



Miami-Dade County Health Department

A Community Health Improvement Plan developed for implementation through the Consortium for a Healthier Miami-Dade and the Miami-Dade Health Action Network.

2010 Community Health Improvement Plan

A hand in a white shirt sleeve is holding a large, thick black arrow that curves upwards and to the right, pointing towards the top right corner of the page.

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Executive Summary

In 2008, the Consortium for a Healthier Miami-Dade, an initiative of the Miami-Dade County Health Department (MDCHD) engaged the community in the Mobilizing for Action through Planning and Partnerships (MAPP) process. The MAPP process was facilitated by the Health Council of South Florida and is a strategic method to community health improvement, utilizing strategies that allow for a comprehensive approach to identifying the health needs of the community. As part of the Community Health Status Assessment, a Racial and Ethnic Health Disparities report was developed for Miami-Dade County. The report summarized the racial and ethnic health disparities within the county utilizing data from Florida CHARTS (Community Health Assessment Resource Tool Set), the 2007 Living Healthy, Living Longer Survey and the Prevention Quality Indicators from the Agency for Healthcare Research and Quality (Health Council of South Florida, 2008). In addition, the data gathered from the reports was compared to the Healthy People 2010 indicators.

As a result of the MAPP assessment, several themes emerged as the most important strategic priorities for the county, which indicate a need for: 1) health navigators to assist community members in accessing care; 2) increased community education regarding the importance of leading a healthy lifestyle; and 3) the reduction of disparities in health status and outcomes between various populations.

Collaboration is essential when addressing health needs of the community. The MDCHD participates in numerous boards, coalitions and consortiums throughout Miami-Dade County. Moreover, in an effort to address chronic disease prevention and access to care, the MDCHD staff provided the resources to form two multidisciplinary groups: the Consortium for a Healthier Miami-Dade (Consortium) and the Miami-Dade Health Action Network (MD-HAN).

The mission of the Consortium for a Healthier Miami-Dade is to be a major catalyst for healthy living in Miami-Dade through the support and strengthening of policy, systems and environments. The Miami-Dade Health Action Network's mission is to serve as a catalyst and resource for safety net innovation, coordination, collaboration and policy direction that promotes accessible and affordable healthcare to the uninsured and underserved of Miami-Dade County. The Consortium emphasizes preventive care while the MD-HAN concentrates on access and coordination of care. As a result of the Community Health Status Assessment conducted in 2008, the Community Health Improvement Plan was developed and will be implemented through the Consortium for a Healthier Miami-Dade and the Miami-Dade Health Action Network.

The Community Health Improvement Plan contains the guiding goals, objectives and strategies that will be utilized by the community in assuring access to care, improved health outcomes and health equity among all ethnicities. As community needs change, the MDCHD will periodically review and modify the improvement plan accordingly; a revised version will be available in late 2012.

Introduction

The Miami-Dade County Health Department is the local branch of the state public health agency and is charged with promoting and protecting the health and safety of all residents and visitors of Miami-Dade County. Out of the 67 county health departments operating under the Florida Department of Health, MDCHD represents the largest county population and second largest in budget allocation as well as number of employees. The MDCHD works closely with organizations in the community to provide coordination and collaboration of public health services in an effort to capitalize on resources while minimizing duplication. The MDCHD has 42 strategically located facilities throughout the county that are operated by 14 community programs and by 10 operational programs. The MDCHD aligns its programs based on the guidance provided by the Florida Department of Health. The development of strategies, goals and objectives are based on Healthy People 2010, the National Blueprint for Health and targets set by the Florida Department of Health.

In 2008, the Consortium for a Healthier Miami-Dade, an initiative of the Miami-Dade County Health Department engaged the community in Mobilizing for Action through Planning and Partnerships (MAPP). MAPP is a strategic approach to community health improvement and helps communities improve health and quality of life through community-wide strategic planning (Florida Department of Health, 2007). The process was facilitated by the Health Council of South Florida, the entity responsible for conducting regional health planning and implementation activities per section 408.033 of the Florida Statutes. Detailed results from the MAPP process can be found in the 2008 Community Health Status Assessment.

Mobilizing for Action through Planning and Partnerships

The Miami-Dade County Health Department, in partnership with the Health Council of South Florida, engaged stakeholders in several community meetings throughout the course of nine months. Through implementation of the MAPP process, data from numerous sources were examined and four key assessments were conducted: Community Health Status Assessment, Community Themes & Strengths Assessment, Local Public Health System Assessment, and the Forces of Change Assessment.

As a component of the Community Health Status Assessment, a Racial and Ethnic Health Disparities Report was developed for Miami-Dade County. The report summarized the racial and ethnic health disparities within the county by using data derived from the Florida CHARTS resource tool set, the 2007 Living Healthy, Living Longer Survey and the Prevention Quality Indicators from the Agency for Healthcare Research and Quality, while comparing the indicators to those of Healthy People 2010 (Health Council of South Florida, 2008). Based on data examined from 2002-2006, the following ten causes of death in Miami-Dade County exhibited the greatest racial and ethnic disparity and were determined by comparing the average age-adjusted death rates (Health Council of South Florida, 2008):

1. HIV/AIDS - Black death rates were 7.8 times that of Whites and 8.4 times that of Hispanics.

2. Homicide - Black death rates were 4.7 times that of both Whites and Hispanics.
3. Infant Mortality - Black infant mortality in Miami-Dade County was 2.5 times higher than that among Whites, and 3 times the rate of Hispanics
4. Diabetes - Death rates for Blacks were about twice the rate among Whites and Hispanics.
5. Asthma - Black death rates were more than twice the rate among Whites and Hispanics.
6. Prostate Cancer - Death rates for Black men were more than twice the rate for White and Hispanic men.
7. Cervical Cancer - Death rates for Black women were more than twice that of White women, and 2.3 times higher than rates for Hispanic women.
8. Stomach Cancer - While the actual numbers are low, rates of death from stomach cancer among Blacks were just over twice those of Whites and Hispanics.
9. Stroke - Death rates among Blacks were 75% higher than those of Whites and 90% higher than those of Hispanics.
10. Breast Cancer - Death rates among Black women were 41% higher than among White women and 64% higher than rates among Hispanic women.

According to the Living Healthy, Living Longer Survey, there were significant differences in perceptions, behaviors and lifestyles among the different racial and ethnic groups. For example, Hispanics were more likely to report that they were without health insurance at some time in the “past year.” In addition, Hispanics were more likely to report they could not obtain care due to cost, while Blacks were more likely to report difficulty obtaining care due to lack of transportation. Whites and Non-Hispanics were more likely to report participation in leisure-time exercise and physical activity. In regards to nutrition, Whites and Non-Hispanics were more likely to report eating the recommended amount of fruits and vegetables while Blacks were more likely to report they had eaten in a fast food restaurant three or more times in the “past week” (Professional Research Consultants, Inc., 2006).

The Local Public Health System Assessment was conducted in 2006 using the Local Public Health System Performance Assessment Instrument developed by the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC). This tool utilizes the Ten Essential Public Health Services model to guide quality improvement and assess the effectiveness of the community health system (Health Council of South Florida, 2008). The results of the assessment conducted on Miami-Dade County highlight a greater need for an evaluation on the effectiveness of previous and existing public health interventions (Department of Health and Human Services, 2006).

The Communities Themes and Strengths Assessment identified that an abundance of data on consumer/community needs, barriers, and challenges already existed in the community and determined the large quantity of data to be strength in the process. The importance of efforts in the community to foster collaboration and help reduce local

healthcare needs and the need for Health Navigators as an effective means of removing common barriers, were also highlighted as a result of the assessment.

The Forces of Change Assessment, facilitated by the Health Council, was used to guide a discussion about trends, factors, and events that shape the public health environment in Miami-Dade County. Three overarching themes were identified as a result of the discussion and are as follows: 1) Forces of Change - Constant Change in Response to the Constantly Changing Healthcare Landscape; 2) Opportunities - Increased Interest in Partnership and Collaboration; 3) Threats - Limited Funding and Other Resources.

The MAPP assessment underscored three primary strategic priorities for the county: 1) The need for health navigators to assist community members in accessing care; 2) The need for more community education about the crucial role that healthier lifestyles play in the health of individuals; and 3) The need to reduce disparities in health status and outcomes among various populations. In 2007, the Consortium conducted a Community Leader Opinion Survey yielding over 100 responses from community leaders. Based on the results, the most prevalent issue facing the county was the number of uninsured residents, the second most prevalent was the increasing rates of obesity, and the third was the increasing number of hospitalization rates due to diabetes. The Community Health Improvement Plan was developed based on the results of the various assessments conducted.

Collaboration is crucial and highly beneficial when addressing health needs of the community. The Miami-Dade County Health Department participates in various boards, coalitions and consortiums throughout Miami-Dade County. In an effort to address chronic disease prevention and access to care, the MDCHD leadership staff provided resources to form two multidisciplinary groups: The Consortium for a Healthier Miami-Dade (Consortium) and the Miami-Dade Health Action Network (MD-HAN). The Consortium focuses on preventive care while the Miami-Dade Health Action Network concentrates on care coordination and access. As a result of the Community Health Status Assessment conducted in 2008, the Community Health Improvement Plan was developed and will be implemented through the Consortium for a Healthier Miami-Dade and the Miami-Dade Health Action Network.

The Consortium for a Healthier Miami-Dade

The Consortium for a Healthier Miami-Dade, an initiative of the Miami-Dade County Health Department, was established in 2003 in response to the increasing rates of chronic diseases in the community. The mission of the Consortium for a Healthier Miami-Dade is to be a major catalyst for healthy living in Miami-Dade County through the support and strengthening of policy, systems and environments. Guided by the goals and objectives established by Healthy People 2010 (the national blueprint for health), Consortium members promote the activities of their own organizations and work in partnership with other organizations to promote policy, systems and environmental changes that better serve the community.

An Executive Board provides oversight and leadership for the Consortium. Executive Board membership consists of representatives of the Miami-Dade County Health Department and the Health Council of South Florida, Inc., as well as the chairs of Consortium committees. There are currently eight Consortium committees:

- Children's Issues
- Elder Issues
- Health and the Built Environment
- Health Promotion and Disease Prevention
- Marketing
- Oral Health
- Tobacco-Free Workgroup
- Worksite Wellness

The formation of a Community Health Improvement Plan (CHIP) is an important milestone in an intensive and ongoing planning process for the Consortium. A SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis was utilized as part of the plans development and was completed by each of the Consortium's committees and finalized by the Executive Board on June 14, 2010. A Strategic Planning retreat was held on July 12, 2010, during which, the Consortium goals, objectives and strategies were revised to reflect the focus on policy, systems and environmental change as its core work. The Consortium also oversees and implements the work of the Communities Putting Prevention to Work grant, awarded to the MDCHD in February 2010, which focuses on reducing factors and preventing/delaying chronic disease associated with two of the leading causes of preventable death, obesity and tobacco use.

Miami-Dade Health Action Network

In response to the increasing demand on charity care and the fragmentation of the healthcare delivery system, the Miami-Dade Health Action Network (MD-HAN) was formed in 2008. The MD-HAN was established by the MDCHD, in partnership with the Health Council of South Florida and former Florida Representative Juan Carlos Zapata. The MD-HAN is a multidisciplinary group comprised of key leaders in the community as well as various agency representatives of Miami-Dade County's safety net system. The network is comprised of healthcare providers and representatives from free clinics, universities, hospitals, federally qualified health centers, non-profit service organizations and is facilitated by the Health Council of South Florida. Since inception, the MD-HAN has been working to identify, adapt and implement innovative strategies while serving the county's 722,000 uninsured men, women and children. Through the collaborative efforts of MD-HAN and its members, several projects have been successfully implemented. Such a key network of public health professionals serve as the essential frontline staff that link clients to health/social services in the community. Additionally, these professionals facilitate access to services that will improve the quality and cultural competence of service delivery. The MD-HAN seeks to establish an integrated system that will leverage resources to increase access to chronic disease management services for the uninsured residents of Miami-Dade County.

There are currently three committees under MD-HAN which are led by a Steering Committee:

1. Community Health Worker Sub-committee
2. Information Technology Sub-committee
3. Standards and Performance Sub-committee

Community Health Improvement Plan

The Community Health Improvement Plan is a blueprint designed to address the three strategic priorities identified by the Miami-Dade community through the MAPP process: access to health care, healthier lifestyles and health disparities. The following goals and objectives for each strategic priority are linked to those outlined in Healthy People 2010. In June 2012, the Florida Department of Health released the State Health Improvement Plan. Consequently, the Miami-Dade County Community Health Improvement Plan has been updated to align with the State Health Improvement Plan.

Strategic Priority: Access to Care

HP 2010 Goal: Improve access to comprehensive high quality healthcare services

HP 2010 Objective 1-4a: Increase the proportion of persons who have a specific source of ongoing care for all ages.

Local Strategy: An emergency room diversion clinic will be implemented at the MDCHD Health District site in order to reduce the number of patients accessing the emergency room at Jackson Memorial Hospital. The clinic will treat the patient and link them to a Federally Qualified Health Center as their medical home.

Outcome Objective: By December 31, 2013, reduce the amount of clients who seek primary care services at the Jackson Memorial Hospital Emergency Department by the daily census target.

Outcome Objective: By December 31, 2013, link clients who are referred to the Women's Health and Preventive Services Program to primary care providers and establish clients in finding a medical home.

SHIP Goal AC2: Improve access to primary care services for Floridians.

Partners: Miami-Dade Health Action Network

HP 2010 Goal: Improve access to comprehensive high quality healthcare services

HP 2010 Objective: Increase in persons with specific source of ongoing care.

Local Strategy: Increase the number of eligible adults and children enrolled in public health insurance programs through targeted outreach and eligibility determination. Improve outreach and engagement in care via the use of community health workers.

Outcome Objective: By June 30, 2009 a committee for Community Health Workers will be formed under the MD-HAN that will develop a common source of training, job description and serve as an avenue for an integrated approach connecting patients to services in the community. Membership will increase by 5% annually.

Outcome Objective: By June 30, 2013 a common eligibility system for social services will be implemented with a minimum of 5% of healthcare providers participating in the program.

SHIP Goal AC1: Regularly assess health care assets and service needs.

Partners: Miami-Dade Health Action Network

HP 2010 Goal: Improve the health and well-being of women, infants, children, and families.

HP 2010 Objectives: Increase the proportion of pregnant women who receive early and adequate prenatal care with a target of 90% of live births receiving care in the beginning of the first trimester of pregnancy.

HP 2010 Objectives: Reduce the percent of low birth weight babies with a target of 5%.

Local Strategy: Increase the number of pregnant women who receive prenatal care through targeted education and outreach efforts.

Outcome Objective: By Dec. 31, 2013, keep the infant mortality rate below 5.0 per 1000 live births and reduce the black infant mortality rate from 8.3 to 7.3 per 1,000 live births.

SHIP Goal AC5: Reduce maternal and infant morbidity and mortality

Partners: The Children's Trust and Miami-Dade Health Action Network

HP 2010 Goal: Reduce cardiovascular disease and improve quality of life by promoting recommended levels of physical activity, promoting weight management; improving diet and nutrition; eliminating tobacco use; preventing and reducing elevated cholesterol; and preventing and controlling diabetes.

HP 2010 Objective: Increase the proportion of adults with high blood pressure who are taking action (for example, losing weight, increasing physical activity, or reducing sodium intake) to help control their blood pressure.

Local Strategy: Increase coordination of community-based screenings to ensure subsequent engagement in care, continued follow up and assignment to a medical home. Connect organizations and individuals to health resources in the community. Collaborate with other coalitions in promoting policies, systems and environmental change that create access to healthcare resources.

Outcome Objective: By June 30, 2012 a mechanism will be developed electronically to capture data from the Community Health Outreach Program (CHOP) forms.

Outcome Objective: By June 30, 2013 the MDCHD Office of Community Health and Planning will develop a policy that sets a referral system within the MDCHD clinical programs for clients with risk factors such as obesity, hypertension, diabetes, tobacco use etc. to attend healthy lifestyle classes.

Outcome Objective: By June 30, 2014 the number of organizations that currently participate in the Community Health Outreach Program (CHOP) will increase by 10%.

SHIP Goal AC1: Regularly assess health care assets and service needs.

Partners: Consortium for a Healthier Miami-Dade

Strategic Priority: Healthier Lifestyles

HP 2010 Goal: Increase the quality, availability, and effectiveness of educational and community-based programs designed to prevent disease and improve health and quality of life.

HP 2010 Objective: Increase the proportion of local health departments that have established culturally appropriate and linguistically competent community health promotion and disease prevention programs.

Local Strategy: Engage and expand representation in the Consortium for a Healthier Miami-Dade that addresses obesity prevention, chronic disease, tobacco, oral health and built environment issues to diversify its membership base.

Outcome Objective: By September 2010, a Leadership Team consisting of 10 to 12 key community leaders will pledge through a formal agreement to oversee the strategic

direction of and enact policies related to healthy eating and increasing physical activity in Miami-Dade County through organizations.

Outcome Objective: By February 2011, the collective membership base of the Consortium Committees responsible for accomplishing proposed Community Action Plan will have increased by 25%.

SHIP Goal CR1: Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Increase the quality, availability and effectiveness of educational and community-based programs designed to prevent disease and improve health and quality of life in community setting.

HP 2010 Objective: Community health promotion programs

Local Strategy: Build links to other organizations and community partners that can provide information, sponsor events, or participate in activities that improve community health. Implement evidence-based prevention programs within the community.

Outcome Objective: By December 2010 a Community Action Plan will be developed for use in promoting healthier lifestyles within the community; the Plan will outline goals, objectives and milestones for specific strategies as well as responsible organizations and respective timelines.

SHIP Goal CR3: Provide equal access to culturally and linguistically competent care.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Improve the health and well-being of women, infants, children, and families.

HP 2010 Objective: Increase the proportion of mothers who breastfeed their babies

Local Strategy: Develop a coordinated effort within the county that will promote breastfeeding as the form of nourishment for newborns and infants.

Outcome Objective: By March 2012, Healthy Start Coalition and 24 core contracted providers that are members of the Healthy Start Coalition will have adopted the Breastfeeding Friendly Worksite Policy, in accordance to the U.S. Department of Health and Human Services, Business Cases for Breastfeeding.

Outcome Objective: By March 2012, the MDCHD will have adopted the Breastfeeding Friendly Worksite Policy, in accordance to the U.S. Department of Health and Human Services, Business Cases for Breastfeeding.

Outcome Objective: By March 2012, 2 out of 9 core members of the South Florida Hospital & Healthcare Association will have adopted the Breastfeeding Worksite Policy, in accordance to the U.S. Department of Health and Human Services, Business Cases for Breastfeeding.

Outcome Objectives: By March 2012, 13% of the local birthing centers and hospitals will initiate two out of four pathways of the 4-D Pathway to Baby-Friendly Designation. The two pathways and the related steps are: Discovery (Pathway I) - 1) register with Baby-Friendly USA, 2) obtain CEO support letter, 3) complete self-appraisal tool; Development (Pathway II) - 1) bridge to development phase-registry of intent award, 2)

Breastfeeding (BF) Committee or Task Force, 3) Baby-Friendly Hospital Initiative (BFHI) work plan, 4) hospital breastfeeding policy, 5) staff training curriculum, 6) prenatal/postpartum teaching plans, and 7) data collection plan.

SHIP Goal AC5: Reduce maternal and infant morbidity and mortality

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Promote health and reduce chronic disease associated with diet and weight.

HP 2010 objective: Reduce the proportion of children and adolescents who are overweight or obese.

Local Strategy: Maintain a Health Leadership Team consisting of community leaders and stakeholders to support evidence-based policy change in Miami-Dade County.

Outcome Objective: By January 2012, legislation will have been introduced at the public policy level that proposes to enact nutrition standards for child care centers in Florida including mandating low or fat-free milk for children 2 years of age and older; provision of whole fruits and vegetables (fresh, frozen, or canned) five days week at breakfast and snack time.

Outcome Objective: By January 2012, legislation will have been introduced at the public policy level that proposes to enact physical activity standards for child care centers in Florida including mandating 0-hour screen time for children under 2 years old and 2-hour screen time limit (1 hour for TV-video and/or 1 hour computer) for children 3 years and older.

Outcome Objective: By March 2012, the Miami-Dade Public School (MDCPS) Board will have adopted a policy that assures Farm-to-Schools programs connecting at least 30% of MDCPS sites to local farms. Schools will be selected based on highest burden of obesity, high risk groups, and/or greatest impact or reach.

Outcome Objective: By March 2012, Miami-Dade Parks and Recreation will adopt policies requiring 100% of vending machines managed by Miami-Dade Parks and located at park sites, to be in accordance with Parks Healthier Vending guidelines.

Outcome Objective: By March 2012 Miami-Dade Parks and Recreation healthy vending machines placed at parks and recreation facilities will be selected, based on highest burden of obesity, high risk groups, and/or greatest impact or reach.

Outcome Objective: By July 2012, the School Wellness Advisory Committee (SWAC) will revise the school wellness policy to include nutrition standards for foods in schools, in accordance to Institute of Medicine (IOM) standards.

SHIP Goal CD2: Increase access to resources that promote healthy behaviors.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Reduce injuries, disabilities and deaths due to unintentional injuries and violence.

HP 2010 Objective: Reduce deaths caused by unintentional injuries.

Local Strategy: Work collaboratively with technical experts that can assess the validity and reliability of the data, research, and evaluation results used to make decisions and

guide Consortium activities. Introduce policies and legislation that enact supportive systems and environments for safe and healthy living.

Outcome Objective: By March 2012, the Miami-Dade County School Board will enact a Safe Routes to School policy in Miami-Dade County.

Outcome Objective: By May 2011, a resolution will have been approved in support of the policy by the Community Traffic Safety Team and endorsed by the Miami-Dade County Public School Board.

SHIP Goal HP2: Prevent and reduce illness, injury, and death related to environmental factors.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Increase the quality, availability and effectiveness of educational and community-based programs designed to prevent disease and improve health and quality of life in worksites.

HP 2010 Objective: Increase the proportion of worksites that offer a comprehensive employee health promotion program to their employees.

HP 2010 Objective: Increase the proportion of employees who participate in employer sponsored health promotion activities.

Local Strategy: Conduct outreach and education activities at local businesses, membership organizations and community-based organizations using educational resources developed by Consortium committees. Adopt wellness policies within Consortium member organizations and support the adoption of wellness policies in organizations across the county.

Outcome Objective: By January 2012, there will be a 10% increase in the number of Consortium member organizations that have implemented a Worksite Wellness program based on a survey that will be conducted in year one.

Outcome Objective: By March 2012, two large-scale public service venues (i.e. local government facilities) will have healthier food & beverages options available through vending machines. The selected public service venues serve as a hub for government employees, residents utilizing government services, multiple public transportation sources, and shopping venues.

Outcome Objective: By May 2011, 40% of the Consortium Member Organizations will adopt a policy that meets recommended strategies adopted from the CDC guidelines for Worksite Wellness in reference to nutrition and physical activity.

Outcome Objective: By March 2010, improve the MDCPS Worksite Wellness Program by increasing the available opportunities to engage in physical activity.

SHIP Goal CD2: Increase access to resources that promote healthy behaviors

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Improve health, fitness, and quality of life through daily physical activity

HP 2010 Objective: Increase the proportion of trips made by walking.

HP 2010 Objective: Increase the proportion of trips made by bicycling.

Local Strategy: Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.

Outcome Objective: By March 2012, the County will have established from the Open Space Master Plan for the Miami-Dade County Parks and Recreation Department, a level of service standards for parks and recreational open spaces that are intended to encourage equitable access to local (neighborhood) parks and open space as well as area-wide recreational activities for all County residents.

Outcome Objective: By March 2012, Miami-Dade County will update the Miami-Dade Urban Design Manual I and associated county plans and regulations to incorporate where appropriate, the “Great Streets Planning Principles” contained in the Miami-Dade Parks and Open Space System Master Plan and incorporation of “Complete Streets” components.

Outcome Objective: By March 2012, Miami-Dade County will incorporate public spaces for festivals, arts and crafts shows, green markets and other civic activities in the planning and development of libraries, museums, schools, government buildings, transit stations within Transit-Oriented Development (TOD) and stand-alone transit stations, and other civic/institutional places.

Outcome Objective: By March 2012, the targeted communities of the Cities of Miami will enhance bicycling opportunities through increasing bicycling facilities by 30%, way-finding signage by 30%, and road-signage by 30%.

SHIP Goal CR1: Integrate planning and assessment process to maximize partnerships and expertise of a community in accomplishing its goals.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Increase the quality, availability and effectiveness of educational and community-based programs designed to prevent disease and improve health and quality of life in community setting.

HP 2010 Objective: Culturally appropriate and linguistically competent community health promotion programs

Local Strategy: Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.

Local Strategy: Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.

Outcome Objective: By January 2011, implement a mass media/social marketing campaign that will reduce obesity and change subjective norms, beliefs, self-efficacy, and perceived behavioral control of unhealthy choices:

1. By January 2011, 40% of those exposed to messages will believe that choosing healthier food is reasonably priced and more available.
2. By January 2011, 40% of those exposed to messages will believe that they can adopt a healthier lifestyle by engaging in physical activity opportunities through the built environment, parks and recreation, and school.

SHIP Goal CD1: Increase the percentage of adults and children who are at a healthy weight.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Promote health and reduce chronic disease associated with diet and weight.

HP 2010 Objective: Increase food security among U.S. households and in so doing reduce hunger.

Local Strategy: Identify, promote and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.

Outcome Objective: By January 2012, 50% of the 40 participating Women, Infants & Children (WIC) and/or Supplemental Nutrition Assistance Program (SNAP) approved convenience stores will adopt a policy to place fresh fruits and vegetables where they are highly visible to customers, in a manner that is "attractive and appealing."

SHIP Goal CD1: Increase the percentage of adults and children who are a healthy weight.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Reduce illness, disability, and death related to tobacco use and exposure to secondhand smoke

HP 2010 Objective: Initiation of tobacco use

Local Strategy: Prevent initiation of tobacco use among young adults and youth by reducing tobacco industry influences, and implementing model anti-tobacco policies in schools.

Outcome Objective: By June 30, 2013 establish two policies to restrict the sale of candy flavored tobacco products not covered by the FDA.

Outcome Objective: By June 30, 2013 establish one policy prohibiting/limiting tobacco industry advertising including retail outlets.

Outcome Objective: By June 30, 2014 establish one policy to implement Tobacco Control Model policies in K-12 schools.

SHIP: Goal CD4: Reduce illness, disability and death related to tobacco use and secondhand smoke exposure.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Reduce illness, disability, and death related to tobacco use and exposure to secondhand smoke

HP 2010 Objective: Exposure to environmental tobacco smoke

Local Strategy: Eliminate secondhand smoke exposure in multi-unit dwellings and increase use of cessation services.

Outcome Objective: By June 30, 2014 establish one policy to create tobacco-free multi-unit dwellings.

Outcome Objective: By June 30, 2014 establish one policy to offer cessation services.

SHIP Goal CD4: Reduce illness, disability and death related to tobacco use and secondhand smoke exposure.

Partners: Consortium for a Healthier Miami-Dade

HP 2010 Goal: Ensure that Federal, Tribal, State and local health agencies have the infrastructure to provide essential public health services effectively.

HP 2010 Objectives: Public access to information and surveillance data, use of geocoding in health data systems, data for leading health indicators, health status indicators and priority data needs at Tribal, State and local levels.

Local Strategy: Institutionalize an ongoing tracking plan for measuring community health. Create a system to identify and track the results and impact of local programs. Utilize the health indicators and statistics collected in the community to assess progress at the county level on a regular basis. Engage the County's community health planning leadership by seating members of a Health Leadership Team, to include persons with legislative and decision making powers. Support the creation of a Health Agenda for Miami-Dade County that follows the national health objectives in *Healthy People 2010* and addresses negatively trending local health indicators.

Outcome Objective: By June 30, 2013 the Miami-Dade County community will develop a centralized system for collecting and disseminating health data that can be utilized within the county.

SHIP Goal CR3: Provide equal access to culturally and linguistically competent care

Partners: Consortium for a Healthier Miami-Dade and Miami-Dade Health Action Network

Strategic Priority: Chronic Disease Prevention and Health Disparities

HP 2010 Goal: Improve cardiovascular health and quality of life through the prevention of risk factors; detection and treatment of risk factors; early identification and treatment of heart attacks and strokes; and prevention of recurrent cardiovascular events.

HP 2010 Objectives: Reduce coronary heart disease, reduce stroke deaths, stop the increase in the proportion of adults with high blood pressure, and high cholesterol levels

Local Strategy: Increase public awareness of the connection between individual health action and health disparities. Incorporate information on health disparities into campaigns for healthier lifestyles. Encourage targeted, coordinated community-based screening and testing as a strategy to reduce negative health outcomes and disparities.

Outcome Objective: By December 31, 2011 develop a centralized community health outreach program designed to screen, educate, counsel and refer clients with abnormalities to a federally qualified health centers within the county.

Outcome Objective: By December 2010, develop a culturally sensitive marketing plan for healthy living that will reach the disparate populations within the community.

SHIP Goal CD3: Reduce chronic disease morbidity and mortality

Partners: Consortium for a Healthier Miami-Dade and Miami-Dade Health Action Network

HP 2010 Goal: Reduce the number of new cancer cases, as well as illness, disability, and death caused by cancer.

HP 2010 Objective: Increase the proportion of women who have ever received a Pap test with a target of 97% of women aged 18 or older.

HP 2010 Objective: Increase the proportion of adults who receive a colorectal cancer screening examination with a target of 50% of adults aged 50 years and older.

HP 2010 Objective: Increase the proportion of women aged 40 years and older who have received a mammogram within the preceding 2 years with a target of 70%.

Local Strategy: Promote early detection and screening for cancers such as cervical, breast and colorectal.

Outcome Objective: By Dec. 30, 2013, increase by 5% the percentage of women who receive a breast cancer screening based on the most recent clinical guidelines from 61.9% (2010) to 66.9%.

Outcome Objective: By Dec. 30, 2013, increase by 5% the percentage of women who receive a cervical cancer screening based on the most recent clinical guidelines from 57.1% (2010) to 62.1%.

Outcome Objective: By Dec. 30, 2013, increase the percentage of adults 50 years of age and older who receive a colorectal cancer screening (blood stool test in the past year or sigmoidoscopy or colonoscopy in the past five years) from 57% to 65%.

SHIP Goal CD1: Reduce chronic disease morbidity and mortality

Partners: Miami-Dade Health Action Network

Strategic Priority: Health Protection

HP 2010 Goal: Prevent exposure to, and infection from illness and disease-related complications from HIV and AIDS through educational outreach, enhanced testing initiatives, human behavior change, and county and community collaborations with particular focus on reducing social stigma and racial disparities.

HP 2010 Objectives:

Local Strategy: Implement an enhanced Test Miami initiative to encourage private health providers in Overtown and Liberty City to provide routine HIV screenings as part of primary care. By Dec. 31, 2013, at least 85% of the Test Miami membership has participated in at least one educational workshop coordinated and provided by the MDCHD, as well as 65% of the private health providers promote routine HIV screening around that area.

Outcome Objective: By Dec. 31, 2013, reduce the AIDS case rate per 100,000 from 50.1 (2010) to 45.

Outcome Objective: By Dec. 31, 2013, increase the percentage of HIV-infected people in Miami-Dade County who know they are infected from 80% (2010 estimate) to 90%.

Outcome Objective: By Dec. 31, 2013, increase the percentage of HIV-infected people in Miami-Dade County who have access to and are receiving appropriate prevention, care and treatment services from 55% (2010) to 65%.

Outcome Objective: By Dec. 31, 2013, reduce the disparity in HIV incidence for Blacks versus Whites (Black: White ratio of new infections) by 15%;

SHIP Goal HP1: Prevent and control top infectious diseases

Partners: Miami-Dade Health Action Network

References

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