



The Kansas City Physical Activity Plan Playbook

ACKNOWLEDGMENTS

The Kansas City Physical Activity Plan is generously supported by the Enid and Crosby Kemper Foundation and the Health Resources and Services Administration Region VII. The Kansas City Physical Activity Playbook represents the first year of convening and organizing around the strategies and priorities that can improve rates of physical activity for all people living in the Kansas City region. A very special thank you to the members of the Core Work Group, who have helped to lead and organize the KCPA Plan and edited this KCPA Playbook.

SUGGESTED CITATION

Kansas City Physical Activity Plan Core Work Group, The 2020 Kansas City Physical Activity Plan Playbook, Kansas City, MO, USA, 2020.

ELECTRONIC ACCESS

All information about the Kansas City Physical Activity Plan can be found at https://www.kcphysicalactivityplan.org

CONTACT

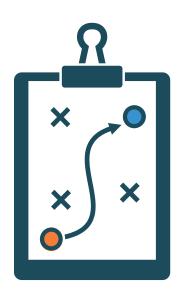
If you have any questions about the KCPA Plan, please contact Weighing In at weighingin@cmh.edu

THE KANSAS CITY PHYSICAL ACTIVITY PLAN PLAYBOOK

The Kansas City Physical Activity Plan Playbook (KCPA Playbook) is a brief overview of the strategies and priorities that the Kansas City region should consider adopting to foster a culture of active living.

The KCPA Playbook is intended to serve as an easy to understand introduction to the full KCPA Plan, available in early 2021.

The KCPA Playbook is organized by societal sector, with each section including a Sector Overview followed by **Strategies** (representing the goals for each sector) and **Priorities** (tactics to implement the strategies).



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VISION AND BACKGROUND

The vision of the Kansas City Physical Activity Plan (KCPA Plan) is to foster a culture of physically active lifestyles in our region. The KCPA Plan is a comprehensive set of Kansas City-focused, sector-specific strategies and priorities designed to increase physical activity with residents of all ages. The KCPA Plan was developed by a coalition of over a hundred individuals and organizations through 56 meetings that were held throughout 2020.

The KCPA Plan follows the lead of the National Physical Activity Plan and is organized using similar societal sectors. The KCPA Plan itself is a living document, and will be updated on an ongoing basis to respond to the physical activity needs of the Greater Kansas City community.

The information provided in the KCPA Playbook includes strategies and priorities developed through discussions and planning that took place throughout 2020. The KCPA Playbook is designed to be used as a quick and easy way to communicate the primary messages of the KCPA Plan. Additional information on the process used to develop the KCPA Plan and specific action items will be available in the full KCPA Plan document to be released in Spring 2021.

The KCPA Plan is organized for the following purposes:

- To make a collective statement that physical activity is a public health priority in KC;
- To establish a multi-sector coalition to advocate for KCPA Plan strategies and priorities; and
- To create an implementation framework for the strategies and priorities in the KCPA Plan.

The KCPA Plan also has three overarching objectives to strengthen the KC region's ability to implement the KCPA Plan's strategies and priorities:

- Increase local funding for physical activity initiatives;
- Comprehensive surveillance of relevant physical activity metrics that monitor compliance with guidelines, environments, policies, and programs associated with physical activity;
- Develop and disseminate, at regular intervals. the Kansas City Regional Report Card on Physical Activity for Children and Youth (KCPA Report Card). The first edition of the KCPA Report Card was released in 2020 and can be found at <u>kcphysicalactivityplan.org</u>.

SOCIETAL SECTORS

The KCPA Plan is comprised of strategies and priorities for each of the following ten societal sectors. During 2020, the following sectors convened: Healthy Schools, Early Childhood, Infrastructure, Healthcare, Faith-Based Settings, and Parks and Recreation. In 2021, the following sectors will convene: Public Health, Business, Sports, and Media.

To join a sector, please contact Weighing In at weighingin@cmh.edu













PARKS AND RECREATION





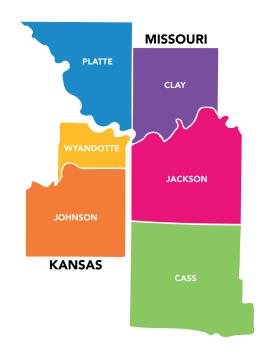






THE KC REGION

The KCPA Plan focuses on the six counties that make up the majority of the Kansas City metropolitan area: Jackson, Clay, Cass and Platte Counties in Missouri, and Wyandotte and Johnson Counties in Kansas.



GUIDING PHILOSOPHY

- The KCPA Plan is based on the idea that physical activity behavior is influenced by a host of factors operating at the individual, family, institutional, community and policy levels.
- The KCPA Plan consists of strategies and priorities that are supported by evidence, including controlled research studies and best practices.
- While other behaviors such as promoting healthy eating and reducing sedentary time is important, the focus of this plan is identifying strategies to ensure residents will obtain the recommended levels for physical activity.

GUIDING PRINCIPLES

The KCPA Plan engages with the societal sectors known to influence physical activity. Each Sector Work Group represents those sectors, and is working towards identifying shared priorities in the Kansas City region that promote physical activity and address at least one of the four KCPA Plan guiding principles:

- 1. Equitable access to safe places for physical activity;
- 2. Evidence-based approaches;
- 3. Community-informed strategies; and
- 4. Systems-wide policy and environmental change.

THE CORE WORK GROUP

To organize and facilitate planning efforts for the KCPA Plan, the Core Work Group was formed with lead partners from multiple sectors. The Core Work Group includes Sector Leads who have coordinated with Weighing In to co-develop the KCPA Plan, engage sector partners, and lead the prioritization process within their respective sectors. The KCPA Playbook represents the collective efforts of their leadership in each of the six sectors represented.

WEIGHING IN

Weighing In, a program of the Center for Children's Healthy Lifestyles & Nutrition at Children's Mercy, is the backbone organization for the KCPA Plan. Weighing In has a long history of convening and connecting partners across the region around the promotion of children's healthy lifestyles. Weighing In collaborates with partner organizations to provide services at all levels of the socio-ecological model, and the KCPA Plan is an extension of this work.

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HEALTHY SCHOOLS

SECTOR OVERVIEW:

School is the central focus of daily life for most children in the Kansas City region. About half of children's physical activity occurs at school, on average. Yet, the amount of physical activity children accrue at school can vary drastically across schools. Thus, children who accrue little physical activity at school often have low overall levels of physical activity.

The school setting can play a significant role in public health initiatives related to physical activity. School-based personnel, such as teachers, administrators, and other staff, as well as education decision makers and policy leaders can significantly affect the development and delivery of comprehensive physical activity programming that impacts all students.

The goals of the Healthy Schools Sector Work Group are to increase adoption of programs and policies rooted in best practices and increase access to physical activity and quality physical education in schools. For the KCPA Playbook, the Healthy Schools Sector Work Group has chosen to focus on three specific strategies from the National Physical Activity Plan.



The Sector Work Group is led by Michelle Dake from KC Healthy Kids, with the assistance from Stephanie Dickson, physical education instructor, and Robyn Stuewe from Midwest Dairy.

STRATEGIES:

- States, regional partners, and schools should support adoption of the Comprehensive School Physical Activity Program model.
- 2. States, regional partners and schools should provide training and professional development to prepare educators to deliver effective physical activity programs for all students.
- 3. Schools and regional partners should develop and advocate for policies that promote physical activity among all students.

Strategy 1

Healthy Schools

States, regional partners, and schools should support adoption of the Comprehensive School Physical Activity Program model.



PRIORITIES:

- 1. Support schools in adopting and implementing the Comprehensive School Physical Activity Program (CSPAP) model through state and regional training, resources, family engagement and advocacy.
- 2. Provide professional development on the CSPAP model at the state, regional, district, and school levels.
- 3. Support schools in adopting regional high priority best practices from the CSPAP model, related to active transportation (Safe Routes to School) and increased student physical activity throughout the school day (activity breaks, activity clubs, quality PE instruction and assessment).

Strategy 2

Healthy Schools

States, regional partners and schools should provide training and professional development to prepare educators to deliver effective physical activity programs for all students.



PRIORITIES:

- Prepare physical education teachers to assume the role of school physical activity director, in order to coordinate programs that are consistent with the Comprehensive School Physical Activity Program model.
- 2. Provide school staff with professional development on provision of physical activity programs that are safe, developmentally and culturally appropriate, and support equitable opportunities for physical activity for all students.
- 3. Prioritize professional development related to physical activity breaks, PE instruction/assessment and active transportation (regional high priority best practices from the CSPAP model).

Strategy 3

Healthy Schools

Schools and regional partners should develop and advocate for policies that promote physical activity among all students.



PRIORITIES:

- Advocate for the enactment of federal and state policies that establish physical education as a component of a "wellrounded education."
- 2. Encourage policy makers to establish statewide policies in Kansas that require elementary schools to provide daily recess to all students. Encourage policy makers to strengthen state-wide policies in Missouri that require elementary schools to provide daily recess to all students.
- 3. Support adoption of policies requiring that students at all levels be given physical activity breaks during the school day.
- 4. Educate administrators and other key stakeholders about the beneficial effects of physical activity on learning and lifelong health.

EARLY CHILDHOOD

SECTOR OVERVIEW:

Targeting children birth through five, the early childhood sector has the opportunity to intervene during a critical window of child development. Most young children spend time in care outside of their homes, making the early care and education (ECE) setting an important focus for physical activity promotion, policy and environmental change.

Early childhood providers play a critical role in creating policies and enacting best practices for physical activity in young children, as well as engaging families in physical activity opportunities.

Strategies and Priorities for the Early
Childhood Sector Work Group mirror the
National Physical Activity Plan, with an
emphasis on opportunities that align with
state and regional quality improvement and
training efforts.



The Early Childhood Sector Work Group is led by early childhood consultant Rhonda Erpelding, with assistance from Lori Lanter, from Child Care Licensing at the Unified Government Public Health Department.

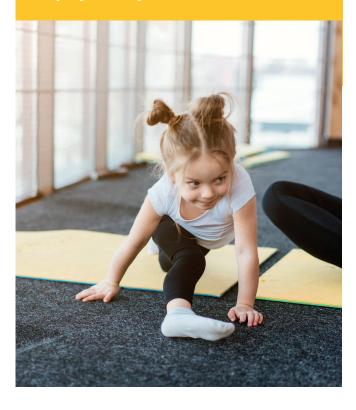
STRATEGIES:

- 4. State and regional partners should adopt standards for early childhood education (ECE) settings to ensure that children are appropriately physically active.
- 5. State and regional partners should provide professional development to ensure effective implementation of physical activity standards and best practices.
- 6. State and regional partners should share and promote high priority best practices for physical activity in ECE settings.
- 7. Early childhood providers should include physical activity resources and opportunities within family engagement efforts at the regional or program levels.

Strategy 4

Early Childhood

State and regional partners should adopt standards for early childhood education (ECE) settings to ensure that children are appropriately physically active.



PRIORITIES:

- Partner with ECE providers to identify highpriority model physical activity licensing standards.
- 2. Create evidence-based documents for professional and public use in advocating for childcare licensing regulations and early learning standards to include model physical activity standards.
- Advocate for childcare licensing regulations to include model physical activity standards.

Strategy 5

Early Childhood

State and regional partners should provide professional development to ensure effective implementation of physical activity standards and best practices.



PRIORITIES:

- Collaborate with regional partners to provide ongoing professional development about physical activity in ECE settings that aligns with best practices and standards.
- 2. Advocate to include professional development on physical activity in state licensing regulations, and work with state partners to ensure accessible and appropriate training exists in the region.
- 3. Advocate for regional and state trainings to include technical assistance/coaching, curriculum and ongoing supports for ECE settings to implement best practices and standards.

Strategy 6

Early Childhood

State and regional partners should share and promote high priority best practices for physical activity in ECE settings.



PRIORITIES:

- Compile and disseminate documents that present examples of regional priority best practices, including rationale and implementation recommendations by age group.
- 2. Collaborate with state and regional partners to promote and expand ECE program participation in quality initiatives that support physical activity best practices. (such as Missouri Move Smart, Kansas Links to Quality, and Missouri and Kansas Go NAP-SACC initiatives).
- 3. Incorporate physical activity best practices within regional and state quality initiatives (such as Mid-America Regional Council's (MARC) Early Learning Profile Program, state quality rating systems, and state early learning standards.)

Strategy 7

Early Childhood

Early childhood providers should include physical activity resources and opportunities within family engagement efforts at the regional or program levels.



PRIORITIES:

- Discuss physical activity with families as part of existing family health assessments or goal setting in settings such as Head Start, home visiting, WIC, or healthcare visits.
- Collaborate across sectors to ensure families have connections to resources and strategies for physical activity.
- 3. Include physical activity within existing family engagement efforts in ECE settings (i.e., parent cafes, family events, family education, parent councils, etc.).

INFRASTRUCTURE

SECTOR OVERVIEW:

A community's built environment can greatly impact a person's ability to be physically active. Whether going on a bicycle ride or walking to the grocery store, infrastructure can encourage or limit physical activity. Done poorly, it can also serve as a barrier that prevents children and adults from getting their recommended amount of physical activity each day.

The Infrastructure Sector Work Group represents three overlapping societal sectors called for by the National Physical Activity Plan: Transportation, Land Use and Community Design.

The Infrastructure Sector Work Group also recognizes that public-facing community engagement is critical due to the sensitive context and concerns around sustainability for infrastructure improvements.



The Infrastructure Sector Work Group is led by Laura Steele from BikeWalkKC and Maggie Green from KCMO Public Works.

STRATEGIES:

- 8. Community partners should regularly collect information on active transportation and measure its impact on health equity and population health to advocate for increased funding toward bicycle and pedestrian infrastructure.
- 9. Transportation and public health agencies should work to implement initiatives to encourage, reward, and require more walking, bicycling, and transit use for routine transportation.
- 10. Community planners should integrate active design principles into land-use, transportation, community, and economic development planning processes.

Strategy 8

Infrastructure

Community partners should regularly collect information on active transportation and measure its impact on health equity and population health to advocate for increased funding toward bicycle and pedestrian infrastructure.



PRIORITIES:

- 1. Transit authorities, community planners, and pedestrian advocacy organizations should collaborate with local neighborhood organizations to collect data on active transportation that is representative and accessible to all communities within the Kansas City region.
- 2. Active transportation coalitions across the KC region should develop shared goals and metrics to track their progress.

Strategy 9

Infrastructure

Transportation and public health agencies should work to implement initiatives to encourage, reward, and require more walking, bicycling, and transit use for routine transportation.



PRIORITIES:

- Invite community participation to provide feedback on ways to improve existing infrastructure through short-term physical activity events.
- Prioritize neighborhood connectivity and walkability for seniors and youth through small neighborhood parks.
- 3. Invite neighborhood seniors and youth to participate in infrastructure planning efforts through the use of walking guides and toolkits to better assess existing conditions and advocate for improvements.

Strategy 10

Infrastructure

Community planners should integrate active design principles into land-use, transportation, community, and economic development planning processes.



PRIORITIES:

- Prioritize the implementation of existing infrastructure plans that can improve public health.
- 2. Create safe opportunities for physical activity by connecting vacant lots, infrastructure maintenance, and road safety to create beautiful places to walk within existing neighborhoods.

PARKS AND RECREATION

SECTOR OVERVIEW:

The Parks and Recreation Sector Work Group emphasizes accessible facilities, spaces, and services that are available at low or no cost to residents.

This Sector includes the environments, programs, and services that are provided by non-profit and local government, such as community centers, public parks, trails, and open spaces. The priorities of this Sector Work Group benefit all ages and populations across the Kansas City region.

Opportunities for alignment exist both within the Sector Work Group and with other sectors. Alignment can also be found through ongoing community health initiatives that prioritize equitable access to parks and trails.



The Parks and Recreation Sector Work Group is led by Roosevelt Lyons and Jen Jutte from KCMO Parks and Recreation.

STRATEGIES:

- 11. Parks departments, recreation centers, and community partners should develop new park programs that support physical activity opportunities for all residents.
- 12. Parks departments and community partners should track the participation in community-based physical activity programs to better engage with all audiences.
- 13. Parks and recreation, business and community organizations should advocate for sustainable funding to improve the availability of safe, clean, and affordable physical activity for all residents.

Strategy 11

Parks and Recreation

Parks departments, recreation centers, and community partners should develop new park programs that support physical activity opportunities for all residents.



PRIORITIES:

- 1. Build cross-sector partnerships to promote physical activity in public parks.
- 2. Reimagine public parks as a "third choice" amenity, where they are recognized as welcoming alternative places for families and communities to gather, other than their work or home.
- 3. Engage with local, environmental conservation organizations and invite them to be partners in increasing physical activity in parks.

Strategy 12

Parks and Recreation

Parks departments and community partners should track the participation in community-based physical activity programs to better engage with all audiences.



PRIORITIES:

- Collect data through the use of innovative tools, with a focus on specific areas and community groups.
- 2. Use data to better engage with audiences and highlight the purpose or mission of the organization through storytelling.

Strategy 13

Parks and Recreation

Parks and recreation, business and community organizations should advocate for sustainable funding to improve the availability of safe, clean, and affordable physical activity for all residents.



PRIORITIES:

These are a few key ways that the KCPA Parks and Recreation Sector Work Group thinks this strategy can be achieved locally:

- Build partnerships between parks and recreation organizations and local businesses and health organizations to attract sustainable funding sources.
- 2. Connect parks with neighborhoods through sidewalk infrastructure investments.
- 3. Highlight the disparity in amenities between neighborhood parks and promote more equitable investment strategies.

FAITH-BASED SETTINGS

SECTOR OVERVIEW:

The Faith-Based Settings Sector Work Group is designed to include diverse religious organizations, including religious congregations or houses of worship, organized religious denominations, faith-based social service agencies, and faith-based charities. The inclusive mission of faith-based settings, combined with their broad reach across diverse communities, makes religious congregations well-positioned to play an important role in improving rates of physical activity.



Like worksites and schools, faith-based organizations have unique social systems, physical environments, communications, policies and practices, and health-related goals that make them conducive to promoting physical activity. The Sector Leads include Rev. Eric Williams from the Clergy Response Network, and Carole Bowe Thompson from the Health Equity Institute at UMKC.

STRATEGIES:

- 14. Faith-based organizations should identify effective uses of their health ministries to promote physical activity.
- 15. Faith-based organizations should establish cross-sector partnerships to promote and deliver physical activity programs consistent with and tailored for diverse groups of constituents aligning with their values, beliefs, and practices.
- 16. Faith-based organizations should create long-term plans that include promoting physical activity programs for their congregation and residents in communities they serve.

- 17. Faith-based organizations should identify and/or develop marketing materials to better understand the importance of physical activity that are tailored to the congregants and communities they serve.
- 18. Physical activity and public health organizations should develop and maintain an electronic resource of proven and well established (evidence-based and best practice) physical activity programs for faith-based organizations to access for reference and implementation.

Strategy 14

Faith-Based Settings

Faith-based organizations should identify effective uses of their health ministries to promote physical activity.



PRIORITIES:

- Identify the individuals and groups who will lead implementation of physical activity promotion strategies in faith-based settings.
- 2. Establish, if necessary, health ministries that are consistent with the faith community's religious beliefs to promote physical activity among the faith community.
- 3. Create an environment supportive of physical activity by delivering proven and well-established (evidence-based and best practice) physical activity messaging and programs that are consistent with the faith community's religious beliefs.

Strategy 15

Faith-Based Settings

Faith-based organizations should establish cross-sector partnerships to promote and deliver physical activity programs consistent with and tailored for diverse groups of constituents aligning with their values, beliefs, and practices.



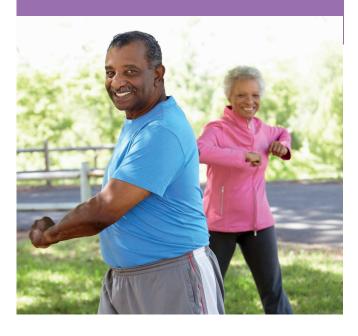
PRIORITIES:

- Foster relationships between collaborators to engage in equitable and trustworthy partnerships.
- 2. Collaborate with local healthcare delivery systems, academic institutions (e.g., undergraduate and graduate kinesiology programs, public health) and other local faith-based organizations to develop and implement inclusive physical activity programs and to provide technical assistance and expertise when requested.
- 3. Support planning and implementation of physical activity programs that use existing infrastructures, such as ministerial organizations and interfaith coalitions.

Strategy 16

Faith-Based Settings

Faith-based organizations should create long-term plans that include promoting physical activity programs for their congregation and residents in communities they serve.



PRIORITIES:

- Train and prepare clergy and ministry leaders to see the value of and advocate for physical activity planning in their faithbased organizations and in communities they serve.
- Communicate with clergy and ministry leaders regarding the importance of incorporating physical activity into existing programs.
- 3. Support existing health ministries and meeting groups already present in faithbased organizations, such as youth, women's, and men's groups who seek to promote and incorporate physical activity.

Strategy 17

Faith-Based Settings

Faith-based organizations should identify and/or develop marketing materials to better understand the importance of physical activity that are tailored to the congregants and communities they serve.



PRIORITIES:

- Develop materials that link physical activity programs to other activities, such as prayer and study groups.
- Encourage clergy leaders, including existing cross-faith organizations and committees, to incorporate religiously and culturally tailored physical activity messages in their communications.
- 3. Support the development of messages from all religions and denominations that demonstrate how scripture, religious doctrine, and practices can support and encourage engagement in physical activity and other positive health behaviors.

Strategy 18

Faith-Based Settings

Physical activity and public health organizations should develop and maintain an electronic resource of proven and well established (evidence-based and best practice) physical activity programs for faith-based organizations to access for reference and implementation.



PRIORITIES:

- 1. Identify proven and well-established
 (evidence-based and best practice)
 physical activity resources in collaboration
 with faith-based leaders and lay
 community members for faith-based
 organizations to access electronically.
- 2. Promote the electronic resource to existing faith-based organizations through social media, email lists, and other outlets.
- 3. Support faith-based organizations to implement physical activity programs at multiple levels, including individual, family, faith-based organization, and community.

HEALTHCARE

SECTOR OVERVIEW:

The Healthcare Sector Work Group is working to increase physical activity among the Kansas City population. The Healthcare Sector Work Group has a unique opportunity to reach many patients and families throughout the Kansas City region to promote physical activity and healthy lifestyle choices through in-person and TeleHealth visits with healthcare professionals.

Successful implementation of the Healthcare Sector plan will require healthcare systems, practicing healthcare providers, and learners to recognize, embrace, and adopt physical activity promotion as a key strategy to improve population health and reduce the overall financial burden of healthcare for all.

The patients and families we serve will be the priority for the Healthcare Sector Work Group. The Healthcare Sector Work Group is led by Dr. Jodi Dickmeyer.



STRATEGIES:

- 19. Healthcare systems should partner with other sectors to promote access to evidence-based physical activity-related services and to reduce health disparities.
- 20. Healthcare systems should increase the priority of physical activity assessment, advice, and promotion.
- 21. Healthcare providers and professional societies should recognize that physical inactivity and insufficient physical activity are treatable and preventable conditions with profound health and cost implications.
- 22. Universities, post-graduate training programs, and professional societies should include basic physical activity education in the training of all healthcare professionals.

Strategy 19

Healthcare

Healthcare systems should partner with other sectors to promote access to evidence-based physical activity-related services and to reduce health disparities.



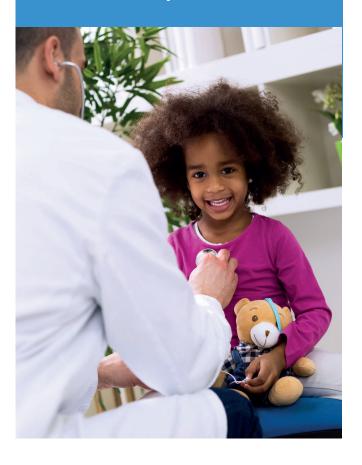
PRIORITIES:

- 1. Develop partnerships with community organizations to promote safe and equitable access to opportunities to walk, bicycle, swim, and play outdoors and access to active transportation to expand opportunities for recreational activity.
- 2. Partner with other sectors and providers of community physical activity services to form referral networks that increase opportunities for physical activity and ensure equal access of their patients to community resources.
- 3. Reduce financial barriers to use of community physical activity services by including reimbursement and/or sponsorship to community providers as part of healthcare benefit packages, including funding of programs likely to reach diverse populations in the community and subgroups with lowest levels of physical activity.
- Support the capacity of school-based health clinics and programs to promote physical activity.

Strategy 20

Healthcare

Healthcare systems should increase the priority of physical activity assessment, advice, and promotion.



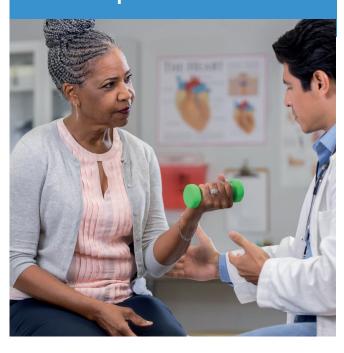
PRIORITIES:

- Make it a normal practice to assess and discuss physical activity at every routine patient encounter and document it in the patient's chart.
- 2. Integrate a physical activity plan into every routine patient encounter and document it in the patient's chart.
- 3. Encourage healthcare professionals to be role models for active lifestyles for patients.

Strategy 21

Healthcare

Healthcare providers and professional societies should recognize that physical inactivity and insufficient physical activity are treatable and preventable conditions with profound health and cost implications.



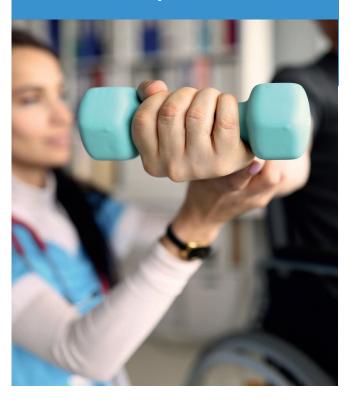
PRIORITIES:

- 1. Expand the evidence on the costeffectiveness of promoting physical activity
 in inactive patients with and without chronic
 disease, including evidence on the effect of
 therapeutic physical activity for existing
 conditions on patient outcomes and costs of
 care.
- Embed physical activity promotion in clinical guidelines where sufficient evidence exists for both positive health and cost outcomes.
- 3. Ensure that priority is given to treatment of physical inactivity in population groups with the lowest levels of physical activity.

Strategy 22

Healthcare

Universities, post-graduate training programs, and professional societies should include basic physical activity education in the training of all healthcare professionals.



PRIORITIES:

- Include basic physical activity education during assessment, brief counseling, and referrals as part of the required curriculum in medical school.
- 2. Foster health professional student interest in physical activity.
- 3. Provide an array of evidence-based curricular resources to support physical activity education throughout all health professional training
- Include physical activity content in continuing education professional development for all health professionals.



Learn more at

KC PHYSICAL ACTIVITY PLAN.ORG