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

Revised March 23, 2012

Acknowledgements

Miami-Dade County Health Department

Lillian Rivera, RN, MSN, PhD
Administrator

Health Council of South Florida
Marisel Losa MHSA
President & CEO

Consortium for a Healthier Miami-Dade Executive Board
Ann-Karen Weller RN, BSN, MBA-HSM, co-chair
Marisel Losa MHSA, co-chair

Miami-Dade Health Action Network
Yolangel Hernandez Suarez, MD, MBA, FACOG Chair
Annie R. Neasman, RN, MS Vice-Chair

Table of Contents

Executive Summary……..1

Introduction…….2

Mobilizing for Action through Planning & Partnership……..2

The Consortium for a Healthier Miami-Dade……..5

Miami-Dade Health Action Network…… 6

Goals, Objectives, Strategies……..7

Action Plans……13

References……..57

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) a process facilitated by the Health Council of South Florida. MAPP 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 by using data from the Florida CHARTS web site, 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. It was determined that there was a need for: 1) health navigators to assist community members in accessing care; 2) 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 between various populations.

The MDCHD participates in various boards, coalitions and consortiums throughout Miami-Dade County. However, 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 County 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 care to the uninsured and underserved of Miami-Dade County. The Consortium deals with preventative care while the MD-HAN concentrates on access and coordination of care. As a result of the assessment that was conducted in 2008, it was determined that the Community Health Improvement Plan would be developed and implemented through the Consortium for a Healthier Miami-Dade and the Miami-Dade Health Action Network.

The Community Health Improvement Plan contains the goals, objectives and strategies that will be utilized by the community, in order to assure that its population has access to care, improved health outcomes and health equity among all ethnic groups. As with other plans, the MDCHD will continue to review and modify this improvement plan to ensure goal alignments with community needs. A newer version will be available in late 2012.

Introduction

In 2008, the Consortium for a Healthier Miami-Dade, an initiative of the Miami-Dade County Health Department engaged the community in the Mobilizing for Action through Planning and Partnerships (MAPP). 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. 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 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. Various 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. Detailed results from the MAPP process can be found in the 2008 Community Health Status Assessment.

Mobilizing for Action through Planning and Partnerships

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 by using data from the Florida CHARTS web site, 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 that was 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 and behaviors 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 Heath System Assessment was conducted in 2006 using an instrument developed by the National Association of County and City Health Officials (NACCHO) and the Center 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). Based on the results of the assessment conducted for Miami-Dade County, it was determined that there is a greater need for evaluation to be performed, on the effectiveness of the various public health interventions that have been implemented (Department of Health and HumanServices, 2006).

The Communities Themes and Strenghths Assessment identified that there was an abundance of data on consumer/community needs, barriers, and challenges. In addition, there have been efforts in the community to bring people together to help reduce local healthcare needs. The use of Health Navigators has also been identified as an effective means of removing common barriers that will increase access to care for the underserved in the community.

Ten Essential Public Health Services:

1. Monitor Health Status to Identify Community Health Problems
2. Diagnose and Investigate Health Problems and Health Hazards in the Community
3. Inform, Educate, and Empower Individuals and Communities about Health Issues
4. Mobilize Community Partnerships to Identify and Solve Health Problems
5. Develop Policies and Plans that Support Individual and Community Health Efforts
6. Enforce Laws and Regulations that Protect Health and Ensure Safety
7. Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable
8. Assure a Competent Public and Personal Healthcare Workforce
9. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services
10. Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services

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 landscape 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 brought to light three issues as the most important 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 with over 100 community leaders responding to the survey. Based on the results, the number one issue facing the county was the number of uninsured residents, the second 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 that were conducted.

The Miami-Dade County Health Department participates in various boards', coalitions and consortiums throughout Miami-Dade County. However, in focused effort to address chronic disease prevention and access to care, the MDCHD 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 for a Healthier Miami-Dade

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. The Consortium deals with preventative care while the Miami-Dade Health Action Network concentrates on access and coordination of care. As a result of the assessment that was conducted in 2008, it was determined that the Community Health Improvement Plan would be developed and implemented jointly through the Consortium for a Healthier Miami-Dade and the Miami-Dade Health Action Network.

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. 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

This Community Health Improvement Plan is an important milestone in an intensive and ongoing planning process for the Consortium. The Plan was developed based on a SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis completed by each of the Consortium's committees and finalized by the Executive Board on June 14, 2010 and a Strategic Planning retreat held on July 12, 2010.

At this time, The Consortium revised its goals, objectives and strategies to reflect the focus on policy, systems and environmental change as its core work. The Consortium also oversee and implements the work of the Communities Putting Prevention to Work grant approved in February 2010.

Miami-Dade Health Action Network

In 2008, as a response to the increasing demand on charity care and the fragmentation of the healthcare delivery system, the MDCHD, in partnership with the Health Council of South Florida and then Florida Representative Juan Carlos Zapata, created the Miami- Dade Health Action Network (MD-HAN). The MD-HAN consists of a multidisciplinary group made up of key leaders in the community and others representing agencies that comprise the safety net system of Miami-Dade County. The group is made up 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 2008, the MD-HAN has been working to identify, adapt and implement strategies that are innovative while serving the county's 722,000 uninsured men, women and children. Through its efforts, the MD-HAN and its members have implemented successful projects by working together to leverage resources, integrate services and support the Community Health Workers. This group of public health workers is important as they are the frontline staff who link clients to health/social services in the community, in addition to facilitating 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

The following Community Health Improvement Plan outlines a strategy that will allow the community to develop a comprehensive chronic disease prevention and self-management approach with the aim of creating a healthier population.

Goals, Objectives and Strategies

Goal 1: Enhance and strengthen the Consortium for a Healthier Miami-Dade and Miami-Dade Health Action Network organizational structure and membership***.***

Objective 1.1: Increase the collective base of the Consortium and MD-HAN by 25% by 2013.

Strategy 1.1.1: Engage and expand representation in the Consortium & MD-HAN that addresses obesity prevention, chronic disease, tobacco, oral health and built environment issues to diversify its membership base.

Strategy 1.1.2: Define membership benefits for active members to include partnership opportunities via the Consortium's website.

Strategy 1.1.3: Revise, draft and disseminate the Consortium and MD-HAN structure and modes of operation.

Strategy 1.1.4: Assess needs and available assets and resources of membership.

Objective 1.2: Improve communication and collaboration within the Consortium.

Strategy 1.2.1: Revise and update the Consortium Website to create a portal for communication within the coalition.

Strategy 1.2.2: Create and maintain a membership database that details active and non-active members, contact information and the expertise they bring to the Consortium.

Strategy 1.2.3: Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.

Strategy 1.2.4 Develop and implement committee level communications strategies.

Strategy 1.2.5: Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.

Strategy 1.2.6: Promote consistent participation of MD-HAN members through various forms of communication outlets and incentives.

Objective 1.3: Assure the Consortium & MD-HAN have funded projects with visibility, commitment, and recognition.

Strategy 1.3.1: Work with Consortium Committees to prioritize initiatives according to their implementation readiness (i.e., ready to implement, under development, initial startup).

Strategy 1.3.2: Seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented or to "scale up" existing evidence-based, evaluated programs that are already successful in our communities and implement promising evidence-based, evaluated programs that are new to Miami-Dade.

Strategy 1.3.3: Build links to other organizations and community partners that can provide information, sponsor events, or participate in activities that improve community health.

Objective 1.4: Assure that Consortium initiatives will reflect community needs as identified through data driven research.

Strategy 1.4.1: Use existing data and/or conduct assessments of local communities as needed by each subcommittee to identify assets in the community that support healthy living.

Strategy 1.4.2: 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.

Strategy 1.4.3: Use reliable, readily available and recently completed documents in Consortium program planning.

Objective 1.5: Institutionalize an ongoing tracking plan for measuring community health

Strategy 1.5.1: Utilize the health indicators and statistics collected in the community to assess progress at the county level on a regular basis.

Strategy 1.5.2: Create a system to identify and track the results and impact of local programs.

Goal 2: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Objective 2.1: Maintain a Health Leadership Team consisting of high level community leaders and decision makers to support evidence-based policy change in Miami-Dade County.

Strategy 2.1.1: 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.

Strategy 2.1.2: Ensure that the Health Leadership Team is educated and informed on critical issues related to policy, systems and environmental change.

Objective 2.2: Introduce policies and legislation that enact supportive systems and environments for healthy living.

Strategy 2.2.1: Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.

Strategy 2.2.2: Adopt wellness policies within Consortium member organizations and support the adoption of wellness policies in organizations across the county.

Strategy 2.2.3: Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.

Strategy 2.2.4: Support the creation of a Health Agenda for Miami-Dade County that follows the national health objectives in *Healthy People 2020* and addresses negatively trending local health indicators.

Strategy 2.2.5: Develop annual legislative priorities/agenda and disseminate among policy makers and influencers.

Goal 3: Educate and raise awareness about the benefits of healthy lifestyles and health promoting environments.

Objective 3.1: Develop and implement a multi-media campaign targeting high risk communities in Miami-Dade County to promote healthy lifestyles and chronic disease prevention.

Strategy 3.1.1: Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.

Strategy 3.1.2: Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.

Objective 3.2: Utilize existing mechanisms to identify best practices and model programs from the local, state, and national level that have been successfully used to address identified health priorities.

Strategy 3.2.1: Identify, promote and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.

Goal 4: Increase access to resources and information to promote the adoption of healthy lifestyles by Miami-Dade County residents.

Objective 4.1: Connect organizations and individuals to health resources in the community.

Strategy 4.1.1: Create, update and disseminate resource inventories as appropriate to each subcommittee.

Strategy 4.1.2: Conduct outreach and education activities at local businesses, membership organizations and community-based organizations using educational resources developed by Consortium committees.

Strategy 4.1.3 Work collaboratively with other coalitions in promoting policies, systems and environmental change that create access to healthcare resources.

Goal 5: Community members are aware of racial and ethnic health disparities and are engaged in efforts to reduce them.

Objective 5.1: Increase efforts to improve the overall health of local communities most affected by health disparities.

Strategy 5.1.1**:** Identify which communities are most affected by health disparitie**s.**

Strategy 5.1.2: Work with local communities to identify environmental risk factors (e.g. toxic waste sites, lack of grocery stores, violent crime rates, availability of public parks and recreation) that have a negative impact on individual and community health.

Objective 5.2: Increase public awareness of the connection between individual health action and health disparities

Strategy 5.2.1: Incorporate information on health disparities into campaigns for healthier lifestyles.

Strategy 5.2.2: Encourage targeted, coordinated community-based screening and testing as a strategy to reduce negative health outcomes and disparities.

Goal 6: Racial and ethnic minorities have access to the same high-quality healthcare as other residents of the county.

Objective 6.1: Improve the quality of healthcare provided to racial and ethnic minorities by increasing the availability of culturally appropriate, community-based services.

Strategy 6.1.1: Increase the availability of linguistically appropriate health education materials that are at the proper literacy level for specific populations.

Strategy 6.1.2: Increase coordination of community-based screenings to ensure subsequent engagement in care, continued follow up and assignment to a medical home.

Objective 6.2: Improve access to affordable healthcare services for racial and ethnic minorities.

Strategy 6.2.1: Increase the number of eligible adults and children enrolled in public health insurance programs through targeted outreach and eligibility determination.

Strategy 6.2.2: Improve outreach and engagement in care via the use of community health workers.

Strategy 6.2.3: Partner with other organizations to encourage employers to provide all employees with health insurance.

Consortium for a Healthier Miami-Dade
Executive Board Action Plan

Goal 1: Strengthening the Consortium

Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 The collective base of the Consortium will increase by 25% by 2013.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
Provide Presentations		All Committees		P	All committees provided presentations within their committees. The Health and the Built Environment committee conducted presentations at the UM School of Architecture and the Worksite Wellness committee has conducted quarterly worksite wellness forums. The Elder Issues Committee also held a forum for Baby Boomers.
Explore Student membership		Executive Board		P	MDCHD is currently developing two tiers for student membership.
Strategy 1.1.2 Define membership benefits for active members to include partnerships via the Consortium's website.					
Develop membership book		Executive Board MDCHD		C	Benefits of membership have been defined and have been added to the membership handbook and membership section of the website.
Objective 1.2 Improve communications and collaboration within the Consortium.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Strategy 1.2.1 Revise and update the Consortium Website to create a portal for communication within the coalition.					
Update Website		MDCHD		C	New website was launched July 22, 2011.
Develop template		MDCHD		C	Through the new website.
Content of website		All Committees		C	Most of the content of the website has been updated. Some committees have tweaked their sections to meet their needs.
Consortium Annual Report		MDCHD		C	Completed will be disseminated at annual event and posted on the website.
Strategy 1.2.2 Create and maintain a membership database that details active and non-active members, contact information and the expertise they bring to the Consortium.					
MDCHD to create database & maintain		MDCHD		C	The membership database was developed and membership is currently being tracked and maintained.
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Assign staff to develop		MDCHD		C	Newsletter has been developed and is disseminated on a monthly basis by MDCHD.
Each committee to contribute items		All committees		P	Committees continue to contribute to the newsletter. Particularly Children Issues and HBE.
Strategy 1.2.4 Develop and implement committee level communications strategies.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Development of membership directory		All Committees		P	Some committees are working on developing a member's directory and a committee level speakers' bureau.
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Develop fact sheets, talking points		All committees		P	Most committees are currently working on developing fact sheets. Health Promotion and Disease Prevention, Worksite Wellness has completed fact sheets and HBE drafted a fact sheet.
Objective 1.3 Assure that Consortium initiatives will reflect community needs as identified through data driven research.					
Strategy 1.3.1 Work with Consortium Committees to prioritize initiatives according to their implementation readiness (i.e. read to implement, under development, initial startup) and seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented.					
Examine various indicators		Executive Board		P	Committee work plans are being reviewed and recommendations are being made.
Strategy 1.3.2 Replicate existing evidence-based programs that are already successful in our communities. Seek resources and implement appropriate evidence-based programs that are new to Miami-Dade.					
Media Access, Point of Purchase/Promotion, Purchase strategies from CPPW		All committees Executive Board		P	Some committees are using MAPP strategies (HBE Committee); however, more committee should attempt to incorporate them into their initiatives.
Strategy 1.3.3 Build relationships with organizations and community partners that can influence policy-making, leverage resources, sponsor events, or participate in activities that improve community health.					
Encourage stakeholders and organizations who share the similar mission or vision to participate		All committees		P	Recruitment of members Community presentations

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
in the Consortium.		Executive Board		P	Community outreach Meeting with the Mayor and Senator, as well as other policy makers to obtain buy-in and educate on the Consortium initiatives
Objective 1.4 Assure that Consortium initiatives will reflect community needs as identified through data driven research.					
Strategy 1.4.1 Use existing data and/or conduct assessments of local communities as needed by each subcommittee to identify assets in the community that support healthy living.					
Collecting of Baseline Data		Executive Board			Access Florida CHARTS, Miami Matters
Reports disseminated		MDCHD			Updated CPPW results.
Place on Miami-Matters		Health Council			CPPW progress on Miami Matters website.
Community Action Plan Development		MDCHD & Health Council			Eleven goals of CPPW on Miami Matters website.
Strategy 1.4.2 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.					
Food desert assessment		MDCHD		IP	The Food Trust is currently conducting the assessment which should be done within 2-3 months.
Baseline data from CPPW		Health Council		P	CPPW Evaluator is collating this data.
Strategy 1.4.3 Use reliable, readily available and recently completed documents in Consortium program planning.					
Strategic planning		Executive Board		C	The Strategic Plan has been finalized and posted on the website.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Annual report		MDCHD		C	2011 annual report completed
Disparities report		Health Council &MDCHD		NP	Last completed in 2008.
Needs Assessment		Health Council &MDCHD		P	Local Public Health System Assessment has been completed
Objective 1.5 Institutionalize an ongoing tracking plan for measuring community health.					
Strategy 1.5.1 Utilize the health indicators and statistics collected in the community to assess progress at the county level on a regular basis.					
Examine Florida Charts, identify population indicators.		Executive Board		P	Through Health Council of South Florida.
Indicators on Miami Matters website.		Health Council		P	
Strategy 1.5.2 Create a system to identify and track the results and impact of local programs.					
Quarterly reports, April, July, October, January 2012		Executive Board		P	Quarterly reports and work plans

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 2.1 Maintain a Health Leadership Team consisting of high level community leaders and decision makers to support evidence-based policy change.					
Strategy 2.1.1 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.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Leadership team identified		MDCHD		C	CPPW leadership
Provide CPPW reports to Executive Board		MDCHD		P	Ongoing; all CPPW quarterly reports have been provided to the Executive Board.
Strategy 2.1.2 Ensure that the Health Leadership Team is educated and informed on critical issues related to policy, systems and environmental change.					
Monthly updates		Executive Board		P	Ongoing
Monthly conference call		MDCHD		P	Ongoing
Two biannual face to face meetings		MDCHD		C	
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.1 Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.					
Develop list of policies from current projects.		Executive Board, MDCHD, Health Council		C	List has been developed by MDCHD
Strategy 2.2.2 Adopt wellness policies within the Consortium member organizations and support the adoption of wellness policies in organizations across the county.					
Development of a template by the Worksite Wellness team of the MDCHD.		Worksite Wellness, MDCHD		P	Template has been developed and is being disseminated through the worksite wellness tem of the MDCHD to Consortium member organizations.
Strategy 2.2.3 Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.					
Support policies that are in alignment with CDC and State approved work plan.		All committees, Executive Board		P	Through CPPW & the Tobacco-Free work group, several policies have

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
					been implemented (Miami Beach legislation on candy flavored tobacco, SPARK curriculum in MDCPS, Worksite Wellness and Lactation support policies, etc.)

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 3.1 Develop and implement multi-media campaign targeting high risk communities in Miami-Dade County to promote healthy lifestyles and chronic disease prevention.					
Strategy 3.1.1 Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.					
Assemble a marketing taskforce to design a marketing plan for dissemination.		Marketing Committee		P	In progress through CPPW and through committee community presentations.
Strategy 3.1.2 Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.					
Develop a brand for the Consortium's marketing need.		Marketing Committee		C	CPPW media providers have developed a Make Healthy Happen website in three languages and are currently promoting healthy lifestyles through media and marketing materials.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 3.2 Identify best practices and model programs from the local, state, and national level for replication.					
Strategy 3.2.1 Identify, promote, and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.					
Development of tools		Committees		P	HPDP committee has developed a tool to identify and collect evidence-based practices.

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Children's Issues Action Plan

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Consortium by 25% by 2013.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
Facilitate Presentations at the Children's issues committee meetings	Ongoing	Chair, Vice-chair and MDCHD liaison	CPPW providers; community partners; speakers bureau	P	Presentations provided in meetings as speakers are available
Explore Student Membership	Ongoing	CI committee members/ Executive Board	Local colleges and universities	P	Collaborating with executive board to decide on structure and protocol; students can currently logon to the consortium website and apply as a general member until the student section is defined
Invite other key health organizations handling child health to join the committee	Ongoing	Vice-chair/ CI Committee members	Health agency directories; other professional organizations	P	
Strategy 1.1.2 Define membership benefits for active members to include partnerships via the Consortium's website.					
Objective 1.2 Improve communication and collaboration within the Consortium.					
Strategy 1.2.1 Revise and update the Consortium Website to create a portal for communication within the coalition.					
Update Website	7/1/2011	MDCHD – OCH&P – spell out	Other consortium websites	C	New website launched mid-July 2011; "Please visit and reapply to ensure you are on the updated membership list."

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Update Children Issues Page Content for Consortium website	5/26/2011	Chair, Vice-chair	CI Committee members	C	Page content including committee goals were drafted by CPPW team members at MDCHD; page has been updated
Strategy 1.2.2 Create and maintain a membership database that details active and/or-active members, contact information and the expertise they bring to the Consortium.					
Maintain active committee member attendance/contact information; enter in membership database	Ongoing	MDCHD committee liaison	Meeting sign-in sheets/ Introductions	P	Membership/attendance tracked on an ongoing basis by Consortium website and committee liaisons
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Distribution of related materials regarding child health	Ongoing	Department of Children and Families, Healthy Start Coalition, Walk Safe	Internal resources	P	A subgroup has been formed; meetings are being held to organize distribution system; funding has been secured and materials have been identified
Submit a committee related article/ activities to the Consortium newsletter	Monthly	CI agencies rotating responsibility alphabetically	Recent initiatives/ general health education/ upcoming activities	P	Children's Issues committee doing a great job with Consortium newsletter content; consistently submitting monthly articles and information
Strategy 1.2.4 Develop and implement committee level communications strategies.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Conduct and facilitate instruction, training, and education meetings w/ the DCF, Consulting Registered Dieticians and Quality Counts who is working w/ the pilot adoption of healthier practices in Childcare Centers	Ongoing until 3/2012	UM, Pediatrics/ Dept. of Children and Families/ Consulting Registered Dietitians/ Quality Counts		P	Childcare Taskforce convenes on a monthly basis to discuss policy movement/ initiative; Childcare bill was introduced by Senator Nancy Detert (originally drafted and championed by Senator Rene Garcia); never secured a House sponsor; Taskforce presented to the Early Learning Coalition and has drafted an article to be included in the Early Learning Coalition newsletter; Public Release Report complete; currently seeking alternative local strategies
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Develop Fact Sheets about prevention	Ongoing	Chair, UM WalkSafe	CDC.gov; journal articles; CPPW data; YRBS, etc.	P	Draft has been developed regarding prevention; committee will review in next meeting
Develop a Children's Issues committee fact sheet	8/15/2011	Imran Ali/ Natalie Stephenson	CDC.gov; journal articles; CPPW data; Youth risk Behavior Survey, etc.	C	Draft of committee fact sheet developed and deemed complete
Objective 1.3 Assure the Consortium will have sustainable initiatives with visibility, commitment, and recognition.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Strategy 1.3.1 Work with Consortium Committees to prioritize initiatives according to their implementation readiness (i.e. read to implement, under development, initial startup) and seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented.					
Strategy 1.3.2 Replicate existing evidence-based programs that are already successful in our communities. Seek resources and implement appropriate evidence-based programs that are new to Miami-Dade.					
Implement Farm-to-School program in Miami-Dade County Public Schools (MDCPS)	Ongoing until 3/2012	MDCPS – Food & Nutrition	www.farmtoschool.org; www.fns.usda.gov/cnd/f2s; NYC CPPW Mentoring; Existing farm-to school programs	C	
Install healthy reimbursable vending machines in MDCPS and manage sales of meals	Ongoing	MDCPS – Food & Nutrition	Literature; successes/ challenges from other communities using reimbursable vending machines	P	41 reimbursable vending machines have been installed in 41 MDCPS high schools; some machines have also been installed in middle schools through a grant other than CPPW; more middle schools will receive machines through CPPW
Spearhead implementation of worksite lactation policies within Consortium organizations	Ongoing	South FL Hospital and Healthcare Association/ Healthy Start Coalition/ MDCHD- Women,	NYC Breastfeeding Mentoring; published literature; www.CDC.gov	P	Over 10 organizations in Miami-Dade County have implemented worksite lactation policies

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
		Infants and Children			
Train child care providers in Kidokenetics for the purpose of increasing physical activity in Miami-Dade County child care facilities	Ongoing	Department of Children and Families	www.kidokenetics.com	C	Childcare providers have been trained in Kidokenetics
Venue training for providers, children and parents through partnerships with o Publix - tours on healthy eating o Parks - initiatives to promote family involvement and encourage physical fitness	Ongoing	Department of Children and Families	Publix stores throughout Miami-Dade County; Miami Dade Parks	P	Healthy Publix tours taking place on Saturdays in participating Publix stores
Strategy 1.3.3 Build relationships with organizations and community partners that can influence policy-making, leverage resources, sponsor events, or participate in activities that improve community health.					
Develop strategies for collaboration	Ongoing	Chair and WalkSafe	Internal	P	Draft of strategies for collaboration developed; Katherine will lead work group to implement the strategies
Obtain support (letters, resolutions, etc.) from City of Miami stakeholders, officials, and decision-makers for increasing safety provisions that promote active commuting to and from school	Ongoing	UM Walksafe	CPPW Leadership Team; local, state and national government officials	P	
Strategy 1.5.2 Create a system to identify and track the results and impact of local programs.					
CPPW data collection, management and analyses	6/2012	CPPW Providers/ Health Council		P	

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.1 Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.					
Develop a model policy for nutrition, physical activity and screen time in MDC child care centers	Ongoing until 3/2012	UM, Pediatrics/ Dept. of Children and Families/ Consulting Registered Dietitians/ Quality Counts	Public Health Law & Policy; USDA.gov; CDC.gov; Childcare State Networking Group, etc.	C	Developed through the Child Care Centers Taskforce with the help of Public Health Law and Policy; language must now be softened
Develop and implement Breastfeeding Friendly Worksite Policy within the Miami-Dade County Health Department (MDCHD)	Ongoing	MDCHD - WIC	Literature	C	A Worksite Breastfeeding Support Policy was developed and passed at the MDCHD; WIC department has developed a worksite lactation survey and disseminated the survey to all health dept. employees; there was a 47% response rate out of over 800 employees
Strategy 2.2.2 Adopt wellness policies within the Consortium member organizations and support the adoption of wellness policies in organizations across the county.					
Strategy 2.2.3 Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.					
Provide update on policy and legislative issues	Monthly	DCF)/ WalkSafe/ Healthy Start	Taskforce activity; meetings with legislators and other key	P	Policy development/updates being provided on an ongoing basis

Activities	Target Date	Responsible Owner	Resources	Status	Comments
			stakeholders; organizational level policy development		
Attend key legislative committee meetings in Miami-Dade	Ongoing	UM	City/ county meeting schedules/ websites	NP	

Goal 4: Access: Increase access to resources and information to promote the adoption of healthy lifestyles by residents.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 4.1 Connect organizations and individuals to health resources in the community.					
Strategy 4.1.1 Create, update and disseminate resource inventories as appropriate to each subcommittee.					
Obtain and update websites on available resources	Ongoing	All/ CI committee members will submit to Victoria	Nationwide child health initiatives	P	Resources were provided by committee members and have been updated on the CI Resources page; will be updated on an ongoing basis
Strategy 4.1.2 Conduct outreach and education to local businesses, membership organizations and community based organizations using educational resources developed by Consortium Committees.					
Use of website to reach relevant organizations	Ongoing	All CI members	www.healthymiamidade.org	P	Members promoting Consortium website for those encountered who may be interested

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Strategy 4.1.3 Work collaboratively with other coalitions in promoting policies, systems and environment change that create access to healthcare resources.					
Identify major players and hold appropriate meetings of collaborations with the intent of promoting policies	Ongoing	Chair	Professional network; public/ private agencies; professional organizations (i.e. FPHA, American Public Health Association, etc.)	P	Meetings held regarding CPPW policies

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Health and the Built Environment Action Plan

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Consortium will increase by 25% by 2013.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses obesity prevention, chronic disease, tobacco, oral health and built environment issues to diversify the membership base.					
Target students and professionals in the fields of health, transportation, construction, planning, and government through presentations and mass communication strategies to increase membership.	11-2012	Chair		P	March: Florida International University- School of Public Health April: USGBC So. Miami-Dade

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
					Branch
Objective 1.2 Improve communications and collaboration within the Consortium.					
Strategy 1.2.1 Revise and update the Consortium Website to create a portal for communication within the coalition.					
Maintain committee's information on website updated with presentations, member highlights, talking points and fact sheets.	4-2012	Committee member		P	Fact sheet drafted and member highlights are in process
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Gather information, write and edit HBE columns for newsletter	4- 2012	Committee member		P	HBE articles submitted monthly
Strategy 1.2.4 Develop and implement committee level communications strategies.					
Email monthly minutes and ongoing opportunities.	4- 2012			P	
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Include member reports and highlights in monthly meetings	4- 2012			P	
Objective 1.3 Assure the Consortium will have funded projects with visibility, commitment, and recognition.					
Strategy 1.3.2 Seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented or to "scale up" existing evidence-based, evaluated programs that are already successful in our communities and implement promising evidence-based, evaluated programs that are new to Miami-Dade.					
Discuss opportunities and organize subgroups to apply for opportunities at monthly meetings.	11- 2012	Vice-chair		P	
Strategy 1.3.3 Build links to other organizations and community partners that can provide information, sponsor events, or participate in activities that improve community health.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Hold biannual HBE focused events and discuss progress at monthly meetings.	12- 2012	Chair		P	HBE Brown bag February 29

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.3 Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environment.					
Support local policies that further the committee's mission.	12-2012	Committee Members		P	Write letters of support, attend meetings, etc.

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status	Comments

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 3.2 Utilize existing mechanisms to identify best practices and model programs from the local, state, and national level.					
Strategy 3.2.1 Identify, promote, and guide the adoption of best practices model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.					
Incorporate best practices into the public awareness campaign which highlights the relationship between the built environment and incidental physical activity.	12-2011	Chair		P	

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Health Promotion and Disease Prevention Action Plan

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Health Promotion and Disease Prevention Committee (HPDP) by 25% by 2012.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
HPDP Committee members are encouraged to "bring a friend" to the Committee meetings to increase and diversify its membership	Starting 03/11	HPDP Committee members		P	
A fact sheet on the HPDP Committee will be created to use in the recruitment process of new members	04/11	HPDP Liaison Chair/Vice-Chair		C	

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Identify gaps in membership and evaluate outreach activities	ongoing	Chair/Vice-Chair HPDP Liaison		P	
Make a minimum of 3 presentations about the HPDP Committee in community meetings to increase awareness.	annually	Chair/Vice-Chair		P	One presentation was completed at We Care by committee member, Gene Majka.
Strategy 1.1.2 Define membership benefits for active members to include partnerships via the Consortium's website.					
HPDP Committee members will help Executive Board identify potential membership benefits of being a Consortium member. (e.g. access to a Speakers Bureau; annual community-based screenings; dissemination of information; partnership-building and/or leveraging opportunities; identification of grant opportunities)	Starting 02/11	HPDP Committee		C	Access to a Speakers Bureau was added as a benefit to membership packet at May Executive Board meeting
Chair/Vice-Chair will disseminate information to HPDP Committee members once active membership has been defined and membership benefits drafted.	TBD	Executive Board, HPDP Chair/Vice-Chair		C	Members will receive this information once they renew their membership and are approved.
Objective 1.2 Improve communication and collaboration within the Consortium.					
Strategy 1.2.1 Revise and update the Consortium Website to create a portal for communication within the coalition.					
Chair/Vice-Chair will review content on Website for the HPDP Committee and make recommendations for improvement or updating.	Starting 02/11	Chair/Vice-Chair		C	
Strategy 1.2.2 Create and maintain a membership database that details active, non-active members, contact information and the expertise they bring to the Consortium.					
Assess current membership and expertise they bring.	July 2011	MDCHD/HPDP Consortium Liaison		C	Will be completed once members renew their

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
					membership on the website.
Place on the agenda 5-15 minutes for Committee member presentations which describes their organizations, expertise and services provided in the community.	Starting 03/11	Chair/Vice-Chair		P	
To help with activity above, develop a standard form by which presentations are requested and documented.		Liaison Chair/Vice-Chair		C	
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Provide information for the newsletter.	Starting 03/11	Chair/Vice-Chair and Liaison		BS	To this day, we have yet to provide any information for the newsletter. Need to think about this.
Strategy 1.2.4 Develop and implement committee level communications strategies.					
Develop a list serve of HPDP Committee members.	02/11	Liaison		C	
Send to Committee members the agenda, meeting minutes and any other related meeting materials 3 days prior to meeting.	ongoing	Liaison		C	
Allow for communication and information sharing through HPDP list serve.	ongoing	Liaison Chair/Vice-Chair		C	
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Develop an inventory of evidence-based or promising practices in health promotion being provided by Committee member organizations to include those in the areas of nutrition, physical activity, heart health, cancer prevention.	04/11	Committee members Liaison		P	Chair & Vice-Chair are in discussion with Health Council to determine best method of continuation.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Include contact information.					
Objective 1.3 Assure the Consortium will have sustainable initiatives with visibility, commitment, and recognition.					
Strategy 1.3.1 Work with Consortium Committees to prioritize initiatives according to their implementation readiness (i.e. ready to implement, under development, initial startup) and seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented.					
Reach out to Miami Dade County Office of Grants Coordination and sign up for their weekly list serve on grant opportunities.	03/11	Committee member organizations Liaison		P	Individual member organizations have signed up.
Strategy 1.3.2 Replicate existing evidence-based programs that are already successful in our communities. Seek resources and implement appropriate evidence-based programs that are new to Miami-Dade.					
Continuously look for grant and leveraging opportunities and disseminate to increase likelihood of additional resources supporting implementation of HPDP programs in Miami Dade.	ongoing	Chair/Vice Chair Liaison Committee members		P	
Strategy 1.3.3 Build relationships with organizations and community partners that can influence policy-making, leverage resources, sponsor events, or participate in activities that improve community health.					
Identify other community initiatives that can leverage HPDP efforts.	ongoing	Chair/Vice Chair Committee members		P	
Committee members identify key policy makers/stakeholders with whom they have relationship with that can be helpful to accomplishing goals of HPDP Committee and Consortium.	ongoing	Committee members		P	Discussed in 04/11 meeting but need to formalize collection of this data
Offer at least three community presentations about the Consortium to increase awareness and potential leveraging	ongoing	Committee		P	One presentation was completed at We Care by committee member, Gene

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
opportunities.					Majka.
Objective 1.4 Assure that Consortium initiatives will reflect community needs as identified through data driven research.					
Strategy 1.4.1 Use existing data and/or conduct assessments of local communities as needed by each subcommittee to identify assets in the community that support healthy living.					
HPDP Committee members are encouraged to conduct baseline and post measurements in their programs and share with Committee/Consortium.	ongoing	Committee members	Planning Health Council of South Florida	BS	

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 2.1 Maintain a Health Leadership Team consisting of high level community leaders and decision makers to support evidence-based policy change in Miami-Dade County					
Strategy 2.1.2 Ensure that the Health Leadership Team is educated and informed on critical issues related to policy, systems and environmental change.					
Provide updates, if any, on issues hindering and/or facilitating the successful implementation of the CPPW deliverables by HPDP contracted providers (i.e. opportunities and challenges)	ongoing	Contracted providers		P	Vice-Chair held a call with CPPW leadership to discuss challenges in implementing farmers markets. Will be discussed once CPPW providers participate in the meetings.
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.1 Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.					
Identify potential policies to be prioritized by HPDP Committee (increased funding for breast and cervical cancer screening; establishment of colorectal cancer program; improve funding for outreach, education, and	ongoing	Access to Healthy Foods Working Group-made up of HPDP and Health and Built	Evaluation and Appraisal Report (EAR) process by	P	Work Group has identified farmers markets and needed policies as one area of priority. Talking points,

Activities	Target Date	Responsible Owner	Resources	Status	Comments
transportation to encourage use of farmers markets and farm stands by residents of lower-income neighborhoods, and by WIC and SNAP recipients; introduce or modify land use policies/zoning regulations to promote, expand and protect potential sites for community gardens and farmers' markets, such as vacant city-owned land or unused parking lots.		Environment Committee members	HBE Committee County Comprehensive Master Plan		language concerning permit issues, definition of a farmers market etc. have been drafted (which are lacking in the city ordinance).
Identify champions for pushing the identified policies.	03/11-05/11	Committee members		P	Working with City of Miami who are drafting policies
Strategy 2.2.3 Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.					
Write letters of support for local policies that further the Committee's agenda.	ongoing	Committee members		P	EAR Letter jointly with HBE Committee

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 3.1 Develop and implement multi-media campaign targeting high risk communities in Miami-Dade to promote healthy lifestyles and chronic disease prevention.					
Strategy 3.1.1 Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.					
Educational Campaign (in relation to nutrition/ farmers market)	TBD	Contracted provider: Youth Lead	CPPW grant funds	P	Committee will review and approve point-of-decision educational prompts to be linked to the Make Healthy Happen brand that will be

Activities	Target Date	Responsible Owner	Resources	Status	Comments
					placed at farmers markets
Strategy 3.1.2 Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.					
Development of flyers, brochures, posters, etc. that pertain to the educational campaign				P	
Objective 3.2 Identify best practices and model programs from the local, state, and national level for replication.					
Strategy 3.2.1 Identify, promote, and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.					
Create inventory of HPDP Committee member organizations and services. Place on website as a resource for the community.	07/11	Committee		P	Chair & Vice Chair are in discussion with Health Council to determine best method of continuation.

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Marketing and Membership Committee Action Plan

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Consortium will increase by 25% by 2013.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
Develop a document outlining member benefits to be used as a tool to recruit new members.	TBD	Chair	Consortium Handbook	C	Goal met. Focus on retention and engagement.
Communicate to each committee chair and vice chair that each committee should work towards increasing membership by 25% by 2013.	ongoing	Chair/Vice-Chair		C	Communicated at August Executive Board Meeting.
Development of an area on the new consortium website dedicated to updated information on the membership drive.	9/1/2011	TBD	Consortium webpage	C	Complete
Access database of current membership to create a quarterly report of each committee's membership.	12/1/2011	TBD	Consortium data-base	C	Current membership data will be provided at monthly Executive Board meetings.
Improve attendance at monthly committee meetings to 50% of active members.	7/1/2012	Committee members			Recruit high profile speakers to present meetings
Develop strategies to enhance the speakers bureau including identification of key organizations to recruit	1/31/2012	Committee members		P	Waiting on direction from CPPW via Bridget

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Identify and recruit speakers for the speakers bureau	ongoing			P	Waiting on direction from CPPW via Bridget

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 3.1 Develop and implement multi-media campaign targeting high risk communities in Miami-Dade to promote healthy lifestyles and chronic disease prevention.					
Strategy 3.1.1 Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.					
Collaborate with the Health Promotion and Disease Prevention Committee on point of decision education prompts to be linked to the Make Healthy Happen brand that will be placed in Farmers Markets	9/1/2011	Chair/Vice-Chair		P	Developing slogan for local farmers markets
Develop a campaign that helps consumers identify convenience stores that have healthy food choices available	Based on when locations are determined	CBS		P	Ready to implement " Healthy Happens Here" campaign once logo selection is made by Florida Department of Health
Implement a promotional and outreach campaign to inform residents of safe bicycling routes	12/1/11	Committee members		P	Produced PSA which is airing on CBS TV stations in Miami-Dade
Messages will be developed to raise awareness among legislative representatives about the obesity epidemic.	12/1/11	Committee Members		P	Additional spots on C-Stores, safe bike routes and child care screen time

Activities	Target Date	Responsible Owner	Resources	Status	Comments
					produced.

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Tobacco Free Workgroup

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium for a Healthier Miami-Dade membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Consortium will increase by 25% by 2013.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
The Tobacco-Free Workgroup (TFW) will conduct publicly advertised partnership meetings.	On-going	MDCHD Liaison	Tobacco grant funding	P	This activity is designed to facilitate publicly advertised quarterly meetings of the Tobacco-Free Workgroup in order to increase membership.
Engage in community events to diversify membership.	On-going	TFW members	Members' in-kind services.	P	This activity is designed for members to network and recruit new partners to diversify the membership base, by engaging in health fairs and supporting community events.
Strategy 1.1.2 Define membership benefits for active members to include partnerships via the Consortium's website.					
Educate members on the benefits for active membership	On-going	TFW Chair and Vice-Chair of TFW	Tool-kits, policy development, etc	P	This activity is designed to highlight the benefits to actively engaging in the partnership. Such benefits include, sharing of policies, how to guides, etc.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.2 Improve communications and collaboration within the Consortium.					
Strategy 1.2.1 Revise and update the Consortium Website to create a portal for communication within the coalition.					
Provide Tobacco-Free Workgroup updates for the Consortium's website quarterly.	Ongoing	MDCHD Liaison and TFW Chair & Vice-Chair.	Members' in-kind services.	P	This activity is designed to systematically provide partnership updates to be included in the website.
Strategy 1.2.2 Create and maintain a membership database that details active and non-active members, contact information and the expertise they bring to the Consortium.					
Create a membership database that details active, non-active members, contact information and expertise.	Completed	MDCHD Liaison		C	
Maintain partnership records quarterly.	Ongoing	MDCHD Liaison & TFW Chair & Vice-Chair.	In-kind services.	P	This activity is designed to capture information about the Tobacco-Free Workgroup's partnership structure and members.
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Develop and provide a Tobacco related article once a quarter.	Ongoing	TFW members	In-kind services	P	County Tobacco-Free partners in collaboration with the MDCHD liaison will educate the community on the partnership's efforts, by contributing quarterly with a Tobacco related article for the Consortium's Newsletter.
Strategy 1.2.4 Develop and implement committee level communications strategies.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Establish a communication infrastructure within subcommittees with reporting to the Tobacco-Free Workgroup.	On-going	TFW Chair & Vice-Chair	Members	C	An infrastructure has been established within the Tobacco-Free Workgroup addressing communication flow between the subcommittees and the main committee.
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Promote and participate at trainings and workshops organized by the Consortium.	On going	TFW Chair & Vice-Chair	Members	P	This activity is designed to provide opportunities for members to network.
Provide and promote issue specific trainings for partnership members.	On-going	TFW Chair & Vice-Chair and MDCHD Liaison	Tobacco grant funding, members in-kind	P	This activity is designed to educate and train partners/members on skills needed to advocate and/or implement tobacco policy change.
Collaborate with members in conducting and promoting a community-wide event.	Quarter 4	TFW Chair & Vice-Chair, MDCHD Liaison, and members	Tobacco grant funding, members in-kind	P	This activity is designed to provide opportunities for meaningful collaboration between members in implementing Tobacco education and prevention events in Miami-Dade County. *Sponsor an event around the screening of Victor DeNoble's Addiction Incorporated Screening.*

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.3 Assure the Consortium will have sustainable initiatives with visibility, commitment, and recognition.					
Strategy 1.3.1 Work with Consortium Committees to prioritize initiatives according to their implementation readiness (i.e. read to implement, under development, initial startup) and seek out/leverage resources for those initiatives that are most fully developed and can be quickly implemented.					
Meet with Consortium committees	Q1-4	TFW Chair & Vice-Chair, MDCHD Liaison, and members	Meeting Minutes, Agenda, Sign-In-Sheet	P	TFW meetings have taken place every other month. Subcommittee meetings taken place as needed.
Develop strategy plan	Q1	TFW Chair & Vice-Chair, MDCHD Liaison, and members	Strategy Plan Document	C	Strategy plans were developed for the different goal initiatives.
Conduct issue-specific training	Q1-3	TFW members	Sign-In-Sheet	P	Multiple trainings conducted during quarter 1 and 2. Additional training being organized for quarter 3.
Meet with decision makers	Q3-4	TFW members	Meeting minutes, agenda, talking points	P	Partners are continuously meeting and advocating with decision makers on the Candy Flavor Tobacco Issue and Tobacco Free Schools.
Strategy 1.3.3 Build relationships with organizations and community partners that can influence policy-making, leverage resources, sponsor events, or participate in activities that improve community health.					
The Tobacco-Free Workgroup will participate in National Tobacco Control Observances.	On-going	TFW Chair & Vice-Chair, TFW members,	Grant funding	C	The Tobacco-Free Workgroup will observe one of the national tobacco

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
		and MDCHD Liaisons.			observances to raise awareness in Miami-Dade County. *Observed the Great American Smoke-out, held awareness and educational activities.*
Objective 1.4 Assure that Consortium initiatives will reflect community needs as identified through data driven research.					
Strategy 1.4.1 Use existing data and/or conduct assessments of local communities as needed by each subcommittee to identify assets in the community that support healthy living.					
Conduct local Surveillance of tobacco retail outlets.	On-going	TFW members	In-kind	C	This activity is designed to conduct local surveillance of tobacco retail outlets. The data collected from the surveillance will be used to support Policy Prohibiting/Limiting Tobacco Industry Advertising in Retail Outlets.
Strategy 1.4.3 Use reliable, readily available and recently completed documents in Consortium program planning.					
Communicate and provide recently completed documents from the Consortium program planning to the Tobacco-Free Workgroup committee.	On-going	TFW Chair & Vice-Chair.	In-kind	P	As documents are developed they will be provided to the TFW.
Objective 1.5 Institutionalize an ongoing tracking plan for measuring community health.					
Strategy 1.5.1 Utilize the health indicators and statistics collected in the community to assess progress at the county level on a regular basis.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Utilize the health indicators and statistics collected in the community via Miami Matters	On-going	TFW members	Website, printed docs.	C	

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.1 Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.					
Use CDC's Best Practice Guidelines to guide the adoption of a model tobacco control policy in K-12 schools in Miami-Dade County.	6/30/2012	TFW members	CDC Best Practice Guidelines, members' in-kind resources.	P	The Tobacco-Free Workgroup will use CDC's Best Practice Guidelines for School Health Programs to Prevent Tobacco Use and Addition, developing and implementing comprehensive tobacco-control model policies in K-12 schools. *CDC Best Practice guidelines used to assist in the adoption of a model tobacco control policy in private schools.*
Strategy 2.2.3 Monitor and support the adoption of local policies and state legislation that engender health and wellness and create equitable and supportive environments.					

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Support and assist with the adoption of Tobacco-Free Park policies throughout Miami-Dade.	On-going	TFW Chair & Vice-Chair and members.	In-kind	C	The TFW is currently assisting the City of Hialeah in passing a smoke-free park resolution. In addition, efforts are ongoing for similar results in Miami-Dade County and City of North Miami. *Resolution was achieved, and numerous parks passed policies regarding smoke-free parks.*
Strategy 2.2.4 Support the creation of a Health Agenda for Miami-Dade County that follows the nation health objectives in Healthy People 2020 and addresses negatively trending local health indicators.					
Establish policies for smoke-free multi-units housing	6/30/2012	TFW members	Talking Points, Presentations	P	*Obtained a resolution in the city of Sunny Isles, urging apartment managers to implement Smoke-Free Housing.*
Establish comprehensive policies for Miami-Dade Public Schools and Private Schools	6/30/2012	TFW members	Model policy draft	P	*Partners' success in accomplishing a comprehensive policy at Miami--Dade Christian.*

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status	Comments

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 3.1 Develop and implement multi-media campaign targeting high risk communities in Miami-Dade County to promote healthy lifestyles and chronic disease prevention.					
Strategy 3.1.1 Develop mass media, health promotion and education campaigns that promote healthy lifestyles and disease prevention in targeted communities across Miami-Dade County.					
Participate in national tobacco control observances	On-going	TFW members	Copy of Communication	P	
Produce local mass media advertisements	Q4	TFW members	Transcript or Copy of Media	P	Requires Prior Approval
Solicit issue-focused earned media	Q4	TFW members	Transcript or Copy of Media	P	
Sponsor or host a community-wide event	On-going	TFW members	Sign-In-Sheet, Agenda	P	
Strategy 3.1.2 Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.					
Update TFW web page	On-going	TFW members	Consortium Website	P	
Create newsletters	Q1-4	TFW members	Copy of Communication	P	
Develop press releases	On-going	TFW members	Copy of Communication	P	
Create Flyers for Activities and Events	On-going	TFW members	Copy of Communication	P	
Objective 3.2 Identify best practices and model programs from the local, state, and national level for replication.					

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Strategy 3.2.1 Identify, promote, and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.					
Utilize Tobacco Disparities Logic Model	On-going	TFW members	Copy of Logic Model	P	

Goal 4: Access: Increase access to resources and information to promote the adoption of healthy lifestyles by Miami-Dade County residents.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 4.1 Connect organizations and individuals to health resources in the community.					
Strategy 4.1.1 Create, update and dissemination resource inventories as appropriate to each subcommittee.					
Meet with partners/stakeholders	On-going	TFW members	Agenda, sign-In-sheet	P	
Disseminate communication tools	On-going	TFW members	Copy of communication	P	
Update web site	On-going	TFW members	Consortium web site	P	
Strategy 4.1.2 Conduct outreach and education to local businesses, membership organizations and community based organizations using educational resources developed by Consortium Committees.					
Meet with partners/stakeholders	On-going	SHE,TPS,TFW	Agenda, sign-In-sheet	P	
Interview stakeholders	Q1	TFW members	Survey tool	P	
Present tobacco issues to target audiences	On-going	TFW members	Agenda, sign-In-sheet, talking	P	

Activities	Target Date	Responsible Owner	Resources	Status	Comments
			points		
Strategy 4.1.3 Work collaboratively with other coalitions in promoting policies, systems and environment change that create access to health resources.					
Assess current tobacco policies	Q1-4	SHE, TPS,TFW	N/A	P	
Meet with partners via face-to-face meetings	Q1-4	SHE,TPS	Agenda, talking points	P	
Develop strategy plan	Q1	TFW members	Strategy template	P	

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

Consortium for a Healthier Miami-Dade
Worksite Wellness Action Plan

Goal 1: Strengthening the Consortium: Enhance and strengthen the Consortium membership.

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Objective 1.1 Increase the collective base of the Consortium will increase by 25% by 2013.					
Strategy 1.1.1 Engage and expand representation in the Consortium that addresses prevention to diversify its membership base.					
Engage and expand representation in the Worksite Wellness Workgroup that addresses prevention in the workplace to diversify its membership.	Monthly	Chair, Vice-Chair, and MDCHD Liaison	Consortium brochures, Consortium membership forms, and new-member introduction letter	C	WW Committee Factsheet
Promote Worksite Wellness Workgroup and activities among Consortium members and community.	Monthly	Chair, Vice-Chair, and MDCHD Liaison	Consortium newsletter, Consortium email distribution list	C	Consortium newsletter, Consortium email distribution list an local media outlets
Formally introduce and welcome new members and encourage member participation.	Ongoing	Chair, Vice-Chair, and MDCHD Liaison	New-member introduction letter	C	Formal introductions are customary at every meeting and member presentations are also encouraged
Objective 1.2 Improve communication and collaboration within the Consortium.					
Strategy 1.2.3 Develop and disseminate a Consortium for a Healthier Miami-Dade Newsletter.					
Provide updates to be included in the Consortium Newsletter.	Monthly	Chair, Vice-Chair, and MDCHD Liaison	Monthly Newsletter Submission Form	C	MDCHD Liaison submitted article for WW Awards for March Newsletter.
Strategy 1.2.4 Develop and implement committee level communications strategies.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Communication strategy for Committee Members: Updates during meetings, meeting reminders, event announcements, sharing resources and opportunities during meetings and via email, distribution of previous meeting's minutes prior to next meeting.	Monthly	Chair, Vice-Chair, WW Committee, and MDCHD Liaison	Committee meetings	IP	Have experienced some challenges in having communications approved.
Communication strategy for Consortium: Sharing updates and outcomes through newsletter and quarterly report, meeting reminders, event announcements, share resources and opportunities via email.	Monthly and Quarterly	Chair, Vice-Chair, and MDCHD Staff	Consortium newsletter, Consortium quarterly report, and Consortium email distribution list	C	Have experienced some challenges in having communications approved.
Communication strategy for Community: Share updates and outcomes through newsletter, promote workgroup meetings with meeting date and time, send out meeting and event announcements, share resources and opportunities via email.	Monthly	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Consortium newsletter, Consortium email distribution list, and external media outlets	C	Members have been asked to help with this.
Strategy 1.2.5 Identify and promote opportunities for meaningful collaboration among members in implementing new models for prevention.					
Host an Annual Worksite Wellness Forum and Awards Ceremony.	4/20/12	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community partners/resources, WW Workgroup, MDCHD Staff	C	
Conduct educational workshops with Consortium member organizations. (WW Forums)	Quarterly	Chair, Vice-Chair, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	Committee hosted a workshop in February on wellness policies.
Objective 1.3 Assure the Consortium will have sustainable initiatives with visibility, commitment, and recognition.					
Strategy 1.3.2 Replicate existing evidence-based programs that are already successful in our communities. Seek resources and implement appropriate evidence-based programs that are new to Miami-Dade.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Review and enhance community listing of evidence-based worksite wellness resources.	Annually	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community Partners	C	Should set schedule for review and updates by committee.
Strategy 1.3.3 Build relationships with organizations and community partners that can influence policy-making, leverage resources, sponsor events, or participate in activities that improve community health.					
Conduct educational workshops with Consortium member organizations. (WW Forums)	Quarterly	Chair, Vice-Chair, WW Committee and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	Committee hosted a workshop in February on wellness policies.
Objective 1.4 Assure that Consortium initiatives will reflect community needs as identified through data driven research.					
Strategy 1.4.1 Use existing data and/or conduct assessments of local communities as needed by each subcommittee to identify assets in the community that support healthy living.					
Include data reports or links and assessment tools in community listing of evidence-based worksite wellness resources.	Annually	Chair, Vice-Chair, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	
Strategy 1.4.3 Use reliable, readily available and recently completed documents in Consortium program planning.					
Maintain updated community listing of evidence-based worksite wellness resources.	Ongoing	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	
Refer community listing of evidence-based worksite wellness resources for all workgroup activities and initiatives.	Ongoing	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	
Objective 1.5 Institutionalize an ongoing tracking plan for measuring community health.					

Activities	Target Date	Responsible Owner	Resources	Status*	Comments
Strategy 1.5.2 Create a system to identify and track the results and impact of local programs.					
Conduct a pre-and-post assessment of the effectiveness of all major WW workgroup activities.	Ongoing	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	

Goal 2: Policy Adoption: Increase adoption and implementation of policies, systems and environmental change in creating healthy communities.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 2.1 Maintain a Health Leadership Team consisting of high level community leaders and decision makers to support evidence-based policy change.					
Strategy 2.1.2 Ensure that the Health Leadership Team is educated and informed on critical issues related to policy, systems and environmental change.					
Consistently provide updates to be included in the Consortium Newsletter.	Monthly	Chair, Vice-Chair, and MDCHD Liaison	Monthly newsletter submission form	C	
Complete and submit Committee quarterly reports.	Quarterly	Chair and Vice-Chair	Committee quarterly status report and template	C	
Objective 2.2 Introduce policies and legislation that enact supportive systems and environments for healthy living.					
Strategy 2.2.1 Use identified best practices and model programs to guide the adoption of evidence-based policy making in addressing the health priorities in Miami-Dade County.					
Provide informational materials to introduce policy change. (CPPW)	12/31/10	MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	Committee hosted a workshop in February on wellness policies.

Goal 3: Education and Awareness: Educate and raise awareness of the benefits of healthy lifestyles and health promoting environments.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 3.1 Develop and implement multi-media campaign targeting high risk communities in Miami-Dade to promote healthy lifestyles and chronic disease prevention.					
Strategy 3.1.2 Create, update and utilize tools and materials to support multi-media campaigns including the Consortium website.					
Develop marketing/promotional strategies for WW Workgroup and its events/initiatives.	06/31/11	Chair, Vice-Chair, WW Committee and MDCHD Staff		C	
Update the Consortium Worksite Wellness Workgroup webpage.	Monthly	Chair, Vice-Chair, WW Committee and MDCHD Staff		C	
Objective 3.2 Identify best practices and model programs from the local, state, and national level for replication.					
Strategy 3.2.1 Identify, promote, and guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.					
Maintain updated community listing of evidence-based worksite wellness resources.	Ongoing	Chair, Vice-Chair, WW Committee, and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	

Goal 4: Access: Increase access to resources and information to promote the adoption of healthy lifestyles by residents.

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Objective 4.1 Connect organizations and individuals to health resources in the community.					
Strategy 4.1.1 Create, update and disseminate resource inventories as appropriate to each subcommittee.					
Maintain, update and promote resource bank to help guide the adoption of best practices and model programs that support healthy lifestyles and chronic disease prevention in Miami-Dade County.	Annually	Chair, Vice-Chair, WW Workgroup and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	

Activities	Target Date	Responsible Owner	Resources	Status	Comments
Strategy 4.1.2 Conduct outreach and education to local businesses, membership organizations and community based organizations using educational resources developed by Consortium Committees.					
Conduct educational workshops with Consortium member organizations. (WW Forums)	Quarterly	Chair, Vice-Chair, WW Workgroup and MDCHD Staff	Community listing of evidence-based worksite wellness resources	C	
Strategy 4.1.3 Work collaboratively with other coalitions in promoting policies, systems and environment change that create access to health resources.					
Promote and participate in community partner events, initiatives or trainings that encourage policies, systems and environment change.	Ongoing	Chair, Vice-Chair, WW Workgroup and MDCHD Staff	Local public health initiatives/coalitions, etc.	C	

*Status Legend: C=Completed; P=In Progress; NP=Not in Progress; BS=Behind Schedule

References

DHHS. (2006). *Local Public Health System Performance Assessment.* Atlanta: CDC.

Florida Department of Health. (2007). *Florida MAPP Tour Book, Communities Navigating to Healthier Futures.* Tallahassee: Florida Department of Health.

Health Council of South Florida. (2008). *2007 Community Leader Opinion Survey Summary Report.* Miami: Health Council.

Health Council of South Florida. (2008). *Mobilizing for Action through Planning and Partnerships.* Miami: Health Council.

Health Council of South Florida. (2008). *Racial and Ethnic Health Disparities in Miami-Dade County.* Miami: Health Council.

Professional Research Consultants,Inc. (2006). *2006 PRC Community Health Survey Living Healthy, Living Longer in Miami-Dade County, Florida.* Omaha, Nebraska: PRC.