

**D.C. Department of Small and Local Business Development**



**DC Central Kitchen  
Healthy Food Retail Program Closeout Report Cover Letter**

**Reporting Period:** July 1<sup>st</sup> 2011 – March 31<sup>st</sup> 2012

**Contact:** Joelle Johnson, *Program Manager*

[jjohnson@dccentralkitchen.org](mailto:jjohnson@dccentralkitchen.org)

202-400-2806

**Project Narrative Includes: (include page numbers)**

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- ☐ Final Performance Measures
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**Healthy Food Retail Program Guide  
Grantee Closeout Report**

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## Healthy Food Retail Program Guide Grantee Closeout Report

### Executive Summary

The District of Columbia faces a crisis of unequal food access. The lack of healthy food infrastructure in DC's low-income neighborhoods contributes to negative health outcomes such as obesity, diabetes, and heart-disease. In response to this disparity and its dire consequences, the DC City Council passed the Feed DC Act. As part of the Act, the District Department of Small and Local Business (DSLBD) asked area nonprofit organizations to develop proposals for a **Healthy Food Retail Program** (HFRP) that would distribute healthy options to corner stores in underserved communities. In May 2011, DSLBD selected DC Central Kitchen (DCKK), an organization with two decades of experience in preparing and distributing healthy food to at-risk populations, to implement its pilot Healthy Corners program.

DCKK laid out the following goals for its six-month pilot program:

- Providing *nutrition education, training, and business assistance services* to at least twenty (20) small food retailers;
- Establishing and operating a pilot *commercial distribution system* for fresh produce and healthy foods, and;
- Preparing a *Healthy Food Retail Program Guide* that details the steps, permits, licenses, and costs involved in the commercial distribution system.

After a six-month grant period (extended for an additional three months) that ran from July 2011 through March 2012, **DCKK met or exceeded each of its goals**. We developed and refined procedures for: training local small business owners in safe food handling and effective display practices; conducting in-store promotional activities; packaging and preparing appealing healthy products; and tracking store sales. We ultimately enrolled 33 different stores in the program, serving as many as 30 at one time through weekly deliveries and infrastructure assistance.<sup>1</sup> And our HFRP Guide and Final Report carefully detail the steps taken and lessons learned over the length of the grant. These efforts successfully brought quality food options to corner stores in DC's 'food deserts' while creating at least two full-time and three part-time jobs for District residents.

**In sum, the Healthy Food Retail Program worked exactly as public-private partnerships are supposed to.** The District offered adequate start-up funds that inspired DC Central Kitchen to launch a new program. We then worked with District entities – both DSLBD and the Department of Health – to access expertise, connect with key non- and for-profit community partners, and develop best practices. And with the results of our pilot program in hand, we won outside grant funding to continue Healthy Corners throughout 2012. The results and outlook of this initiative are strong; and the future of the communities and small business we serve is bright.



Michael F. Curtin, Jr.  
Chief Executive Officer  
DC Central Kitchen

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<sup>1</sup> See Appendix P for signed store contracts

## Healthy Food Retail Program Guide Grantee Closeout Report

**Grantee Organization:** DC Central Kitchen

**Date:** July 1<sup>st</sup> 2011-March 31<sup>st</sup> 2012 Closeout Report

### **I. Project Overview and Purpose:**

Our nation's capital is marred by a broken food distribution system in its most impoverished communities. These neighborhoods meet the definition of 'food deserts' – low-income areas that lack retail access to healthy, fresh food items. The District of Columbia's Feed DC Act targeted this problem in a variety of ways. In addition to providing incentives that sought to attract full-service grocers to low-income, underserved areas of the city, FEED DC looked to small retailers and corner stores already operating in target neighborhoods and communities. Earlier partnerships with these small local retailers were limited by the absence of a sustainable, affordable source of quality fresh produce. But if such a source could be identified and stores could be empowered to successfully sell healthy food items, potential benefits abounded:

- **New revenue for local small businesses;**
- **Higher quality food options** for residents of DC food deserts, contributing to improved health outcomes;
- **Tax revenue** stemming from the employment of District residents.

But before the city could reach these ultimate outcomes, it had to overcome considerable hurdles. From an economic standpoint, businesses had to be able to obtain these items at feasible prices and sell them at prices appealing to their customers. Retailers also had to believe that customers would choose these healthy options over less nutritious items, even when price was no longer a factor. And even if businesses believed there was a market for such goods, they needed the space, infrastructure, and business capacity to successfully stock and sell them. Each of these barriers—some economic, some psychological, some physical—had to be eliminated to open the way for fresh, healthy food in DC's food deserts.

Citing these challenges, the District Department of Small and Local Business (DSLBD), issued a Request for Proposals (RFP) for its Healthy Food Retail Program (HFRP) in April 2011. DC Central Kitchen (DCK), a Washington, DC nonprofit organization with two decades of experience in preparing and distributing healthy food to at-risk population, responded with a proposal in May 2011. On May 23, DSLBD conditionally selected DCK to receive its \$300,000 in HFRP funding in a grant period originally slated to run from June to December 2011.

#### **Stated Goals:**

- **Providing nutrition education, training, and business assistance services** to at least twenty (20) small food retailers;
- **Establishing and operating a pilot commercial distribution system** for fresh produce and healthy foods; and,
- **Preparing a Healthy Food Retail Program Guide** that details the steps, permits, licenses, and costs involved in the commercial distribution system

DC Central Kitchen became interested in this program primarily because of its mission to use food as a tool to strengthen bodies, empower minds, and build communities; Healthy Corners was designed to advance each of those purposes. But DCK's ambitions went beyond distributing food and training store owners; we wanted to create jobs in our community. Like all

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DC Central Kitchen programs, Healthy Corners helped us employ the formerly homeless, incarcerated, or addicted men and women who graduate from our Culinary Job Training program. Since our founding, we have trained unemployed, severely at-risk adult residents of Washington, DC for new careers and employ them at living wages in our kitchens. Each day, our graduates, many of them residents of wards 7 and 8, prepare and deliver the produce and snacks used in Healthy Corners. In doing so, we turned a vicious cycle of poverty and poor health into a virtuous one of prosperity and empowerment.

## II. Performance Indicators & Deliverables

### 1) Business Assistance

#### Overview

DCCK's plan for **business assistance** involved *physical infrastructure assistance* and *technical training and marketing*. *Physical infrastructure assistance* included providing stores with table-top refrigeration units and wire shelving units that could display Healthy Corners food items in a safe, appealing, and prominent fashion. The purchases of these items were subject to DSLBD's Certified Business Enterprises (CBE) stipulations, as pursuant to the Small, Local, and Disadvantaged Business Enterprise Development and Assistance Act of 2005. DCCK *successfully met its 50% spending benchmark*, purchasing \$25,474.54 worth of tabletop refrigerators, stainless steel countertops, and wire shelving units from CBEs out of \$47,105.50 applicable funds allocated for such items in total. CBE qualifying purchase categories included store equipment and printed materials. There was a total of \$51,000.00 allocated for these purchases, but \$3,894.50 was spent on newspaper ads and dry erase price tags that had to be purchases from specific business entities who did not qualify for CBE status. Thus, these funds were subtracted from the total applicable allocated funds.

DCCK's *technical training and marketing* efforts, meanwhile, included training corner store owners in: pricing and merchandising; new equipment usage; and marketing, displays, and sales.<sup>2</sup> We retained a business development consultant, Saheed of Green Consulting, who conducted baseline business assessments both at the beginning of the program and then again in the final month of the program<sup>3</sup>. Assessments were used as a tool to evaluate store operations and capacity in order for the consultant to provide each store with individualized recommendations for improvements. Our marketing support included helping store owners advertise Healthy Corners products inside and immediately outside of their stores; placing advertisements in three community newspapers, promoting the program through community events and through online and television media outlets, including CNN.<sup>4, 5</sup>

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<sup>2</sup> See Appendix A for a complete list of store training materials

<sup>3</sup> See Appendix B for preliminary and final business assessments

<sup>4</sup> See Appendix C for advertisements in community newspapers and online and television media promotions

<sup>5</sup> See Appendix D for a list of community events

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Healthy Corners display at Marbury Market, with owner Jimmy Singleton

### Action Area A: Counseling

All participating retailers received business assistance counseling that consisted of business assessments, marketing training, equipment set-up, and energy audits conducted by the Department of Energy<sup>6</sup>. Business assessments included all deliverables outlined in the grant - business name, business ward location, name of contact, assessment date, length of assessment, and hours of operation. Also, the summary report for each consultation included a list of recommended infrastructure improvements and related costs, list of best practices, “how to” fact-sheets for each consultation topic, and a post-consultation summary for each store.

Marketing trainings consisted of one-on-one meetings with store owners about such topics as merchandising and pricing. Each store owner was given a Store Owner Training Manual which served as a comprehensive guide for how to sell healthy snacks and fresh produce in a small retailer outlet<sup>7</sup>. Upon signing up for the program, stores received equipment and sales training. Additionally, retailers received at least one site visit per week by the program coordinator to check up on business improvement, sales, displays, pricing, and to answer any questions or provide additional training if needed. Stores who needed more thorough training ended up receiving more than one site visit per week. Finally, the Department of Energy partnered with Healthy Corners to provide partner retailers with energy audits valued up to \$500.

### Action Area B: Outreach

DCKK administered two forms of outreach; **store outreach** and **community outreach**. **Store outreach** began in July when we set out to sign up the first group of stores. Each store received a *free table-top refrigeration unit* and wire shelf with baskets, ensuring an attractive,

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<sup>6</sup> See Appendix E for energy audit applications

<sup>7</sup> See Appendix F for Store Owner Training Manual

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prominent display for Healthy Corners items. Deliveries began in September to a dozen stores, and DCKK continued store outreach efforts until a total of 30 stores enrolled in the program in December. Over the length of the grant, DCKK successfully enrolled a total of 33 stores, though the total number of stores served at any one time peaked at 30.<sup>8</sup>

At the onset of the program, store outreach was focused in wards 5, 7, and 8 because these neighborhoods met the definition of ‘food deserts’ – low-income areas that lacked retail access to healthy, fresh food items. However, as the program gained notoriety across the city, stores from ward 4, and one store on the boarder of ward 1 and 4, located on lower Georgia Avenue, began calling and asking to participate in the program. Ward 4, *as whole*, does not technically fit the definition of a food desert because parts of Ward 4 have higher income populations. But in recent years, lower Georgia Avenue has become a food desert as several of the nearby grocery stores have closed down and characteristically, this area is predominately home to lower income residents. Eventually, DC Central Kitchen decided to admit two stores on lower Georgia Avenue to the program; since then, these two retailers emerged as two of the top performing stores in the Healthy Corners program.

Over the course of this pilot program, four stores ceased participation. DC Central Kitchen conducted an exit interview with each. The key characteristic shared by each drop-out was a general lack of enthusiasm for the program, both when originally agreeing to participate and throughout the duration of their participation. These four store owners indicated low sales as a driving factor behind leaving the program, but there were no structural reasons, such as location or store size that indicated a ‘type’ of store that would be less likely to succeed in this program. *Attitude, it seems, was everything.*

DCKK also conducted extensive **community outreach** throughout the duration of the program. Community outreach events were logged in a working document.<sup>9</sup> For each event staff tracked materials disseminated, media used, frequency of distribution, number of emails in distribution lists, and number of businesses engaged through the outreach efforts. *Taste tests* were conducted at each store to attract new customers and educated them about the program.<sup>10</sup> *Customer satisfaction surveys* were also conducted at 18 different stores.<sup>11</sup> Surveys allowed DCKK to communicate with store owners what customers liked and disliked about their healthy food selection. Online community outreach occurred through several email blasts sent out by both DC Central Kitchen and DC Hunger Solutions to their organizational email list serves.<sup>12</sup> Further community outreach was conducted in conjunction with nutrition education and is outlined in section 2, below.

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<sup>8</sup> See Table A on page 7

<sup>8</sup> See Appendix G for store exit interviews

<sup>9</sup> See Appendix D for outreach log

<sup>10</sup> See Appendix D for a calendar of taste tests conducted

<sup>11</sup> See Appendix H for survey results

<sup>12</sup> See Appendix C for email blast content

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**Table A – Participating Small Retailers**

Capitol Food Mart	Ibrahim Hussein	240-481-8413	1634 North Capitol Street NE	Ward 5
Circle 7	Tesfom Bockrreزيون	240-481-3524	1211 Mt. Olivet Rd NE	Ward 5
Darby's Market	Ashir Yousaf		1136 Florida Ave NE	Ward 5
DC Mini Mart	Samuel Ashine	202-215-6558	1828 First Street NW	Ward 5
Dollar Plus Grocery	Jemal Raju	202-469-0140	936 Rhode Island Ave NE	Ward 5
North East Super Market*	Soon Hee Jung	240-252-0433	1209 Mt. Olivet Rd NE	Ward 5
Neighborhood Market	Kyeong Kim	443-695-3720	1611 Rhode Island Ave NE	Ward 5
Saba One Stop	Saba	202-388-0902	1364 Florida Ave NE	Ward 5
T&G Grocery	Tigst Yaekob	202-269-9077	1727 North Capitol Street NE	Ward 5
Window's Café & Market	Hunegnaw Abeje	202-462-6585	101 Rhode Island Ave NE	Ward 5
McKinley Market	Taz	(202)299-7378	321 T Street NE	Ward 5
A-1 Grocery	Frank Han	202-388-1830	615 Division Ave NE	Ward 7
A&S Grocery	Hoy Lee	703-400-1963	4748 Sheriff Rd NE	Ward 7
Dollar Plus Food Store*	Melesse Hunde	202-248-7104	609 Division Ave NE	Ward 7
G&G Grocery	James Sok	202-582-3550	2924 Minnesota Ave SE	Ward 7
Greenway Market	Meb	973-652-2589	3542 Minnesota Ave NE	Ward 7
Menick's Market	Danny Kim	202-397-1006	4401 Nannie Helen Burroughs Ave. NE	Ward 7
Mike's Market and Restaurant	Birhanu Abas		4202 Benning Rd. NE	Ward 7
Penn Way*	Sebah Abolo	202-344-0438	3833 Pennsylvania Ave SE	Ward 7
Suburban Market	Irvin Parker	202-399-9511	4600 Sheriff Rd NE	Ward 7
Toni's Market	Hu Kim	202-583-0931	5319 East Capitol Street SE	Ward 7
2 <sup>nd</sup> Chance Convenience Store	Myron Thomas	202-270-2619	2026 MLK Jr. Ave SE	Ward 8
Alabama Convenience Store*	Elisa Om		2209 Alabama Ave SE	Ward 8
Anacostia Market	Ephrem	301-332-9509	1303 Good Hope Rd SE	Ward 8
Corner Market	Yonai Haile	200-610-7315	1449 Howard Rd SE	Ward 8
Dollar Plus Food Store	Maruye Ayalaw	301-332-9509	4837 Benning Rd SE	Ward 8
Elmira Grocery	Geremew Gebru	202-563-1078	4401 South Capitol Street SW	Ward 8
Holiday Market	Lax	202-562-0359	3501 Wheeler Rd SE	Ward 8
Marbury Market	Jimmy Singleton	202-610-1110	2300 Good Hope Rd SE	Ward 8
MLK Grocery	Andrew Cho	202-889-3118	2420 MLK Jr. Ave SE	Ward 8
MLK Mini Mart	Daniel Mezmur	202-412-3395	3333 MLK Jr. Ave	Ward 8
GE-EZ Grocery	Wandesen Bedane	240-644-2867	5912 Georgia Ave NW	Ward 4
Georgia Ave Market	Isehay Meshesha	(202)829-1997	3128 Georgia Ave NW	Ward 4/1

*\*indicates stores who left the program before March 31<sup>st</sup>*

**A. Performance Metrics**

**Baseline business assessments conducted: 30**

**Closeout business assessments conducted: 28**

**Marketing trainings offered to stores owners & staff: 900**

33 visits to set up each store with equipment and sales training (2 hours each)

58 site visits from Business Consultant (2 hours each)

18 customer survey visits (1 hour each)

Approximately 800 weekly site visits (30 minutes – 1 hour each)

**Hours of Training Conducted: 1,000 hours**

**Mini-grant assessments conducted: 33**

**Mini-grants fulfilled: 33**

**Energy Audit Applications submitted: 8**



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### B. Key Accomplishments

- DCCCK purchased all store equipment from a certified local CBE business entity
- DCCCK developed advertisements that were published in the *Washington Informer*, *Mid-City* and *East of the River* publications. These three postings reached an estimated 110,000 community members.
- Run Riot films produced a brief video on the impact of the Healthy Corners program which currently has 643 views. It was also featured in three publications and is displayed on the DC Central Kitchen website.
- CNN filmed a story on Healthy Corners that aired in December during their Giving in Focus series. CNN also posted a story on their blog. Combined, CNN's television and online reach allowed these profiles to reach a viewership of over 4 million people.
- DCCCK's contracted business consultant conducted comprehensive business assessments for all participating retailers.
- DCCCK created extensive and lasting partnerships that enabled us to successfully promote the program on both a local and national level.

### C. Total Population Served/Reached:

34 DC small business owners received *business outreach* services. Based on circulation and viewership rates, we estimate that more than 150,000 people were reached by our *community outreach* activities promoting the program. Healthy Corners was promoted in 16 different publications, including 6 print or online media outlets, 3 printed advertisements in local newspapers distributed in wards 5, 7, and 8, 4 videos, and 3 email blasts.<sup>13</sup> Based on circulation and social media followers for these media outlets, promotions potentially reached up to 6,000,000 people nationwide.

### D. Significant Partnerships and Related Activities

- DC Hunger Solutions
  - Offered training on SNAP acceptance for corner store owners
  - Assisted in the development of the Store Owner Training Manual
- Many Languages One Voice
  - Provided translations of relevant materials for store owners in Amharic and Korean
- Run Riot
  - Produced a short film about the Healthy Corners project which was viewed 643 times and reposted by 3 publications, DC Central Kitchen and numerous individuals
- Capitol Community News
  - Advertised Healthy Corners stores in the March edition of the Mid-City reaching an estimated 15,000 community members in wards 1, 2, 3, 4 and 5
  - Advertised Healthy Corners stores in the March edition of the East of the River reaching an estimated 15,000 community members in wards 7 and 8
- The Washington Informer
  - Advertised Healthy Corners stores in the February 16<sup>th</sup> edition of the publication reaching an estimated 80,000 community members
- Greenway Consulting

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<sup>13</sup> See Appendix C for a complete and detailed list of media publications

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- Provided consulting services for all participating stores
- Curtis Equipment
  - A CBE certified business who assisted with the purchase and sale of all store equipment
- Department of Energy
  - Conducted energy audits for 6 participating stores

### 2) Nutrition Education and Outreach

**Overview:** Nutrition education and outreach activities targeted two groups: **partner retailers** and **community members**. For **partner retailers**, DCKK staff provided comprehensive *Store Owner Training Manuals* with extensive nutrition education information including how to identify healthy foods, read labels, and successful market nutritious food in small retailer outlets. Staff also met with each store owner to discuss any questions they had pertaining to nutrition, SNAP benefits, and the promotion and sale of healthy foods.

For **community members**, DCKK conducted promotional taste test events at each store and developed and distributed informational materials for corner store customers and community members. DCKK sent educational postcards to WIC-receiving households in Wards 5, 7, and 8 and shared informative materials with 13 different community partners and sites including schools, community centers, and social service providers. And all Healthy Corners stores were added to the DC Food Finder, a popular online resource that connects low-income DC residents to nearby food resources.<sup>14</sup>



*Healthy Corners display at Suburban Market, with owner Irvin Parker*

#### Action Area A: Counseling

Stores received *nutrition education counseling* in the form of training manuals, site visits, SNAP education, and educational material distribution. DC Central Kitchen's Nutrition Education and Outreach Coordinator (NEOC) worked closely with stores to conduct site visits in which she disseminated and reviewed nutrition education materials that were displayed in stores to help educate customers about healthy food choices.<sup>15</sup> The NEOC also met with

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<sup>14</sup> See Appendix I for a complete list of nutrition education and outreach materials

<sup>15</sup> See section V for an explanation of the Nutrition Education and Outreach Coordinator. A complete job description can be found in Appendix L

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three retailers who were not currently accepting SNAP benefits; she taught them how to apply for a SNAP-EBT machine and showed them how this addition would help *increase their sales*. Initially, DCKK planned to provide SNAP education to at least 10 store owners, but quickly found that all participating stores except these three already accepted SNAP benefits.

### Action Area B: Outreach

Aside from store outreach, the majority of outreach time was spent connecting with residents of wards 5, 7, and 8 through community events and information distribution. The NEOC conducted 36 *taste tests* (at least one per store), providing samples of Healthy Corners products and recipe cards that would allow customers to recreate the sampled dishes at home.<sup>16</sup> Taste tests were conducted outside, right in front of each store, in an effort to attract the highest number of potential customers. The NEOC also conducted direct community outreach at a variety of community events in all three target wards. The NEOC often attended events hosted by other organizations focused on health promotion, which in turn invited DCKK to participate and promote Healthy Corners.<sup>17</sup> DCKK performed additional outreach through paid advertisements, postcard mailings to WIC recipients, and through information distribution sites (listed in the attached outreach log).

### A. Performance Metrics

**Trainings and events offered to store owners:** 60 trainings

21 site visit and nutrition education training

36 taste tests

3 SNAP training visits

**Events offered to community members:** 71

**Hours of training and outreach conducted:** 240

**Community members educated and engaged:** 130,000

9,893 directly reached

120,000+ indirectly reached through advertisements, outreach publications, and information distributed to community partners and local agencies

**Information Distribution sites:** 112

**Materials distributed:** 20,000

Healthy Corners rack cards	4,383
Nutrition info tear-pads	50
Recipe cards	1,714
GetFED Grocery Gap flier	885
Store Maps	1,235
Price comparison charts	530
Healthy Corners one-pager	369
Stickers	197
DCHS Food Assistance card	200
Nutrition Education rack cards	2,500
Outreach postcards	5,850
Healthy Corners Flyer/Newsletter	785
Healthy Breakfast flyer	476
DC Food Finder flyer	27
Nutrition Poster	28

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<sup>16</sup> See Appendix I for a complete list of nutrition education materials distributed, including recipe cards

<sup>17</sup> See Appendix D for a complete list of outreach events

## **B. Key Accomplishments**

- DCKC conducted 36 promotional taste test events, with at least one per store – except for one, which opted not to host an event. These taste tests offered samples of fresh fruit salad, granola, seasonal sweet potatoes and banana bread. DCKC distributed recipe cards at each event, empowering customers to make the profiled dish at home. *All recipes were based on ingredients that could be purchased at a Healthy Corners store.*
- DCKC sent outreach postcards to 5,850 WIC receiving households in wards 5, 7, and 8.
- DCKC developed 5 unique nutrition education items and distributed them to customers and community members. Each item shared different information on making healthy choices including general nutrition and exercise, info on fruits and vegetables, healthy recipes, smart snacking, and healthy breakfasts (attached).
- DCKC distributed informative posters, flyers and materials to 113 different community partners and sites including schools, community centers, and social service providers. The posters and materials provided program information and store locations (attached).
- All Healthy Corners stores were added to the DC Food Finder, a well-used community resource that connects low-income DC residents to food resources in their neighborhood through an online tool. The site is viewed by approximately 500 unique individuals per month and is used to operate the Hunger Hotline.
- DCKC held a Truck Farm demonstration in August at the kick-off event held at Deanwood Recreation Center in Ward 7.
- Consulted with 3 participating retailers to discuss accepting SNAP benefits at their stores.
- Conducted 57 outreach events across all 3 wards:
  - **Ward 5** - 18 events in ward 5; 2 publications specifically geared towards ward 5; 29 information distribution sites.
  - **Ward 7** - 14 events in ward 7; 2 publications specifically geared towards ward 7; 26 information distribution sites.
  - **Ward 8** - 25 events in ward 8; 2 publications specifically geared towards ward 8; 21 information distribution sites.

## **C. Total Population Served**

9,893 = community member reached directly through outreach events  
889 = community members reached directly through in-store taste tests  
113 = number of information distribution sites reaching the wider community  
119,000 = individuals reached by 16 publications  
130,000 = estimated total individuals reached

## **D. Significant Partnerships and Related Activities**

Over the course of this program DCKC developed several important partnerships with preexisting community organizations and individuals

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- District Department of Health
  - Provided assistance in mailing and delivering outreach postcards to WIC households in Wards 5, 7 and 8
  - Distributed information to the mobile WIC clinic and other community health services
  - Partnered on presentations to Ward 8 Health council and other government bodies
  - Offered guidance on outreach activities and customer satisfaction surveys
- DC Hunger Solutions
  - Provided insight and research on relevant nutrition education curriculum and signage
  - Assisted in the development of the Store Owner Training Manual
  - Assisted in uploading Healthy Corners data to the DC Food Finder
  - Developed an outreach email blast which they distributed to their list of 1400 contacts
- GetFED
  - Conducted significant outreach in Ward 8
  - Distributed Healthy Corners materials and developed new materials
  - Spread the word about the Healthy Corners program through their blog and Facebook page
  - Presented information to important community agencies including the Summit Health Institute for Research and Education (SHIRE), APHA and farmers markets
- Farmers' markets
  - We partnered with the Ward 8 Farmers Market, Bloomingdale Market, Aya Community Market, and Bread for the City's free monthly market
  - Supported outreach to community members at their regular markets
  - Promoted the program as a valuable alternative when farmers markets are not in season
- Ward 8 Health Council
  - Listened to presentations on the current state of the Healthy Corners program
  - Helped us to share valuable program information with key DC officials and community players
  - Offered support and insight on the initiative
- Food Day
  - A nationwide day supporting fresh, healthy, local food for all individuals
- 8D ANC
  - Wrote an official letter of support for the Healthy Corners initiative<sup>18</sup>

### 3) Commercial Food Distribution Activities

**Overview:** DCCK's plan for **commercial food distribution** leveraged existing relationships with local farmers and area wholesale food distribution companies. With these relationships in hand, DCCK developed a successful distribution system providing deliveries of fresh produce and healthy snacks in a simple and user-friendly manner for participating corner

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<sup>18</sup> See Appendix J for the 8D ANC letter of support

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stores. DCKK provided weekly deliveries of produce and snacks to a target total of 30 corner stores, along with suggested retail prices, eliminating any pricing guesswork for participating stores. DCKK also elected to sell goods by-the-item rather than by weight, as scales presented retailers with added costs and complexity. In order to provide comprehensive marketing and sales support, DCKK developed a system for *tracking deliveries and sales* each week.<sup>19</sup>



*Delivering bananas; with Healthy Corners delivery driver, Kowanda Burnell. Kowanda is a recent graduate of DC Central Kitchen's Culinary Job Training Program.*

### A. Performance Metrics

**Total Store Participants: 33**

Ward 4: 2  
Ward 5: 10  
Ward 7: 10  
Ward 8: 11

**Total Store Participants as of March 31st: 28**

Ward 4: 2  
Ward 5: 10  
Ward 7: 9  
Ward 8: 8

**Number of deliveries made: 552**

**Value of food delivered: \$26,578.03**

**Retailer sales: \$13,343.45<sup>20</sup>**

### B. Key Accomplishments

- *DCKK served a total of 34 participating stores, above and beyond the minimum goal of 20.* After several months of outreach and operations, stores began contacting DCKK and asking to enroll in the program.
- *DCKK achieved month over month increases in deliveries and retailer sales.* Deliveries started off slow as DCKK worked to get stores set up with equipment and proper signage.

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<sup>19</sup> See Appendix K for a complete list of commercial food distribution tools

<sup>20</sup> See Appendix K for monthly inventory reports

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But each month, the number of deliveries made to stores increased, and eventually some top-selling stores required twice-weekly deliveries. In turn, retailer sales increased every month. These increases were partially attributable to more and more stores joining the program each month, but consumer awareness and interest also played a large role.

- *DCCCK distributed 21 different fruits, vegetables, and healthy snacks* to participating retailers.<sup>21</sup> The program started off with a small list of easily recognizable and culturally appropriate products to choose from. New products were gradually added in based on requests from store owners and customers. In time, this list grew to incorporate small retail packs of some top-selling items like apples, potatoes, and oranges.
- DCCCK developed inventory sheets to track store sales.
- *By the end of March, all stores were paying full price for their products.* The program began by offering free bundles to new stores who signed on to the program. The idea was that stores would receive free product until there was some buy-in from both store owners and customers. This process took until January, as new stores were still signing up through November. Starting in January, stores were set up on a three-month graduated payment plan – in first month, they paid 30% of the wholesale product cost; in the second, 60%; and in the third they paid the full wholesale price. *Overall, this shift was received well by store owners.* Stores were given the option to drop out of the program when we began charging for bundles. DCCCK reasoned that if products were not selling in certain stores, stores should not feel locked-in to paying for items they could not move. Only two stores decided to drop out of the program due to new cost requirements. For the remaining stores, we saw an increase of store ‘buy-in’ with the program, as owners began to take more interest in keeping their displays clean and their product appealing.
- DCCCK distributed *locally-grown* potatoes, apples, and onions sourced from the Shenandoah Valley Produce Auction in Dayton, VA.

#### C. Total Population Served

- Healthy Corners served residents living in wards 4, 5, 7, 8. According to the 2012 US Census, there are 291,861 individuals living in those wards.

#### D. Significant Partnerships and Related Activities

- Ward 8 Farmers’ Market
  - Held several meetings with the market manager to discuss strategies for purchasing local product from the market farmers for distribution to Healthy Corners stores. As a result, we planned to revisit this idea in more detail in June, when the Ward 8 Farmers’ Market opens.
  - Discussed ways to cross promote healthy corners and the farmer’s market at respective sites.
- Keany Produce
  - A regional produce company and long time partner of DC Central Kitchen who supplied the majority of fresh produce for the program at an affordable wholesale price

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<sup>21</sup> See order forms in Appendix K for detailed list of product offerings

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- Sysco
  - A long-time partner and enthusiastic supporter of DC Central Kitchen who supplied some fresh produce and all of the dry ingredients for this program
- Acme Paper Company
  - Supplied most of the disposable packaging materials for the program
- Shenandoah Valley Produce Auction
  - A Mennonite-run produce auction collaborative of over 450 growers located in Dayton, VA
  - Supplied all of the locally grown produce for Healthy Corners

### III. Healthy Food Retail Program Guide

**Overview:** DC Central Kitchen, with assistance from DC Hunger Solutions, developed a comprehensive Healthy Food Retail Program Guide that was approved by the Department of Small and Local Business Development and submitted to council. The Healthy Food Retail Program Guide is available online at <http://www.dccentralkitchen.org/healthycorners/>.

#### The HFRPG Included:

##### 1) A Healthy Food Retail Program Guide covering the following topics:

- A detailed checklist for how to implement a large scale and small scale commercial distribution system, which will describe all steps of the distribution process from the local grower to the small food retailer and detail related costs;
- A list of purveyors (name, location, opening days/hours, type of produce sold, minimum amounts sold, delivery options and costs, etc);
- Administration costs;
- Payments and payment schedules;
- Challenges;
- Permits and licenses needed (include a complete sample set);
- Cost saving options;
- Adjustments based on seasonal availability of produce etc;
- Korean and Amharic translation if needed

##### 2) A readiness checklist which will:

- Aid small food retailers with the task of progressively repositioning their businesses and selling a larger product line of healthy foods;
- Effective marketing and advertising techniques to promote healthy foods;
- Information on pricing, handling, storage, refrigeration, rotation, and display of healthy foods (fresh and dry goods).

### IV. Jobs Created

Aside from the significant positive impacts Healthy Corners has had on food access and health awareness in some of DC's most underserved communities, this program allowed DC Central Kitchen to *create new jobs*. Like all DC Central Kitchen programs, Healthy Corners helped us employ the formerly homeless, incarcerated, or addicted men and women who graduate from our Culinary Job Training program. Each day, our graduates, many of them residents of wards 7 and 8, prepare and deliver the produce and snacks used in Healthy Corners. In doing so, we



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turned a vicious cycle of poverty and poor health into a virtuous one of prosperity and empowerment.

Aside from the defined positions below, DCCCK called upon several existing staff members for support. These individuals were vital to the success of the program and included a registered dietician to ensure the distribution of accurate nutrition information; a fresh start chef to assist with recipe creation and execution; an assistant delivery driver, also a graduate of the Culinary Job Training program, who provide support with equipment deliveries and set up; and a program manager who oversaw daily operations and administrative responsibilities.

### 1) Full-time Jobs Created

The success of the Healthy Corners program was due in large part to the wonderful, dedicated staff members who worked hard each day to ensure that all participating stores received the best service possible. *DCCCK created two full-time positions;* a retail program coordinator (RPC) and a local delivery driver.<sup>22</sup> The RPC was the main program contact for all store owners. She spent much of her time out in the community and was responsible for recruiting stores, managing relationships, and ensuring smooth daily operations. The delivery driver, a graduate of DCCCK's Culinary Job Training program, assembled food bundles and made weekly deliveries to all stores. She was also responsible for merchandising product, tracking sales, and maintaining positive and open communication with owners. These two full-time positions resulted in *\$50,255.00 of salary gain.*

### 2) Part-time Jobs Created

Behind the scenes, back at the Nutrition Lab, there were many people working hard to support the full-time staff who spent much of their time out in the field, working directly with the stores. DCCCK created *two part-time positions;* a nutrition education and outreach coordinator (NEOC) and a kitchen staff position. The NEOC managed all nutrition education related outreach and trainings. She also worked closely with community members in each ward to garner support and help promote the program. The Kitchen staff member, also a graduate of DCCCK's Culinary Job Training program, assisted the delivery driver with creating homemade, healthy snacks for distribution to stores.



*Graduates of DCCCK's Culinary Job Training Program assembling Healthy Corners trail mix.*

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<sup>22</sup> See Appendix L for job descriptions

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#### V. Lessons Learned and Next Steps

After a six-month grant period (extended for an additional three months) that ran from July 2011 through March 2012, **DCK met or exceeded each of its programmatic goals.** The following section outlines key lessons learned and provides an outlook on the future of Healthy Corners here in Washington, DC.

##### 1) Lessons Learned – The Pilot Program

###### A. The Grantee: The Importance of In-House Capacity & Mission-Driven Programming

DC Central Kitchen was able to launch a successful pilot program in a very short time period, thanks to our **in-house capacity**. We relied on our existing commercial kitchen facility, truck fleet, culinary staff, and food purchasing relationships. Because we purchase so much food from area farmers and distributors for our other programs, we were able to secure bulk-rate discounts and pass those along to our partner corner stores. A start-up operation devoted exclusively to serving corner stores would not be able to offer competitive prices to corner stores, let alone entice them through free product.

DCK's credibility as a **leading local nonprofit organization** also helped kick-start the program. Store owners were familiar with the organization, and understood why DCK would offer them something – food deliveries, training, and infrastructure assistance – for 'nothing' at first. Our high profile in low-income communities in particular helped us gain traction with store owners and customers.

###### B. The Stores: Big Challenges and Cultivating Buy-In

We learned a lot about the attitudes and needs of store owners in these communities. Many saw the value of providing nutritious food, not just monetarily, but in promoting a healthier neighborhood. When store owners were enthusiastic about the program, they took better care of their food items, maintained more appealing displays, and were more engaged in training opportunities. *Attitude, in short, was everything.*

We also learned about the capacities of these stores. We initially offered each store a small, table-top refrigerator to ensure a safe, clean place for our perishable items. After a few months of increasing sales, *most stores outgrew them* and began stocking Healthy Corners products in their main coolers. DCK adapted, printing attractive signs for cooler doors highlighting the presence of our products. The small refrigerators were a necessary first step, but they do not need to be permanent fixtures going forward.

**Most importantly, our gradual phase-in of charging store owners for Healthy Corners items worked.** At first, deliveries were free. After a sufficient demonstration period (usually one month, longer for some early participants), we began charging 30 percent of the wholesale price, then 60, and then finally, after three months, the full price. Some store owners expressed concern that these gradual increases might go on forever; we responded by delivering a weekly price sheet that showed the change – or lack thereof – in each item's wholesale cost from one week to the next. Critically, stores did not stop participating once we began charging. Quite the opposite; *the more stores paid,*

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*the more committed they were to selling these items.* This eye-opening development shows that DCCK's model of careful customer service, developing lasting relationships, and soliciting store owner feedback is sound.

### **C. The Partners: A Diverse Array of Community Connections**

Above, we show that this product succeeded, in part, because DCCK could handle all food purchasing and distribution activities 'in-house.' But we also relied on other partners to implement this program. DC Hunger Solutions helped us design the initial program and prepare the Healthy Food Retail Program Guide. The DC Department of Health helped us produce informational materials for target communities. Deanwood Recreation Center hosted our kick-off event, and several other organizations invited DCCK to promote Healthy Corners to their clients and members. We worked with a business assistance consultant who came recommended to us by DSLBD and understood the unique issues facing small businesses in DC. And we purchased all the table-top refrigerators used in Healthy Corners from Curtis Equipment, a Certified Business Enterprise (CBE). The program might have reached full operating capacity more quickly had we not purchased from a CBE or worked with a consultant already managing several other DSLBD projects, but we made the most community-oriented choices in selecting our partners and believe we *reinvested more resources here in DC* than we might have by working with larger partners.

## **2) Lessons Learned – Program Logistics**

### **A. Business Recruitment**

- In accordance with the FEED DC Act, store selection was based on location in reference to major grocers in wards 5, 7, and 8. Small retailers located the furthest away from major grocery stores were prioritized. Store selection was also based on store owners' interest and willingness to participate. Initial outreach began with stores who participated in the D.C Healthy Corner Store Program of 2008, operated by DC Hunger Solutions. Outreach in ward 7 began with corner stores who participated in pilot programs operated by DSLBD and Deanwood Heights Main Streets in 2009 and 2010.
- This approach worked well because it enabled us to gain footing with a previously unfamiliar sector of the city, the corner store grocers. Conducting outreach alongside DCHS at stores with whom they had a relationship with made it very easy to get the first few stores signed up. Eventually these stores told fellow corner store owners about the program which helped increase interested and enrollment.

### **B. Commercial Food Distribution**

- The food distribution system we created worked well to meet the needs of corner stores. Stores could order items by the piece and receive weekly deliveries with no order minimum.
- However, the system could have been improved with larger vehicles and technological infrastructure. If we had a larger truck we could load full cases of product directly on to the truck and fulfill orders at the store the way a potato chip delivery company would do. If we had the technological infrastructure to create an online ordering system, it would save time collecting orders and owners wouldn't have to order so far in advance. With point of sales machines at each store, we could

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more accurately track sales and success at each store. POS machines would also make it easier to introduce coupon incentive programs.

#### **C. Kitchen Staff**

- Initially two full time kitchen staff members were assigned to this project, but they were phased out after the first few months. In order to keep them on board, we would have had to produce more items from scratch. We were limited by what we could produce due to lack of proper equipment and licensing to sell processed products for retail.
- It was a great asset to the program to have kitchen staff that could help produce healthy snacks. These staff members helped come up with recipe ideas and spent time on recipe creation and daily production to ensure that we could fill orders every week, especially as orders increased month to month. Their time was well spent, improving the quality of food distributed to participating corner stores.

#### **D. Shenandoah Valley Produce Auction**

- Purchasing local produce for Healthy Corners proved to be more difficult than expected. The primary barrier was seasonality. By the time the stores were ready to receive weekly deliveries, the growing season was nearly over. We were able to utilize some local products such as apples, onions, and potatoes, but not nearly as much as we would have liked.
- In order for this to become a sustainable component of the program, seasonality must be taken into account. Just as in big chain grocery stores, locally sourced produce is not a regular offering. It should be advertised as a “seasonal specialty” that can be offered during the spring, summer and fall.

#### **E. Local vs. Nonlocal Produce**

- Based on interviews with store owners and customers, we found no preference for local produce. Most people we talked to were interested in just getting *fresh* foods into their corner stores, regardless of where it comes from. There was a strong preference amongst both store owners and customers for seasonal produce like peaches, watermelon, and berries.

#### **F. Physical Infrastructure Assistance**

- The CBE vendor we worked with to procure fridges and shelves for the stores was very helpful and responsive to our needs. However, we encountered a few challenges when it came to receiving the product. Because Curtis Equipment is such a small vendor and our order was rather large, they had to source the equipment from three different manufacturers. Despite ordering ahead of time, the equipment arrived in 3 different shipments and it took well over a month for everything to arrive. This caused major delays with store set-ups and ultimately put us behind schedule.
- Now that stores have incorporated produce into their daily store offerings, nearly every store has outgrown the table top refrigerators. Looking back, it would have been wise to start stores off with table top refrigerators and then swap them out for larger ones or for credit later on. Cooler space was an issue at every store, but not all stores were willing to make room for coolers because they were not yet committed to selling this product. But after several months of sales and marketing, stores saw the benefit to selling produce and began asking for more refrigeration. So in order to make this a long-term sustainable program, stores need bigger and better fridges.

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- Offering free equipment with program participation ended up being one of our biggest selling points. This meant that stores did not have to sacrifice any existing equipment space which housed top-selling items like candy, chips, and beer, for produce. It may have been more difficult to sign stores up without the equipment incentive. However, now that the program is established, stores seem to be interested in joining regardless of “freebies” or incentives.

### **G. Business Assistance & Trainings**

- Providing store owners with business assistance was challenging for a number of reasons. With all store owners, time was of the essence. We could not expect to get more than five consecutive minutes speaking with any owner and were often interrupted by the normal flow of business. Language was also a barrier as we did not have the luxury of bringing a translator with us on every visit or having all marketing materials translated before distributing them. At one point we did survey store owners to see what their preferred reading language was and all reported “English”. It is obvious that this was not true for several owners, but for unknown reasons they did not want to report their native languages.
- The most effective training elements were the store owner training manual and the taste tests. The store owner training manual worked well because it was comprehensive and easy to read. The taste tests had the most significant impact because they were interactive and drew business to the stores. It also gave customers a chance to ask questions about the different product offerings and how to prepare them.
- It would have been wonderful if we could have found a way to bring store owners together for an hour or so to conduct sales training and marketing. Unfortunately most store owners were reluctant to step away from the store because in most cases there is no one else to run the store if they are not there. At one point we brought in a sales rep to conduct sales training for the program coordinator and driver. This same type of training would have been very effective for store owners. Additionally, it would have been helpful to have outside consultants to conduct cooking demos more frequently, perhaps once a month. If we could have paired demos up with new product offerings every month, it may have a positive impact on sales.
- The baseline business assessments were not that useful. The information gleaned through these assessments consisted mostly of store statistics and suggestions for business improvement. Initially it was thought that the business consultant would be assessing store improvements very closely and on a monthly basis. But in reality he did not have much time to spend with the stores and thus the business assessments sort of fell by the wayside. I think if he had been closely monitoring their progress then this information would have been useful. But since DCKK was more focused on the overall success of the program, rather than the technical improvements of each individual store, we did not find a use for the business assessments.

### **H. Marketing**

- Marketing materials for the program were developed based on what worked well for similar programs like Philadelphia’s Food Trust and the D.C. Healthy Corner pilot program run by DC Hunger Solutions. We also developed many materials in response to requests made by store owners.
- The most effective marketing materials were the recipe cards, rack cards, dry erase price tags, and outdoor store signage. Customers responded well to the recipe cards

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and the rack cards. They were easy to hand out and thus were distributed all across the city. The price tags and signage worked well because they became permanent fixtures in all stores. Customers could recognize our signs in the stores. Outdoor signs worked better than indoor signs because the indoor ones often were torn down or covered up by other advertisements. If we could have done it again, it would have been wise to invest in window clings that could be displayed on fridges, windows and front doors. This would have drawn more attention to the refrigerator section and they would be less likely to get torn down.

- We did not encounter any resistance from store owners in reference to marketing materials.

### **I. Community Outreach**

- The most effective types of outreach were the taste tests and community events. It was difficult to determine the effectiveness of leaving program information at various distribution sites across the city because there was no way to monitor how many materials were picked up by community members passing through the various sites.
- In some cases, Healthy Corners helped store owners become more engaged with their customers. Many store owners already had good rapport with customers since they had been long time businessmen in the area. But we always encouraged owners to ask customers what kinds of produce they would like to see in the store. We also conducted customer surveys that we shared with store owners so they could see what their customers thought about the program.
- Community partners were most useful when it came to conducting community outreach. Many of the groups we partnered with helped us gain entry to groups that we otherwise would not have had ties to. They also helped reduce the number of hours that our staff had to spend on street outreach, so we could focus more of our efforts on daily operations. Partnering with the GW GetFED group was particularly helpful in conducting outreach in Ward 8 as we had a dedicated group of students who spent many hours spreading the word around the ward 8 neighborhoods. The Department of Health was another valuable community partner as they shared many resources and insider knowledge with us. One of their biggest contributions was helping us send out marketing postcards to WIC recipients living in wards 5, 7, and 8. This proved to be a very effective marketing technique.

### **J. Store Owner Trainings Manual**

- Store owners found the pictures that depicted examples of displays, price tags, and marketing materials most helpful. Many store owners did not take the time to read the manual as thoroughly as we would have hoped.
- It would have been helpful if store owners would have paid more attention to the section on how to handle fresh produce and tips for storage and extending shelf life, as this was a common problem at many stores.
- Some owners asked for more detailed marketing and sales tips which we could have included in the manual.

### **K. Nutrition Education**

- Similar to the trainings, it was difficult to find time to discuss nutrition education with owners. We found it more effective to provide customers with nutrition education and store owners with information on how to handle and sell produce.

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Since the main format for distribution of nutrition information was to place handouts near displays, store owners could glean this information for themselves if they chose to.

- Providing nutrition information specifically centered around items available in the stores was most effective. We also designed an effective poster about healthy snacking which specifically targeted youth. It combined pictures of 250 calories worth of commonly eaten junk food alongside pictures of the calorie equivalent for healthy foods so youth could see the difference in portion sizes if they chose a healthy snack.
- To do it all again, providing more information for youth and information about how to prepare foods would have been useful. It may also have been useful to provide more advertising to promote the use of SNAP benefits for fresh produce.

### 3) Next Steps

Going forward, the future outlook and sustainability of Healthy Corners is *extremely promising*. Had a for-profit firm been asked to run this program, they likely would have looked at the high costs of making many small deliveries to stores with uncertain sales projections and respectfully declined. In fact, the inability of private businesses to make this model work is leading reason why ‘food deserts’ exist here in Washington, DC. But because DC Central Kitchen is a mission-driven nonprofit organization, we have the capacity of a business along with the ability to attract grants and donations in support of the ‘social profit’ of what we do.

And, thanks to the initial seed funding of the District government and DSLBD, those grants and donations are coming in. Since our pilot program with DSLBD concluded in March, we have **received major grants from Kaiser Permanente and the Shepherd’s Gift Foundation** to continue Healthy Corners activities throughout the year. As we move forward, we will work to bring our price points closer to where they must be for this program to financially self-sustaining; but until that happens, we are confident in our ability to solicit charitable contributions in support of Healthy Corners.

**In sum, the Healthy Food Retail Program worked exactly as public-private partnerships are supposed to.** We thank the District of Columbia for investing in our program and its promise, and we will continue to work with the DC Department of Health to promote healthy eating and community engagement. Healthy Corners will continue its fight to ameliorate the ill effects of food deserts here in Washington, DC and our successful model is primed for replication around the country as a uniquely successful solution to the interrelated crises of poverty and poor health.

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*Healthy Corners fruit placed near the register at Menick's Market, with owner Danny Kim*

### Store Testimonies

**Store Name: A-1**

**Address: 615 Division Ave NE**

**Store owner: Frank Han**

A-1 has been an enthusiastic participant since the program's inception, back in September 2011. Frank was one of the first store owners to sign on to the program. He began receiving produce bundles at the beginning of November 2011. He began paying for his weekly produce bundles at the beginning of January 2012. Currently, he receives 5 apples, 3 cucumber, 5 white onion, 5 oranges, 3 green peppers, 10 potatoes, 5 tomatoes, 5 trail mix, and 5 granola every week. His top selling products are bananas, onions, and green peppers. He sells out of almost everything before the end of the week.

When we recently spoke with Frank about the program, he said joining Healthy Corners was important to him because he wanted to provide healthy food for the neighborhood. Since joining the program, he commented that "More people are asking for it [fresh produce]. At first almost nothing was being purchased, but step-by-step things are moving". His customers enjoy the fact that they can stop by and pick up just one or two healthy items without having to go all the way to the grocery store. Many of Frank's customers do not have an opportunity to cook, so they prefer the grab and go snacks. A-1 is one of our most successful stores as they have been able to sell nearly all of their products on a weekly basis and overall their customers have been very pleased with the program.

**Store Name: MLK Grocery Store**

**Address: 2420 MLK Jr. Ave SE**

**Store Owner: Andrew Cho**



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MLK Grocery has also been involved with the program since the beginning. Like A-1, he started receiving bundles in November 2011 and began paying for product in January 2012. Currently he receives 5 red apples, 5 green apples, 20 large banana, 10 cucumber, 10 lemon, 20 yellow onion, 10 large oranges, 15 green pepper, 5 red pepper, 20 large potato, 20 tomato, 5 Trail Mix, 3 carrots each week. His top selling products are the fruits – oranges, apples, and bananas. He sells out of these items by the end of every week. We have frequently increased his supply of fruit because he can never keep his shelves stocked!

When we spoke with Andrew about the program, he told us that it was important for him to join Healthy Corners because financially, it made sense. Bulk purchasing is much easier for him and through the program he can purchase exactly what he wants and what he knows he can sell so there will be less waste. He also enjoys the program because he can sell the products for less since we offer it to him at such a low price. The low prices make the product more appealing to his customers, many of whom come from low income households. Andrew also appreciates the consistency of the deliveries. Since bringing the program to Andrew's store, community demand for fresh produce has increased. Andrew said "people are coming in specifically to look for fruits and veggies".

Moving forward, Andrew hopes that the program will maintain the same consistency that he has seen over the past few months so that his customers will keep coming back.

**Store Name: Marbury Market**  
**Address: 2300 Good Hope Rd SE**  
**Store Owner: April Goggans**

Marbury Market is located in the basement of an apartment complex. Their top selling items are trail mix, bananas, apples, oranges, lemons, potatoes, and onions. On a weekly basis the store sells 85%-100% of the products. April wanted to join the Healthy Corners program because she wanted to assist the residents living in the buildings. Marbury Market's sales of increased by nearly 100% since they joined back in September.

The customers also seem to be very pleased with the program. On a store visit a few weeks ago, our program coordinator met one of the customers, who is wheelchair bound. The customer purchased \$40 worth of fruits and vegetables. She told the coordinator that bringing the program to Marbury Market has been so helpful for her and other seniors who live in the building. They no longer have to wait for a bus, call rides, or walk long distances to a store that sells fresh produce. She said that this program has been a blessing to the community and she hopes more programs like Healthy Corners get started in senior wellness centers across the city.

Marbury Market is one of our top performing stores. Both the driver and the coordinators love going to this store. They are always told by customers that the program is convenient and affordable and they are happy to have it in their building.

**Store Name: Saba One Stop Convenience Store**  
**Address: 1363 Florida Ave NE**  
**Store Owner: Saba**

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When we initially reached out to Saba to join the program, she was a little hesitant. But eventually she decided to take a chance and join. Now she is one of our most supportive and compliant stores. Saba's top selling items are trail mix, tomatoes, green peppers, bananas and oranges. On a weekly basis the store sells 85-90% of their product.

Saba eventually decided that she wanted to join the program because she wanted to sell healthier food in her store and to cater to the senior wellness center down the street. We asked Saba how her customers were responding to the program and she told us that the seniors love the program as do the parents in the community who have young children. She also said that her customers are very satisfied with the affordable prices. Saba was so thrilled with the program that she ended up referring a store in Ward 4 to the Healthy Corners program.

Moving forward, she would like us to offer a more diverse selection of fruits and veggies and to assist the community with educational programs about healthy cooking.

**Store Name: McKinley Market**

**Address: 321 T Street NE**

**Store Owner: Taz**

McKinley Market heard about the Healthy Corners program from a friend of theirs who owns a different corner store that also participates in the program. Taz called us eagerly asking to join the program because she had heard such great things about it from her friend. She joined in November and began receiving product in December. Her top selling items are trail mix, bananas, and tomatoes. On a weekly basis she sells around 90% of the products. Taz decided that this program would be the right fit for her store because her customers began to demand fresh produce in their neighborhood as the closest grocery store is a mile away. McKinley Market's sales have increased 100% since they began receiving bundles.

The customers are very happy with the program and satisfied with the product availability and price. Moving forward, Taz hopes that the program will become available to more small businesses in all of the wards.