

Rooting Food As Medicine in Healthcare

A Toolkit for Primary Care Clinics and other Healthcare Settings



Worksheet 2: Models of Intervention

Example #1: Pop-Up Food Pharmacy Logistics & Roles

Pop-Up Food Pharmacies

Tips and Best Practices in Alameda County

Step 1: Supplies Needed



- 4-5 tables
- 1-2 baskets to display available food items
- Grocery bags
- Recipes
- Large coolers with ice (for perishable items to be stored)
- Other information/resources you want to distribute
- Table cloths
- Area for cooking demo (if needed)



Display baskets
Plastic food bags

Step 2: Packing Food 2-4 volunteers



1. The dried goods are best packed in reusable bags
2. Reusable bags can also hold the proteins (perishable items should be packed closer to start of distribution)
3. Plastic or paper bags (double bagged) should be available to pack fruits and vegetables
4. Based on amount of food you have available, patients may be given choice to take what they want OR you can pack a set amount of food



Grocery bags

Step 3: Table Set Up



- 1 table for baskets showing the kind of produce people will be getting
- 2 tables for bags that will be distributed to patients
- 1 table for recipes, resources, food champions displays
- 1 table for Cal Fresh enroller



Resource table

Step 4: Distribution 4-5 volunteers



1. 1-2 volunteers to greet participants and collect any necessary data
2. 1-2 to volunteers to hand out packed bags
3. 1 volunteer to help with distribution of unpacked items, such as fruits and vegetables
4. 1 roaming volunteer to help with questions and problems as they arise



Fresh produce
distribution option: Take as much
as you need

Step 5: Clean Up 3-4 volunteers

- Put away the tables, coolers, pack up any materials
- Decide how to distribute remaining food

Additional Notes

If you are contracting with a local grower that have CSA boxes, you will need a table for that to be displayed with information on how people can obtain home delivery of these boxes.

If you are able, provide consistent volunteers, with gift certificates.

It is important that at least some of your volunteers be health center staff so that participants understand the pharmacy's connection to your clinic.

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Worksheet 2: Models of Intervention

Example #2: CSA Boxes Logistics & Roles

Prescribing Community Supported Agriculture (“CSA Boxes”) Tips and Best Practices in Alameda County

Step 1 Who are your CSA partners?



- When choosing your partnering farm, make sure that their usual delivery range includes where your patient population lives.
- An ideal CSA partner is a farm that participates in Market Match, which translates to a discount of 50% on the cost of the produce. This makes it more affordable for families to sign up as an independent customer using their own benefits (WIC, SNAP) after your intervention is finished.
- Assess the capacity for your partnering CSA to participate in responsible data-sharing agreement (e.g. MOU).



Step 2 Who will participate?



- Use a clear diet-related diagnosis (e.g. diabetes) in your index patients or a social determinant predisposing to poor diet (e.g. household food insecurity) based on report from index patient or appropriate household member (e.g. parent of pediatric patient on behalf of household)
- Participants must live in delivery range of farm partner

Step 3 What will they get?



- Choose frequency (such as weekly or biweekly deliveries)
- Choose duration (e.g. a total of 12 weekly deliveries)
- Boxes can either have the usual offerings delivered to paying customers or can be tailored to your patient population (i.e. just whole grains and vegetables)
- Boxes can have the same amount of food delivered to paying customers or be customized based on the household size of a patient’s family
- Deliveries are more meaningful if coupled with recipes, cooking videos, and other health education materials to help families use the food in their box

Step 4 How will you measure impact?



- Your index patient will be your key source of outcomes data, especially when they were identified based on a health criteria (e.g. HgbA1c in diabetics), but food delivered to the household will be consumed by others. We recommend that even if index patient for recruitment is a child, data collection also focus on at least some diet-related measures in a consistent adult in the household.
- Data collection should not only include the metrics used to identify participants (e.g. food security) but also some measures of diet. Also consider shopping patterns, preference for foods delivered, and uptake of CSA delivery as a client.



Worksheet 2: Models of Intervention Example #3: Best Practices for Clinic-Based Voucher Programs

Clinic-Based Food Prescription/Voucher Program

Tips and Best Practices in Alameda County

Step 1: Identify Partners



- Identify a local farm or procurer of local foods that can set up a farm stand at your clinic or at another location on designated days.
- Make sure that the grower or procurer you work with has the capacity to regularly staff a farm stand at your clinic, based on the schedule you develop.

Step 2: Identify Participants



- Identify your priority population. For example: will you focus on specific populations with existing health challenges or focus on patients that are food insecure?
- Determine how your clinic will recruit eligible patients. Will it be through medical records, provider observation, or through a screening process such as Hunger Vital Signs?

Step 3: Prepare Resources



- Decide on the monetary value of your vouchers based on your funding. Generally, \$5-\$10 per voucher is sufficient depending on whether participants will be picking up food weekly or biweekly.
- Develop your vouchers with the ability to track which medical providers the vouchers came from.
- If possible, scan the voucher into the electronic medical record.
- Develop your clinic flow to make the voucher distribution smooth. For example, will the role of distributing vouchers be in the hands of the doctor, nurse practitioner, medical assistant, or nutritionist?

Step 4: Distribute and Track



- Make sure your farm partner is able to track which vouchers were redeemed at their stand. This will allow collection of patient outcomes data since this program is patient-specific. Farm stand staff can collect the vouchers from patients and return them to you for internal tracking.
- Note that clinics that have farm stands onsite (rather than at another location) will have higher amounts of redeemed vouchers.

