Produce Rx Best Practice Guide		
Goals	**Objective**	**Best Practice Strategies (Evidence-Based Recommendations)**
Goal 1: Deliver high-quality, culturally appropriate, community-tailored produce prescription programs that prevent and treat chronic disease and improve equitable food access for Marylanders living in high-poverty areas.	**Objective 1.1**: Increase participant engagement through flexible, accessible, and responsive program delivery.	**Flexible Program Delivery** ● Offer home delivery for participants facing transportation barriers ● Provide designated produce pick-up locations for participants with unstable housing or for those for whom home delivery is not feasible ● Offer flexible delivery scheduling, including evenings and weekends, to reduce participation barriers
		Multi-Modal Communication ● Use multiple communication channels, including text messages, emails, phone calls, and printed materials to support participant engagement ● Send reminder messages and follow-up communications to improve program retention (bi-weekly) ● Provide nutrition education materials (such as recipe cards) in print, electronic, and verbal formats to accommodate different learning preferences and literacy levels ● Offer educational materials in multiple languages that reflect the communities being served
	Objective 1.2: Improve food access while promoting participant choice, dignity, and satisfaction.	**Participant Choice and Autonomy** ● Offer flexible food choices and provide participants autonomy over food selection to improve satisfaction, and reduce food waste ● Account for temporary food aversions during pregnancy, particularly toward exotic fruits and vegetables ● Produce offerings should align with participant preferences, cultural practices, and household needs ● Accommodate dietary restrictions and household food practices
		Food Quality and Accessibility ● Rotate produce selections regularly to increase variety and reduce participant fatigue ● Prioritize fresh fruits and vegetables over canned alternatives whenever

		feasible ● Provide consistent, high-quality fresh produce. Poor-quality or spoiled food may reduce engagement and participant satisfaction ● Pair weekly home-delivered food with regular social interaction from dedicated delivery staff to address loneliness and provide support beyond food provision ● Establish mechanisms to address produce quality concerns, such as replacement options or additional produce in future deliveries
		Wraparound Support Services ● Offer remote participation options, including virtual classes, phone-based coaching, and pre-recorded content, to improve accessibility and retention ● Offer cooking classes at convenient times, including evenings, weekends, and multiple time slots ● Provide ingredient substitution guidance to increase recipe accessibility and flexibility ● Allow participants to select recipes and cooking activities to increase relevance and engagement ● Tailor coaching, educational content, and meal planning guidance to participants' goals, circumstances, household size, and needs ● Include trained staff, such as licensed social workers, to support quality monitoring, food safety, participant assessments, and referrals to additional resources ● Promote strategies for maintaining healthy diets within budget constraints ● Provide financial literacy education, such as budgeting and resource management, to support long-term food security and healthy eating habits
	Objective 1.3: Build trusting relationships and supportive community connections.	**Relationship-Centered Program Design** ● Maintain adequate staffing and strong staff-participant relationships to support program implementation ● Build trust, dignity, comfort, and engagement into program interactions ● Protect participant privacy throughout program participation to improve comfort ● Deliver individualized coaching and participant-centered support through trained staff ● Train program staff to use supportive, participant-centered communication

		that includes active listening, encouragement, and individualized guidance to promote engagement and healthy behavior change
		Peer and Community Support ● Engage community members in program development to improve responsiveness to participant needs ● Incorporate peer mentoring opportunities to facilitate support and shared learning ● Offer in-person group activities to strengthen social connections, relationship-building, and participant engagement ● Create opportunities for family members to participate in program activities to promote healthy eating practices across the household
Goal 2: Support healthy eating behaviors and improved health outcomes among participants through nutrition education and related supports.	**Objective 2.1:** Strengthen nutrition knowledge and food preparation skills.	**Nutrition and Culinary Education** ● Encourage participants to try unfamiliar fruits and vegetables by creating a supportive, low-risk environment for food exploration ● Incorporate seasonal recipes to increase familiarity with produce and preparation skills ● Offer group nutrition education to support social connection and engagement ● Tailor nutrition education to participants' lived experiences, including maternal experiences, economic circumstances, family structure, cultural backgrounds, and dietary preferences ● Include experiential nutrition and cooking education to build confidence and skills in healthy food preparation ● Provide culinary support packages, including cooking tools, spices, and other supplies, to support recipe preparation at home ● Offer family-centered cooking classes to encourage household engagement and healthy eating practices ● Include diverse recipes that reflect participant preferences and cultural practices

References

Bryce, R., Guajardo, C., Ilarraza, D., Milgrom, N., Pike, D., Savoie, K., Valbuena, F., & Miller-Matero, L. R. (2017). Participation in a farmers' market fruit and vegetable prescription program at a federally qualified health center improves hemoglobin A1C in low income uncontrolled diabetics. Preventive medicine reports, 7, 176–179. https://doi.org/10.1016/j.pmedr.2017.06.006

Burrington, C. M., Hohensee, T. E., Tallman, N., & Gadomski, A. M. (2020). A pilot study of an online produce market combined with a fruit and vegetable prescription program for rural families. Preventive medicine reports, 17, 101035. https://doi.org/10.1016/j.pmedr.2019.101035

Calloway, E. E., Houghtaling, B., Mitchell, E. J., Talavera, G. E., Zigmont, V. A., Seligman, H. K., Yaroch, A. L., Summerlee, E., & Long, C. R. (2025). Participant Redemption and Engagement in Produce Prescription Programs: A Qualitative Analysis of Implementer Perspectives. Current developments in nutrition, 9(9), 107530. https://doi.org/10.1016/j.cdnut.2025.107530

Caraballo, G., Muleta, H., Parmar, A., Kim, N., Ali, Q., Fischer, L., & Essel, K. (2024). Qualitative Analysis of a Home-Delivered Produce Prescription Intervention to Improve Food and Nutrition Security. Nutrients, 16(23), 4010. https://doi.org/10.3390/nu16234010

Fischer, L., Bodrick, N., Mackey, E. R., McClenny, A., Dazelle, W., McCarron, K., Mork, T., Farmer, N., Haemer, M., & Essel, K. (2022). Feasibility of a Home-Delivery Produce Prescription Program to Address Food Insecurity and Diet Quality in Adults and Children. Nutrients, 14(10), 2006. https://doi.org/10.3390/nu14102006

Johnson, J. K., Vingilis, E., & Terry, A. L. (2023). Patients' experiences with a community fruit and vegetable box program prescribed by their health provider. BMC public health, 23(1), 869. https://doi.org/10.1186/s12889-023-15685-w

Metcalfe, J. J., Prescott, M. P., Schumacher, M., Kownacki, C., & McCaffrey, J. (2022). Community-based culinary and nutrition education intervention promotes fruit and vegetable consumption. Public health nutrition, 25(2), 437–449. https://doi.org/10.1017/S1368980021003797

Newman, T., & Lee, J. S. (2021). Strategies and Challenges: Qualitative Lessons Learned From Georgia Produce Prescription Programs. Health promotion practice, 23(4), 699–707. https://doi.org/10.1177/15248399211028558

Rhodes, E. C., Pérez-Escamilla, R., Okoli, N., Hromi-Fiedler, A., Foster, J., McAndrew, J., Duran-Becerra, B., & Duffany, K. O. (2024). Clients' experiences and satisfaction with produce prescription programs in California: a qualitative evaluation to inform person-centered and respectful program models. Frontiers in public health, 12, 1295291. https://doi.org/10.3389/fpubh.2024.1295291

Schlosser, A. V., Smith, S., Joshi, K., Thornton, A., Trapl, E. S., & Bolen, S. (2019). "You Guys Really Care About Me…": a Qualitative Exploration of a Produce Prescription Program in Safety Net Clinics. Journal of general internal medicine, 34(11), 2567–2574. https://doi.org/10.1007/s11606-019-05326-7

Slagel, N., Newman, T., Sanville, L., Dallas, J., Cotto-Rivera, E., Moore, J., Roberts Mph, A., & Sun Lee, J. (2022). Effects of a Fruit and Vegetable Prescription Program With Expanded Education for Low-Income Adults. Health education & behavior : the official publication of the Society for Public Health Education, 49(5). https://doi.org/10.1177/10901981221091926

Stroud, B. J., & Sastre, L. R. (2025). Evaluation of a Produce Prescription (PRx) Program With Food Literacy and Culinary Medicine Education for Rural, Uninsured Patients With Type-2 Diabetes. American journal of health promotion : AJHP, 39(8). https://doi.org/10.1177/08901171251340385

Vilme, H., Zhang, F. F., O'Tierney-Ginn, P., Sun, C. H., Anyanwu, O. A., Fahmi, R., & Folta, S. C. (2025). Gaining stakeholder perspectives to shape a produce prescription program to improve maternal and birth outcomes: a qualitative study. Frontiers in public health, 12, 1462908. https://doi.org/10.3389/fpubh.2024.1462908

Zimmer, R., Abdelfattah, L., Shenberger, D., Crotts, C., Birken, S., & Hanchate, A. (2026). Impacts of a Produce Prescription Program on Food Security, Diet Quality, and Psychosocial Health of Adults with Medicaid and Chronic Health Conditions: A 12-Month Longitudinal Evaluation. Journal of general internal medicine, 10.1007/s11606-026-10390-x. Advance online publication. https://doi.org/10.1007/s11606-026-10390-x

Zimmer, R. P., Moore, J. B., Yang, M., Evans, J., Best, S., McNeill, S., Harrison, D., Jr, Martin, H., & Montez, K. (2022). Strategies and Lessons Learned from a Home Delivery Food Prescription Program for Older Adults. Journal of nutrition in gerontology and geriatrics, 41(3), 217–234. https://doi.org/10.1080/21551197.2022.2084204

Zimmer, R., Strahley, A., Shenberger, D., Palakshappa, D., Abdelfattah, L., Birken, S. A., Vilardaga, R., Crotts, C., & Hanchate, A. (2026). Fresh Food Rx: Evaluating the Impact of a Produce Prescription Program on Engagement and Well-being Using the RE-AIM Framework. Journal of general internal medicine, 41(4), 997–1009. https://doi.org/10.1007/s11606-025-09687-0