Veggie RX
CENTRAL OREGON PILOT PROJECT
2019 REPORT
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Bend Farmers Market
Central Oregon farmers
St. Charles Health System
Mosaic Medical

FUNDERS
Central Oregon Health Council
PacificSource Foundation for Health Improvement
Pacific Power
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EXECUTIVE SUMMARY

In 2010 and 2018, the High Desert Food & Farm Alliance (HDFFA) performed Community Food Assessments which identified access to fresh food as a major barrier for food insecure residents. This was further confirmed in their 2017 Nutrition Wellness Assessment which identified that cost was the major barrier to eating fresh food. The majority of healthcare providers interviewed stated that patients would benefit from better nutrition and nutrition education, but only 14% of patients had been referred to a nutrition program.

Food insecurity, defined as the inability to access sufficient and affordable nutritious food, and diet-modifiable disease are correlated: food insecure individuals in Central Oregon are twice as likely to be diagnosed with cardiovascular disease and/or type II diabetes. Across Central Oregon, 16% or 28,000 people are food insecure, with Deschutes County having the highest percentage of individuals who don’t qualify for federal assistance yet experience food insecurity. Attempts to address these issues through nutrition education alone, without economic incentives, have failed to achieve sustained and sufficient vegetable and fruit intake.

HDFFA proposed VeggieRx, a vegetable and fruit prescription program to two funders: Central Oregon Health Council and PacificSource Foundation for Health Improvement, with the goal of addressing food insecurity and increasing intake of fresh produce for the aforementioned target audience. The main outcomes that we aimed for, which were achieved included: 1) increased fresh produce intake; 2) healthy behavior change; 3) community linkages between and among health care providers, patients, HDFFA, and farmers in Central Oregon; and 4) investment in the local food economy.

HDFFA successfully piloted the first fresh food prescription program in Central Oregon from April 2017-February 2018. We connected with over 50 providers who referred more than 300 patients to the program. In eight months, HDFFA created a substantial community network that collectively connected healthcare, community services, and local food to address the needs of food insecure individuals with diet-related diseases(s). The pilot program had a goal of enrolling 66 people, yet a total of 94 participants enrolled with a graduation rate of 78%; the program impacted 87 people and their families, cumulatively 200 people.

Participants were allotted $20 in vegetable and fruit vouchers each week for 8 weeks at two Bend Farmers Market, and an average of $136 of fresh food was provided to each participant. Each week participants received on-site nutrition education by HDFFA’s Community Health Worker (CHW), a Registered Dietitian-Nutritionist (RDN).

Following the program, participants reported that the program was effective in helping them improve their health. Intake of fresh vegetable and fruit consumption increased by 1.3 cups per day; they continued to eat as many vegetables; and prioritized buying vegetables even after program completion.
Participants stated that they highly valued the benefit of fresh food, and collectively, used 97% of prescription vouchers. The program helped to reduce anxiety associated with food insecurity with 33% of participants being less worried about having enough food or money for food during the program. Ninety-five percent (95%) valued the nutrition education component of the program with 33% increasing their knowledge of cooking and food safety, and 60% increasing their ability to stretch their meals using fresh food.

Furthermore, participants valued the social aspect of shopping at the farmers market.

_VeggieRx_ had a positive impact on the local food economy. Farmers made an additional $11,883 in sales from vouchers; increased their sales by an average of 12%; and noticed an increase in customers. The impact on the local food economy, or the ripple effect of purchasing food directly from a local farmer, is $20,676 as determined by using an established Central Oregon multiplier of 1.74.

The majority of referrals (67%) were from health care providers effectively demonstrating HDFFA’s connection to the healthcare community. A total of 37 individual providers referred patients, and 24 of these providers had not been directly contacted by the HDFFA CHW. Most providers verbally referred patients and determined they were eligible because they were food insecure.

Challenges associated with _VeggieRx_ can be addressed in future programming using the identified gaps and recommendations. The main gaps include: the need for a sustainable funding model; a flexible fresh food delivery model that addresses the needs and limitations of the target audience based on community needs; fewer men graduated from the program by percent than women; and eligibility may need to be expanded to serve the target audience.

Overall, this program was deemed successful: it met the goal of improving the health of patients while supporting a healthy and thriving food and farm network in Central Oregon. Participants, farmers and their families were positively affected and providers were enabled to refer their patients to a program that improved patients’ health and access to fresh food. Overall 97% of participants, health care providers, and farmers were satisfied and reported they want the program to continue. This program effectively connected healthcare professionals, community professionals, local farmers, and community members experiencing food insecurity.
Successfully piloted the first VeggieRx program in Central Oregon

- Provided an average of $136 of fresh food to 87 participants
- Connected with 50+ providers, who referred 300+ patients
- Created community linkages among health care, non-profit, participants and farmers to effectively address the needs of food insecure individuals

Effectively helped participants improve their health

- Increased vegetable and fruit intake by 1.3 cups/day
- Continued to eat as many vegetables and prioritized buying vegetables even after program
- Valued fresh food as one of the major benefits of the program
- Experienced the social aspect as a benefit of shopping at the farmers market

Meaningfully benefited food insecure individuals

- Healthcare providers identified food insecure patients and referred them to VeggieRx
- HDFFA provided fresh food to food insecure individuals who can’t typically afford it
- Participants redeemed 97% of vouchers distributed, and 33% were less worried about having enough food/money for food during the program

Enthusiastically learned from HDFFA’s nutrition education curriculum

- 95% valued the nutrition education curriculum
- 60% increased in their ability to stretch their meals using fresh food
- 33% increased in their knowledge of cooking & food safety

Positively impacted the local food economy

- Increased farm sales by $11,883 from farm direct purchases
- Improved farm sales by approximately 12% and noticed an increase in customers
- Invested $20,676 in the local food economy from farm direct purchases

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INTRODUCTION

Healthcare has traditionally been defined as medical services within a hospital, clinic, or medical facility. Recently, social determinants of health, known as economic and social conditions that influence health status, have been declared a national focus by Healthy People 2020. Social determinants include, but are not limited to, financial security, safety, housing, social integration, literacy, and access to healthy food. Because social determinants are correlated with health outcomes, healthcare systems are compelled to serve the patient’s circumstance as well as their medical condition. In Central Oregon, lack of access to healthy food is a persistent and pervasive problem. Furthermore, the lack of adequate and proper nutrition is directly linked to cardiovascular disease, diabetes, and overall wellness.

In 2016, the High Desert Food & Farm Alliance (HDFFA) conducted a Nutrition Wellness Assessment to determine community needs and confirmed that Central Oregonians lack equitable access to healthy food. Cost was identified as a major barrier to eating fresh food. Moreover, 75% of health care providers in the assessment reported that patients would benefit from better nutrition and nutrition education, but only 14% of patients had been referred to a nutrition program. HDFFA identified the need to implement a program for low-income patients with diet-modifiable disease that provided both a subsidy for fresh food and nutrition education. With financial support from the Central Oregon Health Council and PacificSource Foundation for Health Improvement, HDFFA piloted a vegetable prescription program (VeggieRx) in 2018. VeggieRx was designed to create community linkages between health care providers, patients, farmers and HDFFA with the goal of improving the health of patients while supporting a healthy and thriving food and farm network in Central Oregon.

BACKGROUND

In 2016, Feeding America determined that 16% of Central Oregonians, approximately 28,000 people, are food insecure – meaning that individuals may fear running out of food, may skip meals due to financial limitations, or may be limited by regional access to adequate food. Although such individuals and their families may have access to federal support systems like Supplemental Nutrition Assistance Program (SNAP), Women Infants and Children (WIC), and Free/Reduced Lunch programs, many slip through the net of these social systems. Feeding America also determined that 30% of food insecure people in Deschutes County do not qualify for SNAP or other nutrition programs because their income level is too high to qualify but are nevertheless unable to afford fresh healthy foods.
Food insecurity and diet-modifiable diseases are correlated: food insecure individuals in Central Oregon are twice as likely to be diagnosed with cardiovascular disease and/or type II diabetes\(^1\). Increasing fruit and vegetable intake (FVI) can have positive effects on disease states and longevity\(^2\), however, the expense of fresh food has been noted as a limiting factor for many food insecure individuals. A meta-analysis of multiple studies confirms the effectiveness of economic incentives in modifying health behaviors and health outcomes. Specifically, monetary incentives resulted in positive effects on food purchases or food consumption\(^3\) and addressing issues related to the availability of nutritious foods and point of purchase are among the strategies with the strongest evidence for promoting good nutritional behaviors\(^4\). Nutrition education remains a pillar objective for many community wellness programs, plans, and approaches. However, nutrition education alone, without economic incentives, is insufficient to achieve sustained FVI at recommended levels\(^5\).

Prescription vegetable programs have shown promising results in communities in Oregon and across the United States. HDFFA gained insights from the Gorge Grown’s VeggieRx, and Zenger Farm’s CSA Partnerships for Health, Wholesome Wave, and Washtenaw county’s Prescription for Health. Though each prescription vegetable model may vary, the central goal of each is to provide access to fresh food to those who need it. To meet this goal in Central Oregon, HDFFA piloted a program called VeggieRx in 2018 that pairs economic incentives (financial support) for fresh food with nutrition education to create a platform for individuals to make healthy choices while also supporting the local food economy.

**OBJECTIVES**

The main objectives of HDFFA’s VeggieRx pilot were to 1) implement a vegetable and fruit prescription program, 2) provide nutrition education to VeggieRx participants, and 3) create community

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linkages between healthcare, community partners, and VeggieRx participants. For detailed objectives and target measures please see Appendix I.

**HDFFA VeggieRx Model**

In 2018, the High Desert Food & Farm Alliance partnered with providers including physicians, physician assistants, nurse practitioners, nurses, social workers, dietitians, and community health workers from various departments and fields to refer their patients to HDFFA’s VeggieRx program. Participant eligibility criteria included: 1) food insecurity; 2) diet-related disease (cardiovascular disease, type II diabetes, or prediabetes); 3) readiness to commit to the program; and 4) willingness to attend weekly sessions. Food insecurity was determined by participants self-identifying with a) USDA food insecurity questions (Appendix III, IV, V), and/or b) use of Supplemental Nutrition Assistance Program (SNAP), and/or c) income level reported less than $24,000 annually, and/or d) use of the Oregon Health Plan (OHP). Use of OHP was a criterion listed by one of the funders to identify participants that may be at greatest need of the program. One or more diet-related diseases had to be diagnosed by a health care practitioner. Readiness was determined by questions in the eligibility survey (Appendix III).

Ninety-four (94) participants were enrolled June-August 2018 and were split into cohorts for maximized engagement with HDFFA’s VeggieRx Community Health Care Worker (CHW), a registered dietitian-nutritionist (RDN). Participants were allotted $20 in vegetable and fruit vouchers each week for 8 weeks at the Bend Farmers Market with a $25 bonus in the 8th week. Each participant received a maximum of $185 in vouchers over the course of the program if they attended all sessions. Vouchers were redeemable for any fresh vegetables and fruit from 12 participating produce vendors at the market. Vendors opted into the program at the beginning of the market season. Redemption was determined through the dollars distributed to the farmers who submitted their VeggieRx vouchers for reimbursement. Nutrition education was provided weekly, on-site to participants by the CHW. Topics included basic cooking skills, recipes, food safety and storage techniques, importance of variety in FVI, portions, making a balanced meal, seasonally eating, understanding nutrition labels, and thrifty shopping tips. Participants received one-on-one counsel from the CWH about their personal diet if they so desired.

The VeggieRx pilot was funded independently by two primary organizations: PacificSource Foundation for Health Improvement and Central Oregon Health Council. Because the studies were identical in scope, objectives, targets, and implementation, this report represents the combined outcomes.
from both projects as a unit. This approach allows for stronger evaluation conclusions due to the increased numbers of participants and responses to survey questions.

ANALYSES OF HDFFA’s VeggieRx

Outcome measures assessed by our evaluation consultant using a quasi-experimental design with no control. Qualitative and quantitative assessments were performed after all response data from the surveys were tabulated using a combination of Excel, and Prism software programs. Due to the small sample size, descriptive statistics using means, medians, and standard deviations for continuous variables and relative frequency distributions for categorical variables were used to assess efficacy of the program to change behavior as measured using surveys.

FINDINGS OF HDFFA’s VeggieRx

PROGRAM IMPLEMENTATION

Overall, HDFFA considers the 2018 pilot VeggieRx program a success, based upon meeting the 13 of the 16 proposed objectives and target measures. Program implementation occurred April through December 2018, with program assessment completed by the end of February, 2019 (Objective 1).

Ninety-four (94) participants enrolled (Objective 2) in the program. In aggregate, the required number of people to meet each eligibility criterion was reached: food insecurity (n= 84; 89%), OHP users (n= 72; 77%), Type 2 diabetes (T2DM)(n = 62; 66%) and cardiovascular disease (CVD)(n= 53;
53%) (Figure 1). HDFFA reached out and connected with over 50 health care providers throughout program implementation. After the program, providers were surveyed (Appendix II) to gain feedback following program implementation. We estimated that over 300 patients were verbally referred to the program and/or given a VeggieRx prescription flyer (Figure 2).

Following an eligibility screening, HDFFA enrolled 94 people in the VeggieRx program (Figure 2) assuming that attrition would occur. The program occurred June through October at two Bend Farmer’s Markets. Participants were divided into 6 cohorts with an average cohort size of about 15.

This allowed the CHW to engage in a more meaningful way with each participant throughout their program. Cohort start dates were staggered from June to August. Each participant was offered $20 in vouchers for 8 consecutive weeks, with a $25 bonus voucher in week 8. Of the 94 enrolled, 87 attended at least one farmers market session. Participants became graduates of the program by attending 5 or more farmers market sessions, which means they received at least $100 spent on fresh produce and had at least 5 in-person engagements with the CHW. The percentage of graduates was 78% of total participants (Objective 7).

**PARTICIPANT ENGAGEMENT AND RETENTION**

HDFFA determined and addressed obstacles to program utilization and enrolled individuals that considered themselves ready and able to maximize use of the program benefit. Readiness to participate in the program was assessed prior to enrollment through an eligibility survey (Appendix III).

Participants were also asked about obstacles, such as transportation or childcare needs that may have prevented or deterred them from engaging in the program. Transportation was the only identified obstacle from the eligibility survey (Appendix III); reasons included car maintenance, lack of gas money, inability to drive due to mobility, or lack of vehicle. To overcome this obstacle, HDFFA provided Uber rides or gas cards (total of $248.96) to individuals (n=10).
During program implementation, HDFFA’s CHW sent at least two weekly reminder texts to each participant, conversed one-on-one with each participant at the farmers market, and conducted individual calls to engage with participants in an effort to maintain participant retention. Increased frequency of communication was thought to, and likely did, contribute to participant retention.

Ninety seven percent (97%) of distributed vouchers were redeemed (Objective 7) by those who attended the market. This was determined through the reimbursement dollars to the farmer vendors who submitted their VeggieRx vouchers for reimbursement. Several themes were observed within participant retention patterns. Men represented 30 of the 87 participants and 16 of them (53%) completed the program. In contrast, 57 women participated in the program and 49 of them (86%) completed the program demonstrating that women were more likely to complete the program (p<0.01). Self-efficacy and program retention were also assessed; those who completed the program (n=68) versus those who did not (n=19) reported a difference in self-determination and ownership of one’s health choices (Figure 3), as assessed by the pre and post-participation survey (Appendix IV). Additionally, those that completed the program stated similar nutrition goals prior to the program; eating healthier and better, and eating fresh vegetables. The majority of the participants that did not complete the program, but did complete a follow-up survey (n=11), reported obstacles to the program such as physical disability, inability to attend market hours, and inability to have another person pick up their groceries.
The impact of the program on participants was personal to them and had an impact on their lives. They purchased and consumed more fresh food, and improved their diets. Graduates of the program reported consuming more fresh food following participation in VeggieRx. Analyses derived from pre, post, and follow up surveys (Appendices IV, V, and VI, respectively) demonstrated that participants increased their vegetable consumption by 0.63-cups/day and fruit by 0.70-cups/day for a total increase of 1.33 cups of produce per day by the end of the program (n=65) (Figure 4A, Figure 4B) (Objective 5). Participants improved their diets by increasing the number of days per week they ate five or more cups of vegetables and fruits combined (Figure 4C) and by increasing the number of days per month that they ate a balanced meal (Figure 4D).

The Oregon Food Bank validated food insecurity screening questions:

1. Within the past 30 days, did you worry your food would run out before you got money to buy more?
2. Within the past 30 days, did the food you bought just not last and you didn’t have enough money to get more?
Participants (n = 58) maintained their daily consumption of vegetables but not fruit after completing the Veggie Rx program.

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<td>2.43</td>
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<td>Fruits</td>
<td>1.43</td>
<td>2.17</td>
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**Figure 5: Vegetable & Fruit Intake (Cups/day)**

In the 2-month follow-up survey, 26% of graduates reported an increase in their purchases of fresh vegetables as well as an increase in their vegetable intake by an additional 0.2 cups per day over levels reported on the post survey (Figure 5). However, at the 2-month post program time-point, participants decreased their fruit intake acknowledging that while they ate and spent more on produce they could no longer afford to purchase as many as during the program.

One participant expressed in a 2-month follow-up conversation that “vegetables are essential, but fruits are a privilege”. Participants also stated anecdotally that seasonality of vegetables and fruits contributed to a decrease in produce consumption.

The goal of the VeggieRx program was to improve healthy dietary behavior even after program completion. Graduates of the program, during follow-up phone interviews, said they attributed their behavior changes to VeggieRx:

"I try to make it a top priority. When I’m making my grocery list, I try and make the vegetables not the last thing to purchase. Although my funds are still the same I’m much more motivated to buy vegetables after the program."

"I definitely buy more vegetables now, but it’s in place of the cookies and potato chips and ice cream. You know, I'm on a very tight budget. I’m just making priority changes. Fresh foods get expensive. It’s so nice to have the option of local high-quality farms."

A major objective of VeggieRx was to address food insecurity by providing food to participants, and in turn, reducing anxiety around the food insecure experience. To determine if the program helped to decrease participant anxiety about food availability (Objective 6) we asked participants in pre and post program surveys to answer the Oregon Food Bank validated food insecurity screening questions.

**Table: Food Insecurity Screening of Participants Pre/Post Program**

| Within the past 30 days, did you worry your food would run out before you got money to buy more? |
|---------------------------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Often                                             | 37%             | 20%             |                 |                 |                 |
| Sometimes                                         | 42%             | 46%             |                 |                 |                 |
| Never                                             | 22%             | 34%             |                 |                 |                 |

| Within the past 30 days, did the food you bought just not last and you didn’t have enough money to get more? |
|-------------------------------------------------------------------------------------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| Often                                             | 35%             | 20%             |                 |                 |                 |
| Sometimes                                         | 45%             | 43%             |                 |                 |                 |
| Never                                             | 20%             | 37%             |                 |                 |                 |

**Figure 6: Food insecurity screening of participants pre/post program**
(see text box). During the program, 33% of participants experienced a reduction in a) anxiety about food availability and b) lack of money to afford food. Therefore, the program can have an immediate beneficial impact on some participants by decreasing their anxiety around food and providing enough money to prevent participants from running out of food (Figure 6).

Another objective of the VeggieRx program was to increase competence of buying, cooking, and eating fresh foods by participants through a weekly nutrition curriculum designed by the CHW, a RDN (Objective 10). As evidenced by a pre-participation program survey (Appendix IV), participants reported a fairly high baseline level of cooking knowledge. In post program surveys, there was a consistent trend toward increased cooking competency. Yet this positive trend fell short of the 50% improvement target (Figure 7A, 7B). Although the objective was not met, participants anecdotally reported an increase in knowledge and change in cooking and shopping behavior. One participant noted:

“I think it gave me more versatility in my cooking. It stretched me to cook things that were probably healthier that I wouldn’t have bought for myself. When I shop my funds are really limited. I feel better. I feel more confident to work out. To make other lifestyle changes. Once you start feeling better you just want to continue to make healthier changes”.

Another participant highlighted the recurring effort it takes for her to continue making healthy choices;

“It takes decision making each time I’m in the grocery store. Am I going to spend that money or not? Since VeggieRx, I try, I don’t just put things on the counter. I try and do my food prep right after I shop. I’m eating a better variety of foods, especially vegetables, after VeggieRx”.

![Figure 7A](image1.png)  ![Figure 7B](image2.png)

**Figure 7: Change in knowledge pre/post program participation**
The program aimed to increase the understanding of the impact of nutrition on personal health (Objective 8). Program graduates were asked to rate their overall health in pre, post and follow up surveys (n=58). Seventy five percent (75%) of participants rated their health as better after the program compared to the start (Figure 8). Additionally, in response to “Overall, do you think the VeggieRx program was effective in helping you improve your health?”, 95% of participants said the program was extremely or very effective (Figure 9).

Another objective was to connect participants with available nutrition education and assistance resources (Objective 9). Education and community resources covered a wide range of topics such as food safety, healthy eating, and regional solutions to accessing fresh food. Nutrition education materials included information on: balanced meals, eating a variety of produce, healthy portion sizes, increasing vegetable and fruit intake, building a healthy meal, importance of sleep and exercise, reading nutrition labels, shopping healthy on a budget, seasonal eating, and cooking skills. HDFFA’s VeggieRx nutrition curriculum also included recipes that weaved cooking skills into them; creating salads, cooking greens, roasting grilling and stir-frying vegetables. Over 85% of participants found the nutrition information to be very or extremely valuable (Figure 10). The majority acknowledged they had been told weekly about the importance of vegetables and fruit to a healthy diet, a main message of the program (Figure 11). Though
the majority (80%) of participants were already using SNAP or another nutrition assistance program, the remaining 20% of the participants were not, though some qualified as food insecure in the eligibility screening (Figure 12). The VeggieRx program did not have an impact on the utilization of nutrition assistance programs likely due to the already high rate of nutrition assistance program utilization.

To assess an economic value of the program participants were asked how much they might be willing to pay each week to participate in the same VeggieRx program (Objective 16). Eighty six percent (86%) of participants responded (n=75) with the average “willingness to pay” of $8 per week. This highlights that participants perceive the program to have an economic value, though they are unable or unwilling to pay 50% ($10) of the weekly incentive monetary value ($20). This value does not reflect operating costs of the VeggieRx program.

COMMUNITY LINKAGES

The VeggieRx model relied on a complex network of community linkages, which were defined in the Regional Health Improvement Plan as partnerships that can improve patients’ access to preventive and chronic care services by linking organizations that share a common goal of improving the health of people and the communities in which they live. During the project, HDFFA strengthened existing and connected to new community linkages, specifically between healthcare and HDFFA (Objective 11); VeggieRx participants and farmers (Objective 13); and created new connections with other nutrition assistance and nutrition education programs (Objective 12). VeggieRx represents a model for the clinical-community linkages that has been identified as an attractive option to address social determinants of health and improve population health.
**VeggieRx and Healthcare Providers**

HDFFA was well positioned to create community linkages as they are a non-profit focused on supporting a community-based food system. Connecting with healthcare was not a new concept as their existing food access programs rely on referrals from community organizers, but by hiring a CHW they were able to individually connect with practitioners in a way that was more legitimized by having a RDN. Before VeggieRx was started, HDFFA connected with practitioners at the St. Charles Heart and Lung Center who became champions of the program. A Memorandum of Understanding was developed between HDFFA and St. Charles Health System with the goal of improving patient outcomes.

From April to June, a total of 50 individual health care providers had been contacted and given materials (prescription pads, information for staff, and information for patients) by the HDFFA CHW. Additional health care providers learned about the program through co-workers within the St. Charles network. Ultimately, a total of 37 individual providers from various organizations referred an estimated 300 patients to the VeggieRx program. Individual providers expanded to additional departments including heart failure, diabetes and nutrition, oncology, behavioral health, and women’s health.

HDFFA also connected with additional medical organizations within the community, resulting in 120 healthcare provider and community professional connections; a new network of engaged providers is now connected to the local food system indirectly through HDFFA.

An important aspect to the network of relationships was to encourage providers to consider food insecurity as the major social determinant of health. This tied into Objective 3, to increase patient screening and awareness of food insecurity by providers. Food insecurity screening can potentially be a delicate topic of discussion with patients, and can be time consuming; and anecdotally is not necessarily performed on a routine basis though we have no quantitative baseline data to confirm this.

When working with providers, HDFFA’s CHW reiterated that food insecurity is a social determinant of heath and distributed materials to providers that included the validated screening questions, though did not ask providers directly to complete validated food insecurity questions with each patient referred. Yet, in the post program provider survey (Appendix II) providers (n=17) noted identifying patients as food insecure as the most frequent way they determined the patient to be eligible for VeggieRx (Figure 13). This result indicates that providers are highly motivated to identify food insecure patients if they can provide the patient with a solution or benefit that provides the patient with healthy food. Second to food insecurity, providers deemed patients eligible through use of the Oregon Health Plan (OHP) or a diagnosis of CVD and/or T2DM.
To determine if HDFFA’s efforts to connect with health care providers had a strong impact on the VeggieRx referral pattern (Objective 4), we included a question in the eligibility screen to identify the referral source for each potential participant (Appendix III). The majority (67%) of referrals were from health care providers demonstrating that HDFFA successfully connected with providers. Thirty-seven (37) individual providers directly referred patients to the program, and 24 of these providers had not been directly contacted by the HDFFA CHW, yet learned of the program and referred patients. Providers most frequently referred patients to the program verbally, or by directly connecting their patients with the VeggieRx contact by phone or email (Figure 14). The consensus from health care providers and community professionals surveyed post program is that the program has value, is beneficial to their patients, and is easiest to refer with either a flyer or phone number to call.

VEGGIERX AND SELF REFERRALS

In addition to health care referrals, many (24%) of the participants were self-referred. Self-referrals coincided with local media announcements in the Bend Bulletin and a local television station, KTVZ, reporting on the initiation of the VeggieRx program. Some learned of the program through family members who noticed the VeggieRx booth at the Bend Farmers Market. The remaining 9% of participants were referred to the program by community sources such as NeighborImpact, flyers in residential care home, or family members.

In this model, HDFFA performed the eligibility screening process (Appendix III) and enrolled participants in a simple and non-time-consuming way that allowed for inclusion of qualified participants
that may be upstream of healthcare and not exclusively recruited from the health care setting.

**VEGGiERx AND FARMERS**

HDFDA’s mission is to support a healthy and thriving food and farm network through collaboration, education and inclusivity. The organization has long-standing connections to regional (tri-county) farmers. The farmers who are vendors at the Bend Farmer’s Markets agreed to be VeggieRx vendors; new relationships with state-wide farm vendors were created. Farmers committed to being VeggieRx vendors. To improve the local food economy, HDFFA simultaneously increased local farm sales (Objective 14) while increasing local food access by participants. By calculating returned vouchers from vendors, it’s estimated that $11,883 was spent at the Bend Farmers Market through VeggieRx. Of the dollars circulated via VeggieRx vouchers, $9,031 stays in the local food economy, significantly more than the amount which remains in the local economy with purchased imported food ($3,327). All of the farm vendors, 100%, noticed an increase in sales with an average increase of 12% to their yearly Bend Farmers Market sales. In some cases, this represented up to 25% of their total sales (Figure 15). Lastly, 67% of farmers noticed an increase in customers due to VeggieRx.

**VEGGiERx FARMERS AND PARTICIPANTS**

HDFDA served as a liaison to connect participants of the VeggieRx program to local farmers (Objective 13). Over 50% of the program participants had never shopped at a farmer’s market prior to the program. Almost half (48%) of participants increased their understanding of foods grown locally (Figure 16), demonstrating an 86% increase in knowledge of the market and local farmers. The social connection to the farmers market may have reinforced positive dietary behavior change. When participants were asked “Overall, how valuable was the social aspect of shopping at the Farmers Market for you?”, 75% of participant said extremely or very important and 97% reported positive shopping experiences with vendors.

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6 Rahe, Mallory et al Economic Impact of Local Food Producers in Central Oregon. 2018
HDFFA connected with other nutrition assistance/educational program coordinators (n=9) (Objective 12) including nonprofits and state/governmental organizations to obtain referrals. Seven individuals that enrolled in the program had been referred by such a community organization. In post program one-on-one interviews with the coordinators (n=5), they confirmed that they knew about the HDFFA VeggieRx program but revealed that they did not understand how the program worked, or did not think their client would be eligible for the program. Nonetheless, coordinators expressed enthusiasm for the program and for referring their clients to future VeggieRx programs. In the future, providing coordinators with more materials (rx pads, fliers, etc.) and an overview of the program model would help coordinators maximize the program benefit for their clients.

SATISFACTION WITH VEGGIERX

HDFFA asked stakeholders, namely participants, providers, and farmers (Objective 15) about their satisfaction level with VeggieRx. Ninety eight percent (98%) of participants were very satisfied or satisfied with the program (Figure 17). In response to “How responsive have we been to your questions or concerns about the VeggieRx program?”, 85% responded extremely and 15% very responsive. All of the referring providers (100%) who responded to our survey (n =17) stated that they “liked” VeggieRx. About 75% felt the referral process was clear and about 85% felt the referral process was not time-consuming. All the farmer vendors (n=12) (100%) were interested in continuing to be a vendor for the program; 92% had a positive experience with the program; and 100% were satisfied with the ease of signing up to become a vendor and the timeliness of voucher reimbursements. Across the board, the
majority stakeholders of the program, were satisfied with the VeggieRx pilot program and expressed a desire for the program to continue.

CONCLUSIONS OR SUMMARY

HDFFA successfully piloted the first fresh food prescription program in Central Oregon. HDFFA connected with over 50 providers who referred more than 300 patients to the program. In eight months, HDFFA created a substantial community network that collectively connected healthcare, community services, and local food to address the needs of food insecure individuals with diet-related diseases(s).

The program impacted 87 people and their families, cumulatively over 200 people. Participants found this program to be effective in helping them improve their health. Intake of fresh vegetable and fruit consumption increased by 1.3 cups per day and participants continued to eat as many vegetables after program completion. The VeggieRx program helped to reduce anxiety associated with food insecurity. One-third (33%) of the participants were less worried about having enough food or money for food during the program. Almost all, 97%, of vouchers that HDFFA provided, were redeemed. The program offered fresh food to Supplemental Nutrition Assistance Program (SNAP) recipients and others who typically can’t afford fresh food.

VeggieRx had a positive impact on the local food economy. Farmers made an additional $11,883 in sales from VeggieRx vouchers. The overall impact on the local food economy, or the ripple effect of purchasing food directly from a farmer, is $20,676 and was determined by using an established Central Oregon multiplier of 1.74.

Overall 97% of participants, health care providers, and farmers were satisfied and reported they want the program to continue. This program was deemed successful and benefited participants, farmers and their families, and enabled providers to refer their patients to a program that improved patient’s health and access to fresh food. This program effectively connected healthcare professionals, community professionals, local farmers, and community members experiencing food insecurity.
GAPS AND RECOMMENDATIONS

GAP 1: FRESH FOOD PRESCRIPTION PROGRAMS LACK SUSTAINABLE FUNDING

The 2018 HDFFA Veggie Rx pilot program implemented by HDFFA was the first fresh food prescription program of its kind in Central Oregon. Participants, providers and farmers who were involved in the program all expressed the desire to have the program continue. For at least 33% of the participants, an additional $20 of fresh produce per week was sufficient to decrease their anxiety about obtaining food and allowed them not to run out of money for food. Providers felt this program was a great benefit to their patients to address the pervasive issue that food insecure people do not get to eat enough fresh food to be healthy. Farmers also benefited and experienced an increase in sales with local dollars supporting the broader local economy. However, the lack of sustainable funding for this program or similar produce prescription programs is a major gap in addressing the needs of food insecure individuals with diet-modifiable disease.

RECOMMENDATION 1: PROVIDE STATEWIDE SUPPORT FOR VEGGIERX PROGRAMS

Veggie Rx programs have been operating across Oregon since 2014. In 2018, over 3,000 patients were expected to be served in over 30 cities across the state through 12 different vegetable and fruit prescription programs. These programs differ slightly based on community-specific needs and challenges, but ultimately, they all aim to improve the health of Oregonians by providing healthy food to food insecure patients.

The organization, Oregon Community Food System Network (OCFSN) is a collaboration of 53 nonprofit organizations and allies dedicated to strengthening local and regional food systems to deliver better economic, social, health and environmental outcomes across the state. HDFFA is a founding member of OCFSN and participates in their VeggieRx state-wide work group. This group has defined a strategic vision to “combat diet-related, chronic disease, and food insecurity in Oregon State by integrating new vegetable prescription programs annually into Oregon’s health care system”. To accomplish this, the work group’s goals include: 1) establishing a program evaluation strategy; 2) systematizing & streamlining statewide program operations; and; 3) developing a sustainable funding plan.

Part of a sustainable funding model is being clear on the goals, objectives, deliverables, outcomes and metrics. It is known that the cost of health care for individuals and organizations that serve the Medicaid population has soared over years. And, there is growing literature and consensus that simply providing healthy food, rather than drugs, could be a method to address the ongoing and growing nationwide crisis of diabetes and heart disease. If coordinated care organizations and other payer institutions need more evidence to continue funding food prescription programs they could request that VeggieRx programs meet specific outcome measures, and collaborate with the OCFSN VeggieRx work
group or their local VeggieRx implementers, like HDFFA, to better quantify the impact of such programs.

**GAP 2: FLEXIBLE MODEL NEEDS TO ADDRESS LIMITATIONS OF TARGET AUDIENCE**

VeggieRx programs vary in the model they use to deliver fresh food to their participants, and may include food provided at health clinics, farmers markets, farm stands, and/or grocery stores. The 2018 HDFFA VeggieRx program chose to deliver the program at a farmers markets, based upon six month of extensive research of models in Oregon and across the U.S. This model was chosen for a number of reasons including: a) HDFFA has been dedicated to supporting a healthy and thriving food and farm network in Central Oregon since 2012 and has established connections with local farmers and the farmer’s markets in the region; b) the pilot project was confined to Bend, OR which had an established farmers market; c) the pilot was implemented during the farmers market season during which availability of fresh produce is maximal; d) the farmers market represents an opportunity for patients to engage with their farmer and learn about local food from the experts; and e) the farmers markets provide an opportunity for social engagement which is essential to being healthy.

In our 2-month follow-up surveys, a handful of non-graduates stated that the main barrier to finishing the program was mobility, specifically getting to the market but also being able to park, and/or walking once there. This finding underscores the need for VeggieRx models to anticipate participants’ needs and establish opportunities to overcome the barriers for the target population, as well as provide a model that best meets the needs of the community.

**RECOMMENDATION 2: VEGGIERX MODEL SHOULD MEET COMMUNITY’S NEEDS**

The 2018 Veggie Rx pilot program retained over 75% of its participants. For Bend residents that did not have major mobility issues this program proved to be a success. In anticipation of mobility challenges, HDFFA provided transportation options (Uber and gas cards) and volunteers to help participants navigate the market. In future farmer’s market models, HDFFA will continue to provide volunteers so that participants can navigate the market, but also provide options for carrying produce while shopping (hand carts or wagons), and support in delivering the groceries to participant’s vehicles.

We recommend that VeggieRx programs provide the best food delivery model that is identified for the community it is serving. For example, the City of Prineville in Crook County has a high rate of food insecurity that remains poorly addressed. The city currently lacks a food pantry and has the highest cost per meal in the country. For that community, HDFFA and the local food bank are proposing a program that combines delivery of fresh food on a mobile food pantry where participants can access food bank staple items, the VeggieRx fresh foods and the HDFFA Community Health Care Worker (CHW). The ability for programs to remain flexible based on the needs of the community, as well as on information obtained from clients and other stakeholders during evaluation, will allow programs to best meet the needs of its participants.
**Gap 3: Recruitment and Retention Varies for Men versus Women**

In the initial program enrollment questionnaire, HDFFA asked potential participants how interested they were and their motivations for joining the program. Across the board and regardless of gender, participants conveyed high motivation levels and interest in joining the program. However, we found that fewer men than women enrolled in the program and retention among men was lower for reasons we have not identified. As stated anecdotally by health care providers, middle-aged men are an underserved population that can be difficult to recruit and retain in nutritional programs but nevertheless could greatly benefit from the Veggie Rx program.

**Recommendation 3. Engage with Providers to Recruit and Maintain Men**

Although the HDFFA CHW attempted to recruit more males by connecting with providers who engage with male patient populations, the discrepancy in enrolling patients of all genders was apparent. In future programs, greater emphasis will be placed on recruiting middle-aged men, many of whom live alone and may experience social isolation. Providers may need to specifically refer and engage with their male patients to increase recruitment and retention.

**Gap 4: Eligibility Criteria Needs to Be Flexible to Meet Target Audience**

The Veggie Rx program can be a powerful tool for combating diet-related chronic disease, and food insecurity. In this pilot, HDFFA defined eligibility criteria based on a number of existing programs and funding requirements, and focused on food insecure patients with cardiovascular disease and diabetes and in some cases, being a recipient of the Oregon Health Plan. However, nearly 20% of providers surveyed stated that obesity should be included in the eligibility criteria. Because the link between obesity and diabetes is well established, it follows that including obesity as an eligibility criterion would allow more participants to be eligible.

**Recommendation 4: Identify Patient Eligibility Criteria with Practitioners**

Defining a clear target audience and participant eligibility criteria for programs is essential for successful program implementation, and will better serve the recipients of the program. In this pilot, getting feedback from providers was important in defining the patient population that VeggieRx would serve. In future programs, HDFFA anticipates including obesity as an eligibility criterion.
APPENDICES:

I  OBJECTIVES CHART
II PROVIDER SURVEY
III ELIGIBILITY SURVEY
IV PRE-PROGRAM PARTICIPANT SURVEY
V  POST-PROGRAM PARTICIPANT SURVEY
VI 2-MONTH FOLLOW-UP PARTICIPANT SURVEY
VII VENDOR SURVEY
IX HDFFA VeggiesRX PAD
<table>
<thead>
<tr>
<th>Objective</th>
<th>Expected Results with Target Measures</th>
<th>Target Measures</th>
<th>Results Met</th>
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<tbody>
<tr>
<td>1: Implement VeggieRx pilot program for food insure (FI) people with diet-modifiable disease to ↑ fresh food consumption by participants</td>
<td>• Implement pilot April-Dec 2019 &lt;br&gt; • Program assessment complete by: Feb 2019</td>
<td>• Program implemented from April-Dec 2018 &lt;br&gt; • Participant breakdown: FI (n= 84; 89%), OHP recipient (n= 72; 77%), T2DM (n = 62; 66%) CVD (n= 53; 53%) &lt;br&gt; • Program assessment complete Feb 2019</td>
<td>Yes</td>
</tr>
<tr>
<td>2: Enroll 66 participants in VeggieRx pilot project</td>
<td>• Providers to refer 33-100+ patients &lt;br&gt; • Enroll 66 participants for 8-week $20/week June-Oct 2018</td>
<td>• 300+ estimated referrals from providers &lt;br&gt; • 146 patients completed the eligibility survey &lt;br&gt; • 94 eligible: 87 participated &lt;br&gt; • Provided $20/week with a bonus at week 8</td>
<td>Yes</td>
</tr>
<tr>
<td>3: ↑ provider screening &amp; awareness of FI</td>
<td>Increase food insecurity screening of patients by 75%, April-Aug 2018</td>
<td>88% of providers determined patient was eligible for VeggieRx because they were FI</td>
<td>Yes</td>
</tr>
<tr>
<td>4: ↑ referrals to nutritional programs</td>
<td>100% increase in provider referral to VeggieRx April-Aug 2018</td>
<td>67% of enrollees were referred by health care providers</td>
<td>Yes</td>
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<tr>
<td>5: ↑ consumption of fresh food by participants</td>
<td>↑ fruit &amp; vegetable intake (FVI) by participants of 1-2 servings/day/participant during program June-Oct 2018</td>
<td>• Vegetable consumption ↑ by 0.6 cups/day &lt;br&gt; • Fruit ↑ by 0.7 cups/day &lt;br&gt; • Total FVI ↑ of 1.33 cups of produce/day</td>
<td>Yes</td>
</tr>
<tr>
<td>6: ↓ anxiety about availability of food by participants.</td>
<td>50% ↓ in anxiety levels about food during program June-Oct 2018</td>
<td>33% of participants experienced ↓ in anxiety about running out of food, or money for food</td>
<td>No</td>
</tr>
<tr>
<td>7: Participant retention/program completion</td>
<td>90% voucher utilization &amp; participant completion during program</td>
<td>• 97% of vouchers that were distributed were redeemed &lt;br&gt; • 78% completed the program by attending ≥5 sessions</td>
<td>Yes</td>
</tr>
<tr>
<td>8: ↑ understanding of the impact of nutrition on personal health</td>
<td>80% of participants express feeling better &amp; attributing that to ↑ FVI during program period June-Oct 2018</td>
<td>• 75% felt better following program &lt;br&gt; • 100% found that VeggieRx was effective in helping them ↑ their health</td>
<td>Yes</td>
</tr>
</tbody>
</table>

7 Targets were assigned at the outset based on educated assumptions using a combination of: current baselines when known; Central Oregon-specific food and health needs assessments; or evaluations from similar past programs across Oregon and the United States.
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| **9: ↑ understanding/utilization of available nutrition and assistance resources** | - 80% of participants acknowledge receipt of nutrition resources  
- ↑ utilization of resources by 10-20% of participants | - 85% found the nutrition education very valuable  
- 80% of the participants were already using SNAP or WIC | Yes |
| **10: ↑ competence of buying, cooking, & eating fresh foods by participants** | 50% ↑ in competence in eating fresh produce following program, June-Oct 2018 | - 30% ↑ of cooking/preparing confidence  
- 60% ↑ of confidence of shopping on a budget | No |
| **11: Create community linkages between healthcare, community resources, food system, and VeggieRx participants: new partnerships between HDFFA with clinicians and providers** | - ↑ awareness of VeggieRx program by 10+ community program managers after program completion Aug-Feb 2019 | 7 organizations and 120 health care providers and community professionals are now connected with HDFFA | Yes |
| **12: Create community linkages between health care, community resources, food systems, and VeggieRx participants: New connections with other nutrition assistance/education programs** | - 80% ↑ knowledge by participants of farmers markets & farmers  
- 80% ↑ knowledge of VeggieRx participants by partner farmers after program completion | Connected with program coordinators (n=9) across community organizations in nonprofits and state/government sectors that provide nutritional assistance or education to obtain referrals | No |
| **13: Create community linkages between health care, community resources, food system, and VeggieRx participants: participants & farmers** | - 50% of participants had never shopped at the farmers market prior  
- 86% ↑ in knowledge of the market & farmers | $11,883 in sales due to the program  
Average ↑ of 12% to their yearly Bend Farmers Market sales | Yes |
| **14: ↑ local farm sales** | Voucher redemption by local farmers by end of program | - 86% of participants responded  
- The average amount participants (n=75) would be willing to pay for the program if they could afford it would be $8 per week | Yes |
| **15: Program satisfaction by all 3 sectors surveyed (participants, providers, farmers)** | - >80% are satisfied with program overall  
- >50% have comments/suggestions to improve the program | - 98% of participants were satisfied  
- 100% of providers “liked” the program  
- 100% of vendors are interested in participating in future VeggieRx programs  
- 75% gave comments/suggestions to improve the program | Yes |
| **16: Economic value** | >80% of participants suggest a value amount for the program | - 86% of participants responded  
- The average amount participants (n=75) would be willing to pay for the program if they could afford it would be $8 per week | Yes |
APPENDIX II: PROVIDER SURVEY

What are your opinions on the HDFFA VeggieRx program

The VeggieRx Pilot Program is a nutrition program designed to improve the health of food insecure patients with diet-modifiable disease by providing them with vouchers for produce to increase their consumption of fresh vegetables and fruit. We are reaching out to you because we want to hear the opinions of providers on the VeggieRx program. We understand how busy you are. We thank you for completing this 5-minute survey to help us understand how to better connect VeggieRx with health care providers.

1. Have you heard of the HDFFA VeggieRx program?
   o Yes
   o No
   o Don’t know

2. Did you receive a VeggieRx prescription pad or other HDFFA VeggieRx information materials?
   o Yes
   o No
   o Don’t know

3. Did you refer patient(s) to the HDFFA VeggieRx program?
   o Yes
   o No
   o Don’t know

We’d like to understand your experience and suggestions on referring to VeggieRx

4. Approximately how many patients did you refer to VeggieRx?
   o 1-5
   o 6-10
   o 11-15
   o 16-20
   o 20-30
   o 30 or more

5. How did you refer your patient(s) to VeggieRx (check all that apply).
   o I verbally referred the patient to the program
   o I provided a VeggieRx paper prescription during his or her visit
   o I connect m patient by phone of email with the VeggieRx contact
   o I asked my staff to refer the patient
   o Other (please specify)___________________________________
6. The eligibility criteria for patient referral to VeggieRx were clear
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
   - Strongly disagree

7. I determined that my patient was eligible because (check all that apply)
   - S/he has a diagnosis of cardiovascular disease
   - S/he has a diagnosis of type 2 diabetes
   - I determined the patient was food insecure
   - The patient is a recipient of the Oregon Health Plan
   - S/he has a poor diet
   - I did not know the eligibility criteria but thought it might be a good fit
   - N/A
   - Other (please specify) _______________________________________

8. Referring patients to VeggieRx was not time-consuming
   - 1-5
   - 6-10
   - 11-15
   - 16-20
   - 20-30
   - 30 or more

9. Why did you take the time to refer to this program?
   _______________________________________

   o Do you think any of the answers below represent obstacles to referring patients to VeggieRx? (check all that apply)
     o Not enough time with patient
     o Not sure how to refer the patient to the program
     o Didn’t think the patient would make use of the benefit
     o I don’t think the program is effective
     o I think the program need to be improved
     o There are no obstacles
     o Other (please specify) _______________________________________

10. What would you do to improve the referral process to VeggieRx?
    _______________________________________

11. Did you get any feedback from patients who participated in VeggieRx?
    - Yes
    - No
If yes, what did patients say?

Thinking about VeggieRx overall, which of the following best describes your feelings about it?
- Like it very much
- Like somewhat
- Feel neutral about it
- Dislike it somewhat
- Dislike it very much

Please provide any comments regarding the VeggieRx program

If you did not refer to the VeggieRx program was it because… (check all that apply)?
- You had never heard of it
- You didn’t know how to refer your patients to VeggieRx
- You didn’t know what made patients eligible for the program
- None of your patients were eligible
- You found it time-consuming
- You didn’t think the program would be effective for your patient
- You didn’t think your patient(s) would be interested
- You meant to but never go around to referring a patient
- Other (please specify) ___________________________________________

What would it take for you to refer patients to the VeggieRx program?

Please provide any comments regarding the VeggieRx program

We will report the results of the HDFFA Bend VeggieRx pilot program in early 2019. Please let us know if you are interested in getting the report and/or knowing more about VeggieRx
- Please contact me
- Please contact me and send me the report when available
- Do not contact me but send me the report when it’s available
- Do not send me the report
- Other (please specify) ___________________________________________

Contact information
- Name:
- Workplace name:
- Department:
- ZIP/Postal Code:
- Email address:
APPENDIX III: ELIGIBILITY SURVEY

Are you eligible to participate in the VeggieRx program?

VeggieRx is a program that is run by the High Desert Food and Farm Alliance (HDFFA). This program provides FREE fresh food and nutrition education for 8 weeks for people who have less access to fresh vegetables and fruit. Please complete the following 5-minute questionnaire to help us determine if you can participate in the program. Completing this form and participation in the program are voluntary. Any information you provide to HDFFA will not be shared with any other organizations including your health care provider. If you agree to be contacted expect to hear from us within 3 business days after you complete this form. If you have any questions or concerns please contact Hannah Brzozowski at 541-610-6046 or hannah@hdffa.org.

1. Are you 18 year or older?
   - Yes
   - No

Are you eligible to participate in the VeggieRx program?

2. What is your first name?_______________________________________
3. What is your last name?_______________________________________
4. What is your phone number?___________________________________
5. Can we call you and text you at this number?
   - Yes to both call and text
   - Yes to call only
   - Yes to text only
   - No

6. How do you currently access and use the internet? (Check all that apply)
   - Smart phone
   - Personal computer
   - Public computer
   - I don’t have access to the internet
   - Other (please specify) _______________________________________
7. Can we email you and reach you at this address?
   - Yes
   - No
Diagnosis by your doctor
To be eligible for the VeggieRx program, you need to have a diagnosis of cardiovascular (heart) disease or (pre) diabetes.

8. Have you been diagnosed with heart disease by a doctor?
   - Yes
   - No
   - Don’t know

9. Have you been diagnosed with diabetes or prediabetes by a doctor?
   - Yes
   - No
   - Don’t know

Food insecurity/Hunger
To be eligible for the VeggieRx program we need to know if you have experienced food insecurity or have a low household income

10. Within the past 12 months, did you ever cut the size of your meals or skip meals because there wasn’t enough money for food?
    - Often true
    - Sometimes true
    - Never true

11. Within the past 12 months, did the food you buy just not last and you didn’t have money to get more?
    - Often true
    - Sometimes true
    - Never true

12. Within the past 12 months did you worry that you would run out of food before you got money to buy more?
    - Often true
    - Sometimes true
    - Never true

13. Is your current income level less than $24,000 per year?
    - Yes
    - No
    - Don’t know

Health insurance status
We want to make sure everyone has access to fresh food even if they don’t have health insurance. Please let us know your health insurance status
14. Do you currently have health insurance?
   o Yes
   o No
   o Don’t know

15. Are you currently on the Oregon Health Plan (OHP)?
   o Yes- Pacific Source
   o Yes- not Pacific Source
   o No
   o Don't know

**Eligibility questions**

*Please answer the following questions to help us make sure you could take full advantage of the benefits of this program*

16. Fresh food pickup is at the Bend Farmers Market from 2-6pm either Wednesday (downtown) or Thursday (Whole Foods parking lot). Which day best fits your schedule?
   o Wednesday
   o Thursday
   o Either works for me
   o None

17. Do you expect that any obstacles such as transportation, childcare needs, or other costs such as fees from text reminders would prevent you from being able to take full advantage of this program?
   o Yes
   o No
   o Don’t know
   o Please list any obstacles you might face ________________________________

18. The *VeggieRx* program will take place over 8 consecutive weeks. How likely is it that you will be able to make it to the market 8 weeks in a row?
   o Very likely
   o Likely
   o Neither likely nor unlikely
   o Unlikely
   o Very unlikely

19. How confident are you with cooking fresh foods?
   o Extremely confident
   o Very confident
   o Somewhat confident
   o Not so confident
20. Do you have the cooking equipment you need to prepare or cook with fresh foods?
   - Yes
   - No
   - Don’t know

21. How interested are you in participating in the VeggieRx program?
   - Extremely interested
   - Very interested
   - Somewhat interested
   - Not so interested
   - Not at all interested

22. I am motivated to participate in VeggieRx because… (check all that apply)
   - I want to increase the amount of fresh food I eat
   - I want to learn more about eating with fresh foods
   - I want to learn more about shopping for fresh foods on a budget
   - I want to eat more fresh foods but they are expensive so this program would help
   - I want to lose weight
   - I want to be healthier
   - I am not motivated to participate in this program
   - Other reasons I am motivated to participate in the program are:
     ______________________________________________________________

Thank you for your interest in VeggieRx

Thank you for completing this questionnaire. If you provided your contact information and agreed to be contacted we will contact you within 3 business days to let you know if you are eligible for the VeggieRx program and next steps for enrolling.

23. Who referred you to this program? (fill in below)________________________________________
Welcome to the VeggieRx pilot program

VeggieRx is a program that provides FREE fresh food and nutrition education for 8 weeks. You are eligible and voluntarily enrolling in this pilot program. We are asking you to complete this 8-minute questionnaire to help us make this program work as best as possible for you and other participants in the future. Your feedback in this questionnaire is very important. All of your answers will remain confidential. We will not share any of your personal information. Please answer all the questions to the best of your ability. Thank you for your participation. If you have any questions or concerns please contact Hannah at 541.610.6046 or hannah@hdfja.org

Contact information

Please provide your contact information so we can communicate with you. All your information will remain anonymous.

1. What is your contact information?
   - First and last name ________________________________
   - ZIP/Postal Code ___________________________________
   - Phone number ___________________________________

2. Please list your top reasons for wanting to participate in this program.
   - _____________________________________________________________________
   - _____________________________________________________________________
   - _____________________________________________________________________

Nutritional programs

The VeggieRx program is designed to increase your access to fresh vegetables and fruits. Please answer the following questions to help us understand your current ability to access and afford foods.

3. Does anyone in your household, including you, receive SNAP, WIC or other nutritional benefits? Check all that apply.
   - SNAP
   - WIC
   - Don’t know
   - None
   - Prefer not to answer
   - Other (please name other benefits)_____________________________________


4. If you needed to, or wanted to, would you know how to access programs that provide free food or nutrition education?
   - Yes
   - No
   - Don’t know

5. Within the past 30 days, did you worry your food would run out before you got money to buy more?
   - Often true
   - Sometimes true
   - Never true

6. Within the past 30 days, did the food you bought just not last and you didn’t have enough money to get more?
   - Often true
   - Sometime true
   - Never true

7. Have you ever been asked any of the above 2 questions or similar ones by a medical personnel (excluding Hannah)?
   - Yes
   - No
   - Don’t know
Dietary habits
The following questions will help us understand the amount of fresh vegetables and fruits you currently eat. We’ve included pictures to describe 1 cup or 1/2 cup of vegetables or fruits.

**VEGETABLE SERVING SIZES GUIDE**

8. Based on the guide pictures above, about how many cups of vegetables do you eat each day?
   - None
   - Some, but less than 1 cup
   - 1 to less than 2 cups
   - 2 cups to less than 3 cups
   - 3 cups to less than 4 cups
   - 4 cups to less than 5 cups
   - more than 5 cups
9. Based on the guide pictures above, about how many cups of fruit do you eat each day?
   - None
   - Some, but less than 1 cup
   - 1 to less than 2 cups
   - 2 cups to less than 3 cups
   - 3 cups to less than 4 cups
   - 4 cups to less than 5 cups
   - more than 5 cups

10. About how many days per week do you eat 5 or more cups of vegetables and fruit (combined) per day?
    - 0
    - 1-2
    - 3-4
    - 5-6
    - 7
11. Based on the guide picture above. How often would you say you eat a balanced meal?
   - Less than once a month
   - Once a month
   - A few times a month
   - Above once a week
   - A few times a week
   - Everyday

12. In the last 30 days, how often would you say you could afford to eat balanced meals?
   - Less than once a month
   - Once a month
   - A few times a month
   - About once a week
   - A few times a week
   - Everyday
Shopping for and cooking with vegetables and fruits
We are asking the following questions to understand your current experiences shipping for and preparing vegetables and fruits

13. How often do you purchase vegetables and fruits when you shop at the grocery store?
   o More than once a week
   o About once a week
   o About once every 2 weeks
   o About once a month
   o Never

14. When I grocery shop, I mostly buy vegetables that are…. (please select 1 answer only).
   o Ready-to-eat
   o Canned
   o Frozen
   o Fresh
   o Other (please specify) ____________________________________________

15. How much do you feel you know about the importance of vegetables and fruits in your diet?
   o None at all
   o A little
   o A moderate amount
   o A lot
   o A great deal

16. When shopping on a budget do you know how to use vegetables and fruits to stretch your meals?
   o None at all
   o A little
   o A moderate amount
   o A lot
   o A great deal

17. How many cups of vegetables and fruits do you think a person should eat each day for good health?
   o 0
   o 1-2
   o 3-4
   o 5-6
   o 7-8
   o 9 or more
   o Don’t know
18. How much do you feel you know about preparing and cooking fresh vegetables and fruits?
   o None at all
   o A little
   o A moderate amount
   o A lot
   o A great deal

19. How much do you feel you know about safety and storage of fresh vegetables and fruits?
   o None at all
   o A little
   o A moderate amount
   o A lot
   o A great deal

20. How often do you shop at the farmers market?
   o About once a week
   o A few times a month
   o Once a month
   o Less than once a month
   o Never

21. How much do you feel you know about vegetables and fruits that are grown locally in your area?
   o None at all
   o A little
   o A moderate amount
   o A lot
   o A great deal

**Health Habits**

*We are asking the following questions to get your opinion on your health habits*

22. In general, how would you rate your overall health?
   o Excellent
   o Very good
   o Good
   o Fair
   o Poor
23. My personal efforts will help me eat a healthy diet
   o Strongly disagree
   o Disagree
   o Neither agree nor disagree
   o Agree
   o Strongly agree

24. It is important for me to control my weight to be healthy
   o Strongly disagree
   o Disagree
   o Neither agree nor disagree
   o Agree
   o Strongly agree

25. It is important for me to eat a diet rich in vegetables and fruits to feel good and have energy.
   o Strongly disagree
   o Disagree
   o Neither agree nor disagree
   o Agree
   o Strongly agree

Demographics

In order to help us better serve current and future participants please answer the following questions. Your information is confidential and will not be shared or be linked to you in any way.

26. What is your gender?
   o Female
   o Male
   o Other

27. How old are you?
   o 18-24
   o 25-34
   o 35-44
   o 45-54
   o 55-64
   o 65-70
   o >71

28. What is your approximate average household income?
   o Less than $25,000
   o $25,000-$34,999
   o $35,000-$49,999
   o $50,000-$74,999
   o $75,000 or greater
29. What is the last grade of school you completed?
   o Did not complete high school
   o High school or G.E.D.
   o Associate’s degree
   o Some college
   o College graduate
   o Post graduate degree

30. How many people currently live in your household? __________________________

Thank you!
Thank you for completing this questionnaire. All of your answers will remain confidential. We will not share any of your personal information. Thank you for your participation.
APPENDIX V: VEGGIERX POST-PARTICIPATION SURVEY

Your participation in the VeggieRx pilot program
Thank you for participating in the VeggieRx pilot program. We are asking you to complete this 10-minute questionnaire to help us understand what you got out of the program and how to make this program work as best as possible for other participants in the future. Your feedback in this questionnaire is very important. Please answer all the questions to the best of your ability. Thank you for your participation.

All of your answers will remain confidential. We will not share any of your personal information. If you have any questions or concerns please contact Hannah at 541.610.6046 or hannah@hdfsa.org

1. Please provide your contact information
   - First and last name ________________________________
   - Phone number ________________________________

Program satisfaction and experience
In the questions below, please share with us your opinions of the VeggieRx pilot program

2. Overall, how satisfied were you with the VeggieRx program?
   - Very satisfied
   - Satisfied
   - Neither satisfied nor dissatisfied
   - Dissatisfied
   - Very dissatisfied

3. How responsive have we been to your questions or concerns about the VeggieRx program?
   - Extremely responsive
   - Very responsive
   - Somewhat responsive
   - Not so responsive
   - Not at all responsive
   - Not applicable

4. Please rank what you found most valuable in the VeggieRx program (with 1 being the most valuable and 6 the least valuable).
   - Free food
   - Fresh Vegetables and fruits
   - Nutrition information by a registered dietitian
   - Connection with community at the farmers market
   - Referral by medical staff
   - Personal guidance throughout the program
5. How much might you be willing to pay each week to participate in the same VeggieRx program?
   - $5
   - $10
   - $15
   - $20
   - $0
   - Other (please specify) ______________________________________________

6. Overall, how valuable was the social aspect of shopping at the farmers market for you?
   - Extremely valuable
   - Very valuable
   - Somewhat valuable
   - Not so valuable
   - Not at all valuable

7. Overall, how would you rate your shopping experiences with the vendors at the farmers market?
   - Very positive
   - Positive
   - Neutral
   - Negative
   - Very negative

8. Overall, how valuable did you find the nutrition education information you received every week?
   - Extremely valuable
   - Very valuable
   - Somewhat valuable
   - Not so valuable
   - Not at all valuable

9. Is there anything particular you liked or didn’t like about the program?
    _________________________________________________________________

Nutritional programs
The VeggieRx program is designed to increase your access to fresh vegetables and fruits. Please answer the following questions to help us understand your current ability to access and afford foods.

10. Does anyone in your household, including you, receive SNAP, WIC or other nutritional benefits? Check all that apply.
    - SNAP
    - WIC
    - Don’t know
o None
o Prefer not to answer
o Other (please name other benefits) ____________________

11. If you needed to, or wanted to, would you know how to access programs that provide free food or nutrition education?
   o Yes
   o No
   o Don’t know

12. Within the past 30 days, did you worry your food would run out before you got money to buy more?
   o Often true
   o Sometimes true
   o Never true

13. Within the past 30 days, did the food you bought just not last and you didn’t have enough money to get more?
   o Often true
   o Sometime true
   o Never true
Dietary habits

The following questions will help us understand the amount of fresh vegetables and fruits you currently eat. We’ve included pictures to describe 1 cup or 1/2 cup of vegetables or fruits.

VEGETABLE SERVING SIZES GUIDE

14. Based on the guide pictures above, about how many cups of vegetables do you eat each day?
   o  None
   o  Some, but less than 1 cup
   o  1 to less than 2 cups
   o  2 cups to less than 3 cups
   o  3 cups to less than 4 cups
   o  4 cups to less than 5 cups
   o  more than 5 cups
15. Based on the guide pictures above, about how many cups of fruit do you eat each day?
   - None
   - Some, but less than 1 cup
   - 1 to less than 2 cups
   - 2 cups to less than 3 cups
   - 3 cups to less than 4 cups
   - 4 cups to less than 5 cups
   - more than 5 cups

16. About how many days per week do you eat 5 or more cups of vegetables and fruit (combined) per day?
   - 0
   - 1-2
   - 3-4
   - 5-6
   - 7
17. Based on the guide picture above. How often would you say you eat a balanced meal?
   - Less than once a month
   - Once a month
   - A few times a month
   - Above once a week
   - A few times a week
   - Everyday

18. In the last 30 days, how often would you say you could afford to eat balanced meals?
   - Less than once a month
   - Once a month
   - A few times a month
   - About once a week
   - A few times a week
   - Everyday
Shopping for and cooking with vegetables and fruit

We are asking the following questions to understand your current experiences shipping for and preparing vegetables and fruits.

19. How often do you purchase vegetables and fruits when you shop at the grocery store?
   - More than once a week
   - About once a week
   - About once every 2 weeks
   - About once a month
   - Never

20. When I grocery shop, I mostly buy vegetables that are…. (please select 1 answer only).
   - Ready-to-eat
   - Canned
   - Frozen
   - Fresh
   - Other (please specify) ____________________________________________

21. How much do you feel you know about the importance of vegetables and fruits in your diet?
   - None at all
   - A little
   - A moderate amount
   - A lot
   - A great deal

22. When shopping on a budget do you know how to use vegetables and fruits to stretch your meals?
   - None at all
   - A little
   - A moderate amount
   - A lot
   - A great deal

23. How many cups of vegetables and fruits do you think a person should eat each day for good health?
   - 0
   - 1-2
   - 3-4
   - 5-6
   - 7-8
   - 9 or more
   - Don’t know

24. How much do you feel you know about preparing and cooking fresh vegetables and fruits?
   - None at all
25. How much do you feel you know about safety and storage of fresh vegetables and fruits?
   - None at all
   - A little
   - A moderate amount
   - A lot
   - A great deal

26. How often do you shop at the farmers market?
   - About once a week
   - A few times a month
   - Once a month
   - Less than once a month
   - Never

27. How much do you feel you know about vegetables and fruits that are grown locally in your area?
   - None at all
   - A little
   - A moderate amount
   - A lot
   - A great deal

**Health Habits**

_We are asking the following questions to get your opinion on your health habits_

28. In general, how would you rate your overall health?
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor

29. My personal efforts will help me eat a healthy diet
   - Strongly disagree
   - Disagree
   - Neither agree nor disagree
   - Agree
   - Strongly agree

30. It is important for me to control my weight to be healthy
   - Strongly disagree

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31. It is important for me to eat a diet rich in vegetables and fruits to feel good and have energy.
   o Strongly disagree
   o Disagree
   o Neither agree nor disagree
   o Agree
   o Strongly agree

32. During participation in the program, how often were you told about the importance of vegetables and fruits in your diet?
   o About once a week
   o A few times a month
   o Once a month
   o Less than once a month
   o Never

33. I plan to maintain my current vegetable and fruit intake beyond the VeggieRx program.
   o Strongly disagree
   o Disagree
   o Neither agree nor disagree
   o Agree
   o Strongly agree

34. Do you have any other comments, questions, or concerns?

Thank you!
Thank you for completing this questionnaire. All of your answers will remain confidential. We will not share any of your personal information. Thank you for participating in the VeggieRx pilot program.
APPENDIX VI: 2-MONTH FOLLOW-UP PARTICIPANT SURVEY

Your participation in the VeggieRx plot program
Thanks to all of you who participated in the High Desert Food & Farm Alliance (HDFFA) VeggieRx pilot program. We are asking you to complete this 5-minute questionnaire to help us understand what you got out of the program. Your feedback in this questionnaire is very important. All of your answers will remain confidential. We will not share any of your personal information. Please answer all the questions to the best of your ability. Once you complete the survey we will send you a $20 gift card to purchase produce. Thank you for your participation. If you have any questions or concerns please contact Hannah at 541.610.6046 or hannah@hdffa.org

Program Impact

1. Overall, do you think the VeggieRx program was effective in helping you improve your health?
   - Extremely effective
   - Very effective
   - Somewhat effective
   - Not so effective
   - Not at all effective

2. Please share how VeggieRx specifically impacted your health (changes in cooking habits, medical outcomes, food choices… anything you’d like to share).

3. In general, how would you rate your overall health?
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor

Dietary Changes

Please share with us your opinions of the impact of the VeggieRx pilot program on your dietary habits.

4. I eat more vegetables and fruits than I did before participant in the program.
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
   - Strongly disagree
5. I spend more on vegetables and fruits than I did before participating in the program.
   o Strongly agree
   o Agree
   o Neither agree nor disagree
   o Disagree
   o Strongly disagree

6. Since completing VeggieRx I cannot afford to buy as many vegetables and fruits.
   o Strongly agree
   o Agree
   o Neither agree nor disagree
   o Disagree
   o Strongly disagree

7. Since completing VeggieRx I am more motivated to eat vegetables and fruits than before I started the program.
   o Strongly agree
   o Agree
   o Neither agree nor disagree
   o Disagree
   o Strongly disagree

8. Since completing VeggieRx barrier(s) to getting fresh produce are: (please check all that apply)
   o Not enough time
   o Not enough money
   o Not available where I shop
   o Lack of transportation
   o It’s physically hard to get to the store
   o There are no barriers
   o Other (please specify) __________________________________________________
9. Based on the guide pictures above, about how many cups of vegetables do you eat each day?
   - None
   - Some, but less than 1 cup
   - 1 to less than 2 cups
   - 2 cups to less than 3 cups
   - 3 cups to less than 4 cups
   - 4 cups to less than 5 cups
   - More than 5 cups
10. Based on the guide pictures above, about how many cups of fruit do you eat each day?
   - None
   - Some, but less than 1 cup
   - 1 to less than 2 cups
   - 2 cups to less than 3 cups
   - 3 cups to less than 4 cups
   - 4 cups to less than 5 cups
   - more than 5 cups

11. About how many days per week do you eat 5 or more cups of vegetables and fruit (combined) per day?
   - 0
   - 1-2
   - 3-4
   - 5-6
   - 7
12. Based on the guide picture above. How often would you say you eat a balanced meal?
   - Less than once a month
   - Once a month
   - A few times a month
   - Above once a week
   - A few times a week
   - Everyday

13. In the last 30 days, how often would you say you could afford to eat balanced meals?
   - Less than once a month
   - Once a month
   - A few times a month
   - About once a week
   - A few times a week
   - Everyday
Shopping for and cooking with vegetables and fruits

We are asking the following questions to understand your current experiences with shopping for and preparing vegetables and fruits.

14. How often do you purchase vegetables and fruits when you shop at the grocery store?
   - More than once a week
   - About once a week
   - About once every 2 weeks
   - About once a month
   - Never

15. More than half of the vegetables I buy at the grocery store are…. (please select 1 answer only).
   - Ready-to-eat
   - Canned
   - Frozen
   - Fresh
   - Other (please specify) ____________________________________________

16. Please pick what you think would be the best way for you to get produce in a future VeggieRx program (please choose only 1)
   - Farmers market
   - Grocery store
   - Mobile truck at hospital or clinic
   - Food pantry
   - Community supported agriculture (CSA)
   - I have no preference

Thank you!
Thank you for completing this questionnaire. All of your answers will remain confidential. Once you complete the survey we will send you a $20 gift card to purchase produce. Thank you for participating in the VeggieRx pilot program.

17. Do you have any other comments, questions, or concerns?

18. Where would you like to shop for your produce?
   - Grocery Outlet
   - Safeway
   - Fred Meyer

19. Please provide your contact information. Once you complete the survey we will send you a $20 gift card to purchase produce
   - Name _____________________________________________
   - Address____________________________________________
   - City/Town __________________________________________
   - ZIP/Postal code ______________________________________
   - Phone number _______________________________________
APPENDIX VII: VENDOR SURVEY

We want to hear your opinions on the VeggieRx program
The VeggieRx Pilot Program is a nutrition program. Its goals are to: 1) improve the health of food insecure patients with diet-modifiable disease by providing them with vouchers for produce to increase their consumption of fresh vegetables and fruit, and 2) Increase access to fresh food by supporting the local food system in Central Oregon. We are reaching out to you because you were a vendor at the Bend Farmers Market. We understand how busy you are and thank you for completing this 3-minute survey to help us understand your experiences with the VeggieRx program. All of your answers will remain anonymous and confidential. Questions or concerns? please contact Hannah Brzozowski at 541-610-6046 or hannah@hdffa.org.

1. Do you know about the VeggieRx program?
   - Yes
   - No
   - Don’t know

2. Did you accept vouchers for the VeggieRx program?
   - Yes
   - No

Your opinions on the VeggieRx program
Please let us know your opinions on working with the VeggieRx program

3. Signing up to become a vendor for VeggieRx was easy
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
   - Strongly disagree

4. Getting reimbursed for VeggieRx vouchers was done in a timely fashion
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
   - Strongly disagree

5. I am interested in continuing to be a vendor for the VeggieRx program
   - Strongly agree
   - Agree
   - Neither agree nor disagree
   - Disagree
6. Approximately, VeggieRx increased my 2018 Bend Farmers Market sales revenue by….  
   o 0-5%  
   o 6-10%  
   o 10-15%  
   o 16-25%  
   o more than 25%  
   o If you know the exact % please write it in here ______________

7. Overall, my experience as a vendor for VeggieRx was  
   o Very positive  
   o Positive  
   o Neutral  
   o Negative  
   o Very negative  

8. Please share any of your thoughts or comments on the VeggieRx program________

9. Would you like to know more about VeggieRx? If so, please provide your contact information  
   o Name ________________________________  
   o Company ______________________________  
   o City/Town _______________________________  
   o ZIP/Postal code ____________________________  
   o Email address ____________________________  
   o Phone number ____________________________
Appendix IX: HDFFA VeggieRx Pad

Veggie Rx
Free Produce Prescription Program

Patient name:
Date:

Prescription: Veggie Rx, a nutrition program designed to improve your health by providing you with vouchers for produce to increase your consumption of fresh vegetables and fruit.

Referring provider:
Number of refills: 0

How it works: Eligible participants obtain and redeem $20 worth of produce vouchers, each week, for 8 consecutive weeks at the Bend Farmers Market. In this program, you will work closely with a registered dietitian nutrition to learn to purchase, prep care and cook fresh food understand the importance of vegetables and fruit to a healthy diet and gain access to additional nutrition education. Contact Hannah at Hannah@hdffa.org or 541-610-6046 for more information.

To confirm eligibility contact:
Hannah Brzozowski, Veggie Rx CHW
541-610-6046 | hannah@hdffa.org

$185 VALUE!