware Department of Agriculture (Holly Porter)	Current	Policy Change Supplier
Restoring Central Dover	Future	Implementation Program Development
Communities in Schools	Future	Implementation
Delaware Division of Public Health	Future	Program Development Resource
Food Trust	Future	Resource
Healthy Foods for Healthy Kids	Current	Program Development Resource
Local grocery stores	Current	Supplier
Harry K Foundation	Current	Resource
Delaware Center for Horticulture	Current	Program Development Resource

Definitions:

**Supplier**—Organization or coordinating organization providing fresh produce, food products, materials and supplies for the intervention

**Policy Change**—Organization advocating and educating for change in public policy or institutional policy

**Program Development**—Organization responsible for or contributes to program development, including establishing program infrastructure, program management, community mobilization, grant seeker/manager, program evaluation.

**Implementation**—Organization responsible for or contributes to executing program, specifically for recipients of the intervention

**Resources**—Organization providing technical assistance and resources to aid in program development and implementation. These can be funding organizations.

Current Efforts

<b>Intervention</b>	<b>Implementing Partner</b>	<b>Target Population</b>	<b>Location</b>
Food Pantry and Food Distribution	Angel Food Ministry/ Whatcoat United Methodist Church	Low-income residents	Kent County Camden, DE
Food Pantry	Lake Forest School District	Students and Families	Kent County Felton, DE
Food Pantry	Modern Maturity Center	Seniors	Kent County Dover, DE
Healthy Corner Store Initiative	Nemours HPS Food Trust	Low-income residents	New Castle County Wilmington, DE
Community/ School Gardens	Lake Forest School District	Students	Kent County Felton, DE
Community/ School Gardens	Delaware Center of Horticulture and the Delaware Urban Farm and Food Coalition	Not specific	New Castle County
Community/ School Gardens	Healthy Food for Healthy Kids	Students	New Castle County

Food Access Model

Figure 8 depicts the interconnectedness of the different components in improving healthy food access and affordability. There are many organizations that fit the role in one or more of these components.





Figure 8 Components to Improving Healthy Food Access through a Food Access Model

### Intervention Examples Applying the Food Access Model

#### *Food Pantries*

There are several existing food pantries in Kent County, including Lake Forest High School, Angel Food Ministries at Whatcoat United Methodist Church, and Modern Maturity Center.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>•Caesar Rodney School District</li> <li>•Churches</li> <li>•Delaware Department of Health and Human Services</li> <li>•Kent General</li> </ul>	<ul style="list-style-type: none"> <li>•Food Bank of Delaware</li> <li>•Grocers</li> <li>•Fruit and Vegetable Growers Association</li> </ul>	<ul style="list-style-type: none"> <li>•Communities in Schools</li> <li>•Food Bank of Delaware</li> <li>•Delaware Division of Public Health</li> </ul>	<ul style="list-style-type: none"> <li>•Caesar Rodney School District</li> <li>•Catholic Charities</li> <li>•Delaware Department of Health and Human Services</li> <li>•Kent General</li> </ul>	<ul style="list-style-type: none"> <li>•Food Bank of Delaware</li> <li>•Harry K Foundation</li> </ul>

Food Pantries can be implemented at local churches, schools, state service centers (via SNAP program) and public health clinics (via WIC program), and the hospital.

### *Produce Carts*

New Castle County's Produce Cart program in Wilmington via Food Trust can serve as a model for Kent County.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>•City/County Planning</li> </ul>	<ul style="list-style-type: none"> <li>•Kraft</li> <li>•Fruit and Vegetable Growers Association</li> </ul>	<ul style="list-style-type: none"> <li>•Economic Development Office</li> <li>•Delaware Division of Public Health</li> <li>•Nemours HPS</li> <li>•Dover/Kent MPO</li> <li>•Cooperative Extension</li> </ul>	<ul style="list-style-type: none"> <li>•Schools</li> <li>•Food Trust</li> <li>•Community Centers</li> </ul>	<ul style="list-style-type: none"> <li>•Food Trust</li> <li>•Harry K Foundation</li> <li>•Nemours HPS</li> <li>•USDA</li> <li>•Chamber of Commerce</li> </ul>

### *Local Food Distribution Hub*

A local food distribution hub offer flexible uses depending on the needs and resources in the community. Hubs can support local food procurements, community gardens, and farmers' markets.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>•City/County Planning</li> <li>•Delaware Department of Agriculture</li> </ul>	<ul style="list-style-type: none"> <li>•Delaware Department of Agriculture</li> <li>•Fruit and Vegetable Growers Association</li> <li>•Food Bank of Delaware</li> </ul>	<ul style="list-style-type: none"> <li>•Delaware Department of Agriculture</li> <li>•Cooperative Extension</li> <li>•Delaware Division of Public Health</li> <li>•Delaware Center for Horticulture</li> <li>•Dover/Kent MPO</li> </ul>	<ul style="list-style-type: none"> <li>•Delaware Department of Agriculture</li> <li>•Delaware Division of Public Health</li> </ul>	<ul style="list-style-type: none"> <li>•USDA</li> <li>•Harry K Foundation</li> </ul>

Figure 9 displays an example of how a local food hub can be applied to a community.

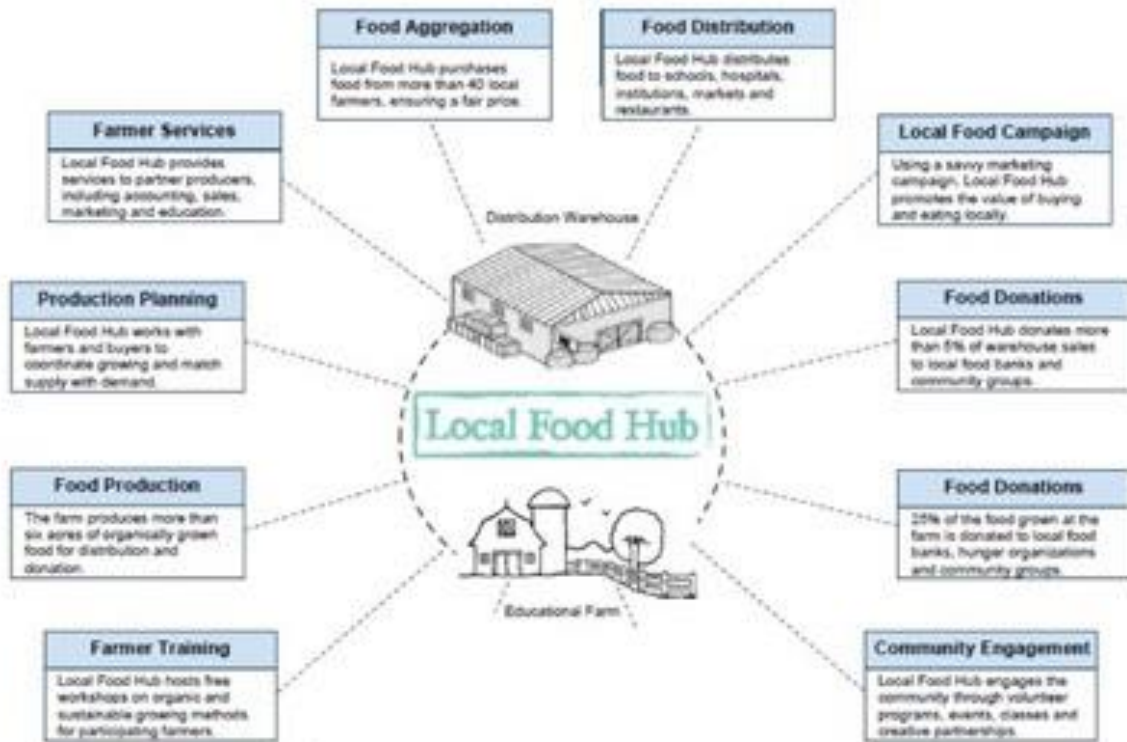


Figure 9 Example of uses for a Local Food Hub. Source: [www.localfoodhub.org](http://www.localfoodhub.org)

### Local Food Procurement

Many public facilities can procure locally-sourced foods. This reduces transportation and distribution costs, and increase local economy.

### Hospital Example

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>•Kent General</li> </ul>	<ul style="list-style-type: none"> <li>•Fruit and Vegetable Growers Association</li> </ul>	<ul style="list-style-type: none"> <li>•Delaware Division of Public Health</li> <li>•Kent General</li> </ul>	<ul style="list-style-type: none"> <li>•Kent General</li> </ul>	<ul style="list-style-type: none"> <li>•USDA</li> </ul>

### Schools Example

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>•Schools</li> </ul>	<ul style="list-style-type: none"> <li>•Fruit and Vegetable Growers Association</li> <li>•School gardens</li> </ul>	<ul style="list-style-type: none"> <li>•Delaware Division of Public Health</li> <li>•Healthy Foods for Healthy Kids</li> </ul>	<ul style="list-style-type: none"> <li>•Schools</li> </ul>	<ul style="list-style-type: none"> <li>•Farm to School Program (USDA)</li> </ul>

### *School Gardens*

School Gardens are opportunities to educate youth on various skills and knowledge including healthy eating habits, understanding food sources and agriculture practices.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>• Schools</li> <li>• City/County planning</li> </ul>	<ul style="list-style-type: none"> <li>• Fruit and Vegetable Growers Association</li> </ul>	<ul style="list-style-type: none"> <li>• Healthy Foods for Healthy Kids</li> <li>• Communities in Schools</li> <li>• Schools</li> <li>• Cooperative Extension</li> </ul>	<ul style="list-style-type: none"> <li>• Schools</li> </ul>	<ul style="list-style-type: none"> <li>• USDA</li> <li>• Harry K Foundation</li> <li>• Nemours HPS</li> </ul>

### *Community Gardens*

Kent County has a comprehensive and active community garden network.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>• Housing Authorities</li> <li>• City/County planning</li> </ul>	<ul style="list-style-type: none"> <li>• Fruit and Vegetable Growers Association</li> </ul>	<ul style="list-style-type: none"> <li>• Delaware Center for Horticulture</li> <li>• Dover/Kent MPO</li> <li>• Cooperative Extension</li> </ul>	<ul style="list-style-type: none"> <li>• Senior Center</li> <li>• Housing Authorities</li> <li>• Community Centers</li> </ul>	<ul style="list-style-type: none"> <li>• USDA</li> <li>• Harry K Foundation</li> </ul>

### *Food Waste Community Re-Entry*

For grocery stores, there are much waste as a result of consumer-related purchasing practices in desiring aesthetically appealing produce. However, what is wasted are often edible and safe for community consumption.

Policy Change	Supplier	Program Development	Implementation	Resources
<ul style="list-style-type: none"> <li>• Schools</li> </ul>	<ul style="list-style-type: none"> <li>• Grocers</li> </ul>	<ul style="list-style-type: none"> <li>• Delaware Division of Public Health</li> <li>• Nemours HPS</li> </ul>	<ul style="list-style-type: none"> <li>• Schools</li> <li>• Hospitals</li> <li>• Food Pantries</li> </ul>	<ul style="list-style-type: none"> <li>• US EPA</li> </ul>