Prepared by the Florida Department of Health
Office of Community Health and Planning
Reviewed December 2018
Demographic data from 2012-2013 is reflected in this report.
Executive Summary

The Florida Department of Health in Miami-Dade County is pleased to present the Community Health Improvement Plan (CHIP) to our community. This plan was developed with input from a multidisciplinary and multisectorial group of community leaders coming together to develop a comprehensive health agenda. The CHIP is a plan that the entire public health system in Miami-Dade County will be able to follow in order to coordinate resources for more efficient targeted and integrated health improvement efforts (Florida Department of Health, 2012). The CHIP is directly linked to the State Health Improvement Plan (SHIP).

According to the 2012 U.S. Census Bureau, Miami-Dade County (MDC) had a population of 2,527,709, making it the most populous county in Florida and the eighth most populous county in the nation (U.S. Census Bureau, 2012). With a land area of 1,946 square miles, Miami-Dade is the second largest county in Florida. MDC is one of the few counties in the U.S. that is “minority majority”; meaning the minority comprises the majority of the population. More than two-thirds of the residents are Hispanic and 19% are Black. Over 51.2% of its more than 2.5 million residents are foreign-born, a percentage greater than any other county in the U.S. which makes Miami a large multicultural, multi-linguistic population (U.S. Census Bureau, 2012).

Furthermore, 72% of residents age five and older speak another language other than English at home, mostly Spanish and Creole (U.S. Census Bureau, 2012). Unlike much of Florida, MDC has a relatively young population with 21% of individuals under 18 years of age (U.S. Census Bureau, 2012). Only 26.3% of residents age 25 and over have a bachelor’s degree or higher. In 2012, the median household income was $43,464 and the per capita income was $23,304 (U.S. Census Bureau, 2012), with over 19.4% of individuals living below poverty level, M-D County residents are at-risk of poor health status. Further exacerbating health disparities in the county are the high rate of uninsured individuals. An estimated 29.8% of the population (over 700,000 individuals) ages 0-64 years are uninsured in MDC (U.S. Census Bureau, 2012).

The 2013 Miami-Dade Community Health Needs Assessment Household Survey Report provides valuable information about the existing burden of chronic diseases, health behaviors, risk factors and disparities observed in the county. The survey indicates that an overwhelming 82.2% of respondents exhibit one or more of the following cardiovascular risk factors: overweight/obese (62.4%), no leisure-time physical activity in the past month (29.9%), high blood pressure (32.6%), high blood cholesterol (32.2%), and cigarette smoking (10.1%) (Professional Research Consultants Inc., 2013). The data is aligned with the results from the 2010 Behavioral Risk Factor Surveillance System (BRFSS) which indicated that 66.5% of MDC adults were either obese or overweight (Centers for Disease Control and Prevention, 2012).

Prevention Quality Indicators (PQIs) data further reveals disparities in health observed across the county. PQIs help identify avoidable hospital admissions indicate gaps in service, lack of access, lack of insurance, and poverty. Analysis of the 2012 Agency for Healthcare Research
and Quality, Department of Health and Human Services, shows higher burdens for a number of these PQIs (e.g. diabetes, hypertension, congestive heart failure) in zip codes such as 33150, 33136, 33054, 33147, 33128, 33010 and 33127 which fall under communities such as Opa-Locka, Hialeah, Little Haiti, Overtown, Liberty City, North Miami and City of Miami. Many of these communities have high minority populations as well as a high number of low income individuals and families (Professional Research Consultants Inc., 2013).

The CHIP was developed as a result of a comprehensive assessment process which was conducted within a span of 8 months. The Florida Department of Health in Miami-Dade County partnered with the Health Council of South Florida to conduct the Mobilizing for Action through Planning and Partnerships (MAPP), a process that focuses on community health priorities, goals and strategies in Miami-Dade County. The following four assessments were conducted:

i. Local Public Health System Performance Assessment (LHPSA)
ii. Community Themes and Strengths Assessment (CTSA)
iii. Forces of Change Assessment (FOCA)
iv. Community Health Status Assessment (CHNA)

Upon the completion of the comprehensive community assessment, twenty health priorities were identified. Upon further evaluation, focus areas were established as the foundation for the Community Health Improvement Plan: access to care, chronic disease prevention, healthcare disparities, and HIV, STD and infectious diseases.

The Florida Department of Health in Miami-Dade County organized the Community Health Improvement Plan by incorporating the twenty health priorities identified in the MAPP process into the five strategic areas as set forth in the State Health Improvement Plan: Health Protection, Chronic Disease Prevention, Community Redevelopment, Access to Care, and Health Infrastructure.

**The Role of Public Health**

In a study conducted in 1988 by the Institute of Medicine and published in a report titled the Future of Public Health, public health is defined as the “fulfillment of society’s interest in assuring the conditions in which people can be healthy” (Schneider, 2000). Public health activities are achieved through the formal structure of government and through the collaboration and partnerships with private and voluntary organizations. The core functions of public health stem around three activities. These activities include assessments, policy development, and assurance (Schneider, 2000). The public health system is made up of all public, private and voluntary organizations that contribute to the well-being of a community. This system includes public agencies at all levels, healthcare providers; public safety agencies;
human services and charity organizations; education and youth development organizations; recreation and arts related organizations; economic and philanthropic organizations; and environmental agencies and organizations (please refer to figure 1) (Centers for Disease Control and Prevention, 2013).

![Figure 1](image)

As previously stated, there are three core functions of public health, however within these three core functions there are ten essential services. These ten essential services are the activities that are undertaken in all communities within the nation’s local health departments. They are:

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action 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 healthcare when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems (Centers for Disease Control and Prevention, 2013). Please refer to figure 2.

![Image of a circular diagram with sections labeled Research, Monitor Health, Diagnose & Investigate, etc.]

Figure 2

In 2013, the community participated in the Mobilizing for Action through Planning and Partnerships (MAPP) process that focused on community health priorities, goals and strategies in Miami Dade County. MAPP is a community wide strategic planning framework for improving public health. It helps communities prioritize their public health issues, identify resources for addressing them, and implement strategies relevant to their community settings (Health Council of South Florida, 2013). After reviewing current community health improvement efforts, the Florida Department of Health in Miami Dade County in collaboration with the Health Council of South Florida conducted the following four assessments:

1. **Local Public Health System Performance Assessment** (LHPSA): involves bringing the public health community together to reflect on the performance of the system and identify areas of success and improvement. The National Public Health Performance Standards Program (NPHPSP) is used to conduct the measure of partner collaboration in the public health system. (Health Council of South Florida, 2013).

2. **Community Themes and Strengths Assessment** (CTSA): provides an understanding of the issues residents feel are important by addressing the questions: “What is important to our community?”, “How is quality of life perceived in our community?”, and “What
assets do we have that can be used to improve community health?” During this phase, information gathered directed the strategic issues identification phase of the MAPP process (Health Council of South Florida, 2013).

3. **Forces of Change Assessment (FOCA):** identifies legislation, technology, and other changes that affect the context in which the community and its public health system operate (Health Council of South Florida, 2013).

4. **Community Health Status Assessment (CHNA):** provides a list of core indicators for 11 broad-based categories and communities which may also be involved in the selection of additional indicators. Health issues are identified by collecting data for each of these and comparing the jurisdiction’s data to trend information or peer, state, and national data (Health Council of South Florida, 2013). Please refer to Figure 3.

Upon the completion of the comprehensive community assessment, twenty health priorities were identified. Upon further evaluation, four focus areas were established as the foundation for the Community Health Improvement Plan:

- **I. Access to Care**
- **II. Chronic Disease Prevention**
- **III. Healthcare Disparities**
- **IV. HIV, STD and Infectious Diseases**

The Florida Department of Health in Miami-Dade County organized the Community Health Improvement Plan by incorporating the twenty health priorities identified in the MAPP process into the five strategic areas as set forth in the State Health Improvement Plan: Health
Protection, Chronic Disease Prevention, Community Redevelopment, Access to Care, and Health Infrastructure.

Community Health Improvement Plan

Topic Areas

The four topic areas are inclusive of the Top 20 MAPP Community Health Priorities (MAPP Priority ranking in parenthesis)

I. Access to Care (1)
   - Primary Care & Medical Homes (4)
   - Increased Interagency coordination (8)
   - Special Needs populations (12)
   - Undocumented population (15)
   - Cultural competencies (16)
   - Workforce (17)
   - Oral Health (18)

II. Chronic Disease Prevention (2)
    - Heart Disease & Stroke (9)
    - Cancer (11)
    - Tobacco use (20)
    - Nutrition & Physical activity (5)
    - Increased Interagency Coordination (8)

III. Healthcare Disparities (3)
     - Socioeconomic factors (7)
     - Injury & Violence Prevention (19)
     - Maternal and Child Health (14)
     - Increased Interagency Coordination (8)

IV. HIV, STD and Infectious Diseases (10)
    - Increased Interagency Coordination (8)
Health Protection

- Prevent and control infectious diseases
- Prevent and reduce illness, injury and death related to environmental factors
- Minimize loss of life, illness and injury from natural or man-made disasters
- Prevent and reduce unintentional and intentional injuries
Strategic Issue Area
Prevent and Control Infectious Disease

HP2020 Goal: IID-7 Achieve and maintain effective vaccination coverage levels for universally recommended vaccines among young children.

SHIP Strategy: HP1.1 Prevent disease, disability and death through immunization by advancing programs including Florida State Health Online Tracking System (Florida SHOTS), Vaccines for Children Program, Vaccine Preventable Disease Surveillance activities, assessment of immunization coverage levels among target populations, and operational reviews or program compliance visits among health care providers.

SHIP Objective: HP1.1.1 By Dec. 31, 2015, increase the percentage of two-year-olds who are fully immunized from 86.6% (2005) to 90%.

Local Strategy: Develop a process to assure that all vaccinations received by children in the county are properly monitored using the Florida State Health online tracking system (Florida SHOTS).

Local Objective: By June 30, 2019, increase the percentage of two-year olds who are fully immunized from 84.8% (2011) to 90% in Miami-Dade.

HP2020 Goal: IID-1 Reduce, eliminate, or maintain elimination of cases of vaccine-preventable diseases.

SHIP Strategy: HP1.1 Prevent disease, disability and death through immunization by advancing programs including Florida State Health Online Tracking System (Florida SHOTS), Vaccines for Children Program, Vaccine Preventable Disease Surveillance activities, assessment of immunization coverage levels among target populations, and operational reviews or program compliance visits among health care providers.

SHIP Objective: HP1.1.2 By Dec. 31, 2015, increase the percentage of adults aged 65 and older who have had a flu shot in the last year from 65.3% to 75%.

Local Strategy: Develop a community awareness campaign that encourages adults to obtain their influenza vaccine.

Local Objective: By June 30, 2019, increase the percentage of adults aged 65 and older who have had a flu shot in the last year from 50.8% (2010) to 75% in Miami-Dade.

HP2020 Goal: IID-7 Achieve and maintain effective vaccination coverage levels for universally recommended vaccines among young children.

SHIP Strategy: HP1.1 Prevent disease, disability and death through immunization by advancing programs including Florida State Health Online Tracking System (Florida SHOTS), Vaccines for Children Program, Vaccine Preventable Disease Surveillance activities, assessment of immunization coverage levels among target populations, and operational reviews or program compliance visits among health care providers.

SHIP Objective: HP1.1.3 By Dec. 31, 2015, increase the percentage of two year old CHD clients fully immunized from 94% (2011) to 95%.

Local Strategy: Assure that all vaccinations of children attending daycares and schools in Miami-Dade meet the immunization requirements.

Local Objective: By June 30, 2019, increase the percentage of two-year-old CHD clients that are fully immunized in DOH MD from 95% (2011) to 96%.

HP2020 Goal: IID-1.4 Reduce measles cases (U.S.-acquired cases)
**SHIP Strategy:** HP1.1 Prevent disease, disability and death through immunization by advancing programs including Florida State Health Online Tracking System (Florida SHOTS), Vaccines for Children Program, Vaccine Preventable Disease Surveillance activities, assessment of immunization coverage levels among target populations, and operational reviews or program compliance visits among health care providers.

**SHIP Objective:** HP1.1.4 By Dec. 31, 2015, the number of confirmed cases of measles in children under 19 will be zero.

**Local Strategy:** Develop a process to educate the community on measles prevention.

**Local Objective:** By June 30, 2019, the number of confirmed cases of measles in children under 19 in Miami-Dade will be zero.

**HP2020 Goal:** IID-1 Reduce, eliminate, or maintain elimination of cases of vaccine-preventable diseases.

**SHIP Strategy:** HP1.1 Prevent disease, disability and death through immunization by advancing programs including Florida State Health Online Tracking System (Florida SHOTS), Vaccines for Children Program, Vaccine Preventable Disease Surveillance activities, assessment of immunization coverage levels among target populations, and operational reviews or program compliance visits among health care providers.

**SHIP Objective:** HP1.1.5 By Dec. 31, 2015, the number of confirmed cases of Haemophilus influenzae type B in children under 19 will be zero.

**Local Strategy:** Develop an educational awareness campaign for the community explaining the importance of having children properly immunized against vaccine preventable diseases.

**Local Objective:** By June 30, 2019, the number of confirmed cases of Haemophilus influenzae type B in children under 19 in Miami-Dade will be zero.

**HP2020 Goal:** Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and their complications.

**SHIP Strategy:** HP1.2 Prevent exposure to, and infection from illness and disease-related complications from sexually transmitted diseases (STDs), tuberculosis (TB) and other infectious diseases through educational outreach, testing, behavior change, early identification and treatment and community collaboration.

**SHIP Objective:** HP1.2.1 By Dec. 31, 2013, reduce the bacterial STD case rate among females 15–34 years of age from 2627.3 per 100,000 (2010) to 2620 per 100,000.

**Local Strategy:** Develop Memorandums of Agreement to expand bacterial STD testing and educational programs for students, teachers and staff and testing programs in schools and school events.

**Local Objective:** By June 30, 2019, reduce the bacterial STD case rate among females 15–34 years of age from 2098.8 per 100,000 (2012) to 2091.5 per 100,000 in Miami-Dade.

**HP2020 Goal:** GH-2 Reduce the tuberculosis (TB) case rate for foreign-born persons living in the United States.

**SHIP Strategy:** HP1.2 Prevent exposure to, and infection from illness and disease-related complications from sexually transmitted diseases (STDs), tuberculosis (TB) and other infectious diseases through educational outreach, testing, behavior change, early identification and treatment and community collaboration.

**SHIP Objective:** HP1.2.3 By Dec. 31, 2015, reduce the TB case rate from 4.4 per 100,000 (2009) to 3.5 per 100,000.
**Local Strategy:** Provide educational outreach, testing, behavior change, early identification, treatment and community collaboration in Miami Dade to reduce the TB case rate.

**Local Objective:** By June 30, 2019, reduce the TB case rate from 4.9 (2012) per 100,000 to 3.5 per 100,000 in Miami Dade.

**HP2020 Goal:** GH-2 Reduce the tuberculosis (TB) case rate for foreign-born persons living in the United States.

**SHIP Strategy:** HP1.2 Prevent exposure to, and infection from illness and disease-related complications from sexually transmitted diseases (STDs), tuberculosis (TB) and other infectious diseases through educational outreach, testing, behavior change, early identification and treatment and community collaboration.

**SHIP Objective:** HP1.2.6 By Dec. 31, 2015, increase the percentage of TB patients completing therapy within 12 months of initiation of treatment from 90% (2008) to 93%.

**Local Strategy:** Provide educational outreach, testing, early identification, and community collaboration for TB cases completing therapy.

**Local Objective:** By June 30, 2019, increase the percentage of TB patients completing therapy within 12 months of initiation of treatment from 92.1% (2011) to 95% in Miami-Dade.

**HP2020 Goal:** EH-22 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental hazards.

**SHIP Strategy:** HP1.2 Prevent exposure to, and infection from illness and disease-related complications from sexually transmitted diseases (STDs), tuberculosis (TB) and other infectious diseases through educational outreach, testing, behavior change, early identification and treatment and community collaboration.

**SHIP Objective:** HP1.2.7 By Dec. 31, 2013, reduce the enteric disease case rate per 100,000 from 59.2 (2009) to 51.7.

**Local Strategy:** Conduct compliance preventive inspections in regards to enteric disease cases.

**Local Objective:** By June 30, 2019, reduce the enteric disease case rate in Miami-Dade per 100,000 from 54.3 (2011) to 51.7.

**HP2020 Goal:** HIV-4 Reduce new AIDS cases among adolescents and adults.

**SHIP Strategy:** HP1.3 Prevent exposure, infection, illness and death related to HIV and AIDS through educational outreach, enhanced testing initiatives, human behavior change, and county and community collaborations with particular focus on reducing social stigma and racial disparities.

**SHIP Objective:** HP1.3.1 By Dec. 31, 2015, reduce the AIDS case rate per 100,000 from 21.8 (2010) to 20.5.

**Local Strategy:** Promote awareness and education in the community by implementing HIV/AIDS prevention behavioral models to target adults in high incidence areas of Miami Dade.

**Local Objectives:** By June 30, 2019, reduce the AIDS case rate in Miami-Dade per 100,000 from 26 (2010) to 20.5.

**HP2020 Goal:** HIV-1 (Developmental) Reduce new HIV diagnoses among adolescents and adults.

**SHIP Strategy:** HP1.3 Prevent exposure, infection, illness and death related to HIV and AIDS through educational outreach, enhanced testing initiatives, human behavior change, and county and community collaborations with particular focus on reducing social stigma and racial
SHIP Objective: HP1.3.2 By Dec. 31, 2015, increase the percentage of HIV-infected people in Florida who know they are infected from 80% (2011 estimate) to 95%.

Local Strategy: Partner with local governments and federal partners to promote HIV testing in the community and expand targeted efforts to prevent HIV infection by using a combination of effective, evidence-based approaches.

Local Objectives: By June 30, 2019, increase the percentage of adults <65 who have ever been tested for HIV in Miami-Dade from 54.2% (2010) to 60%.

SHIP Objective: HP1.3.3 By Dec. 31, 2015, increase the percentage of HIV-infected people in Florida who have access to and are receiving appropriate prevention, care and treatment services from 55% (2010) to 65%.

Local Strategy: Increase access to care and improve health outcomes for people living with HIV.

Local Objective: By June 30, 2019, increase the percentage of newly identified HIV infected persons linked to care within 90 days of diagnosis and are receiving appropriate prevention, care and treatment services in Miami Dade from 66.0% (2012) to 85%.


SHIP Strategy: HP1.3 Prevent exposure, infection, illness and death related to HIV and AIDS through educational outreach, enhanced testing initiatives, human behavior change, and county and community collaborations with particular focus on reducing social stigma and racial disparities.

SHIP Objective: HP1.3.4 By Dec. 31, 2015, reduce the number of new HIV infections in Florida to be at or below the national state average per year w/ particular focus on the elimination of racial and ethnic disparities in new HIV infections.

Local Strategy: Focus HIV prevention efforts in communities and areas where HIV is most heavily concentrated.

Local Objective: By June 30, 2019, reduce the number of new HIV infections per 100,000 in Miami Dade from 49.8% (2012) to 45% to be at or below the national state average per year with particular focus on the elimination of racial and ethnic disparities in new HIV infections.

HP2020 Goal: Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and their complications.

SHIP Strategy: HP1.4 Conduct disease surveillance to detect, monitor and collect data for public health program planning, evaluation and policy development.

SHIP Objective: HP1.4.1 By Dec. 31, 2012, greater than 75% of selected reportable disease cases of public health significance will be reported from CHDs within 14 days of notification.

Local Strategy: Monitor case investigation status and enhance communication with health care providers.
Local Objective: By June 30, 2019, the percentage of infectious syphilis treated within 14 days of specimen collection date in Miami-Dade notification will increase from 85% to 88%. By June 30, 2019, Miami-Dade female Chlamydia cases treated within 14 days notification will increase from 85% to 88%.

HP2020 Goal: Promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases (STDs) and their complications.
SHIP Strategy: HP1.4 Conduct disease surveillance to detect, monitor and collect data for public health program planning, evaluation and policy development.
SHIP Objective: HP1.4.2 By Dec. 31, 2012, and annually, prepare and disseminate an annual summary of the occurrence of notifiable disease and conditions in Florida.
Local Strategy: Prepare, edit and disseminate the EPI monthly report with a summary of the reported communicable disease cases.
Local Objective: By June 30, 2019, and annually, prepare and disseminate a timely dissemination of the EPI monthly report at 100% in Miami-Dade.

Prevent and reduce illness, injury and death related to environmental factors

HP2020 Goal: EH-22 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental hazards.
SHIP Strategy: HP2.1 Prevent illness, injury and death related to environmental factors through educational outreach, human behavior change, and county and community collaborations.
SHIP Objective: HP2.1.1 By Dec. 31, 2014, 100% of Florida counties will complete the Environmental Public Health Performance assessment, use data to determine gaps and opportunities and create action plans.
Local Strategy: Finalize an action plan to address gaps and opportunities based on the assessment findings by December 31, 2014.
Local Objective: By June 30, 2019, Miami-Dade will complete the Environmental Public Health Performance assessment and develop an action plan.

HP2020 Goal: EH-22 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental hazards.
SHIP Strategy: HP2.2 Identify environmental threats through monitoring and surveillance from inspections, notifications from other agencies, data collection, analysis and data sharing.
SHIP Objective: HP2.2.1 By Sept. 30, 2012, and annually ensure that 90% of illness outbreaks associated with a regulated facility have an environmental assessment or inspection done within 48 hours of initial outbreak report.
Local Strategy: Implement a plan to respond within 48 hours of an initial outbreak.
Local Objective: By Sept. 30, 2016, and annually ensure that 90% of illness outbreaks associated with a regulated facility have an environmental assessment or inspection done within 48 hours of initial outbreak report in Miami-Dade.

HP2020 Goal: EH-4 Increase the proportion of persons served by community water systems who receive a supply of drinking water that meets the regulations of the Safe Drinking Water Act Increase
the proportion of persons served by community water systems who receive a supply of
drinking water that meets the regulations of the Safe Drinking Water Act.

**SHIP Strategy:** HP2.3 Advance programs to ensure compliance with public health standards.

**SHIP Objective:** HP2.3.1 By Dec. 31, 2015, ensure that 93.5% of public water systems have no significant health drinking water quality problems.

**Local Strategy:** Ensure that all Miami-Dade public water systems are in compliance with public health standards.

**Local Objective:** By June 30, 2019, ensure that 93.5% of public water systems have no significant health drinking water quality problems.

**HP2020 Goal:** EH-22 Increase the number of States, Territories, Tribes, and the District of Columbia that monitor diseases or conditions that can be caused by exposure to environmental hazards.

**SHIP Strategy:** HP2.3 Advance programs to ensure compliance with public health standards.

**SHIP Objective:** HP2.3.2 By Dec. 31, 2015, complete 90% of inspections of all other entities with direct impact on public health according to established standards.

**Local Strategy:** Ensure adequate budget and staffing to fully implement the environmental public health regulatory programs.

**Local Objective:** By June 30, 2019, complete 90% of inspections of all other entities with direct impact on public health according to established standards.

**HP2020 Goal:** Use health communication strategy and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

**SHIP Strategy:** HP2.4 Provide consultation to community planners to ensure healthy re-use of land.

**SHIP Objective:** HP2.4.1 By Jan. 31, 2013, Department of Health will offer comprehensive support and technical assistance to County Health Departments to perform Health Impact Assessments that will inform the decision making process about health consequences of plans, projects and policies.

**Local Strategy:** Continue to be part of the local and state Health and the Built Environment workgroup and develop a plan to coordinate with the State Health Office staff on issues related to public health impact assessments.

**Local Objective:** By June 30, 2019, DOH MD will support Health Impact Assessments that will inform the decision making process about health consequences of plans, projects and policies in Miami-Dade.

**Minimize loss of life, illness and injury from natural or man-made disasters**

**HP2020 Goal:** Use health communication strategy and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

**SHIP Strategy:** HP3.1 Prepare the public health and health care system for all hazards, natural or man-made.

**SHIP Objective:** HP3.1.1 By Dec. 31, 2013, complete After Action Reports and Improvement Plans within 30 days of exercise or real event.

**Local Strategy:** Prepare the public health and health care system for all hazards, natural or man-made.

**Local Objective:** By June 30, 2019, complete After Action Report (AAR) and Improvement Plan (IP) following an exercise or real incident from 86.5% (2015) to 90.0%.
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<thead>
<tr>
<th><strong>HP2020 Goal:</strong></th>
<th>Use health communication strategy and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.</th>
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<td><strong>SHIP Strategy:</strong></td>
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<td><strong>SHIP Objective:</strong></td>
<td>HP3.2.1 Annually, ensure pre-identified staff covering Public Health and Medical incident management command roles can report to duty within 60 minutes or less.</td>
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<td><strong>Local Strategy:</strong></td>
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<tr>
<td><strong>Local Objective:</strong></td>
<td>Annually, ensure pre-identified staff covering Public Health and Medical incident management command roles can report to duty within 60 minutes or less.</td>
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| **SHIP Strategy:** | HP3.3 Ensure surge capacity to meet the needs of all hazards. |
| **SHIP Objective:** | HP3.3.1 By Dec. 31, 2013, achieve and maintain national Public Health Preparedness Capabilities and Standards through implementation of the Public Health and Health Care Preparedness Strategic Plan. |
| **Local Strategy:** | Develop a method to ensure surge capacity to meet the needs of all hazards. |
| **Local Objective:** | By June 30, 2019, achieve and maintain DOH MD Public Health Preparedness Strategic Plan alignment with Florida Public Health and Health Care Preparedness Strategic Plan. |

| **SHIP Strategy:** | HP3.6 Create an informed, empowered, and resilient public and a prepared health system. |
| **SHIP Objective:** | HP3.6.1 By June 30, 2015, disseminate risk communications messages to the public within three hours of any incident. |
| **Local Strategy:** | Create an informed, empowered, and resilient public and a prepared health system. |
| **Local Objective:** | By June 30, 2019, disseminate a first risk communication message for the public during an exercise or a real incident in Miami-Dade. |

| **SHIP Strategy:** | HP3.6.2 By June 30, 2015, increase the number of community sectors, in which Community Health Departments identified key organizations to participate in significant public health, medical, and mental or behavioral health-related emergency preparedness efforts or activities, from 0 to 11. The 11 community sectors are: business, community leadership, cultural and faith-based groups and organizations, education and childcare settings, emergency management, health care, housing and sheltering, media, mental or behavioral health, social services and senior services. |
| **Local Strategy:** | Develop trainings to ensure organizations will be actively engaged in preparedness activities and in compliance with emergency operations and response plans. |
| **Local Objective:** | By June 30, 2019, increase the number of community sectors, in which DOH-Miami-Dade partners participate in significant public health, medical, and mental or behavioral health-related emergency preparedness efforts or activities. |
Prevent and Reduce unintentional and intentional injuries

**HP2020 Goal:** IVP-1 Reduce fatal and nonfatal injuries.

**SHIP Strategy:** HP4.1 Facilitate opportunities for collaborative injury prevention efforts in traffic safety, poisoning, interpersonal violence, suicide, child maltreatment, fall-related injuries among seniors, early childhood water safety and drowning prevention and other injuries.

**SHIP Objective:** HP4.1.1 By Dec. 31, 2012, develop a senior falls prevention plan.

**Local Strategy:** Provide injury prevention education and programs to the community, specifically education related to reducing falls for adults 60 years and older.

**Local Objective:** By June 30, 2019, decrease the rate of deaths from unintentional falls for individuals ages 65 and older in Miami-Dade from 29.8 (2011) to 25.

**HP2020 Goal:** IVP-1 Reduce fatal and nonfatal injuries.

**SHIP Strategy:** HP4.1 Facilitate opportunities for collaborative injury prevention efforts in traffic safety, poisoning, interpersonal violence, suicide, child maltreatment, fall-related injuries among seniors, early childhood water safety and drowning prevention and other injuries.

**SHIP Objective:** HP4.1.2 By Dec. 31, 2012, develop and implement annually thereafter a statewide early childhood (ages 1–4) safety and drowning prevention campaign.

**Local Strategy:** Educate the community about drowning prevention in Miami Dade.

**Local Objective:** By June 30, 2019, decrease the number of hospitalizations for near drowning, ages 1-5 (Three Year Rolling) in Miami-Dade from 21 (2011) to 10. By June 30, 2019, decrease the rate of deaths from drowning, ages 0-5 (Three Year Rolling) in Miami-Dade from 6.0 (2010) to 2.0.

**HP2020 Goal:** IVP-11 Reduce unintentional injury deaths.

**SHIP Strategy:** HP4.1 Facilitate opportunities for collaborative injury prevention efforts in traffic safety, poisoning, interpersonal violence, suicide, child maltreatment, fall-related injuries among seniors, early childhood water safety and drowning prevention and other injuries.

**SHIP Objective:** HP4.1.3 By Dec. 31, 2015, reduce the rate of deaths from all causes of external injury among Florida resident children ages 0–14 from 9.0 per 100,000 to 7.6 per 100,000 in those Florida counties with existing state-local injury prevention partnerships.

**Local Strategy:** Maintain partnerships with local community and non-profit organizations that provide injury interventions for the community.

**Local Objective:** By June 30, 2019, reduce the rate of deaths from all external causes, ages 0-14 among Miami-Dade resident children ages 0–14 from 5.3 (2011) per 100,000 to 5.0 per 100,000.

**HP2020 Goal:** IVP-1 Reduce fatal and nonfatal injuries.

**SHIP Strategy:** HP4.2 Implement detection and surveillance through data collection, analysis and sharing.

**SHIP Objective:** HP4.2.1 By Dec. 31, 2012, and annually update data sources in the Florida Injury Surveillance Data System and disseminate annual injury data report.

**Local Strategy:** Develop a method to report annually using the Florida Injury Surveillance Data System.

**Local Objective:** By June 30, 2019, annually update data sources in the Florida Injury Surveillance Data System and disseminate annual injury data report.
<table>
<thead>
<tr>
<th>HP2020 Goal:</th>
<th>IVP-8 Increase access to trauma care in the United States.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHIP Strategy:</td>
<td>HP4.3 Respond to injuries by ensuring treatment or follow-up, improved long term consequences/outcomes of injuries, compliance with standards, collaboration with other agencies and communication with stakeholders.</td>
</tr>
<tr>
<td>SHIP Objective:</td>
<td>HP4.3.1 By Dec. 31, 2015, reduce the statewide trauma mortality rate from 6.5% to meet the average U.S. trauma mortality rate of 4.4% or less.</td>
</tr>
<tr>
<td>Local Strategy:</td>
<td>Conduct surveillance, identify and disseminate evidence-based strategy, and promote the implementation of effective policies to reduce the incidence of severe injuries in Miami-Dade.</td>
</tr>
<tr>
<td>Local Objective:</td>
<td>By June 30, 2019, reduce the number of Fatal Traumatic Brain Injuries under age 1, age adjusted 3 Year Rolling in Miami-Dade from 5% (2010) to 4.5%. By June 30, 2019, reduce the number Fatal Traumatic Brain Injuries 1-5, Age Adjusted 3 Year Rolling in Miami-Dade from 10% (2010) to 8%.</td>
</tr>
</tbody>
</table>
Chronic Disease Prevention

- Increase the percentage of adults and children who are at a healthy weight
- Increase access to resources that promote healthy behaviors
- Reduce chronic disease morbidity and mortality
- Reduce illness, disability and death related to tobacco use and secondhand smoke exposure
### Strategic Issue Area
**Increase the percentage of adults and children who are at a healthy weight**

| HP2020 Goal: | NWS-5 Increase the proportion of primary care physicians who regularly measure the body mass index of their patients |
| SHIP Strategy: | CD1.2 Promote the use of evidenced-based clinical guidelines to assess overweight and obesity and establish principles of safe and effective weight loss |
| SHIP Objective: | CD1.2.1 By Dec. 31, 2014, increase by 10% the number of targeted health care providers who calculate and document body mass index of their patients. |
| Local Strategy: | A process will be developed targeted to health care providers to have them document height and weight on all clinical visits. |
| Local Objective: | By June 30, 2019, increase the number of targeted health care providers who calculate and document body mass index of their patients from 1.0% (2014) to 4.0%. |

| HP2020 Goal: | NWS-11(Developmental) Prevent inappropriate weight gain in youth and adults |
| SHIP Strategy: | CD1.3 Increase the availability of healthful food |
| SHIP Objective: | CD1.3.1 By June 30, 2013, DOH will identify and disseminate model policies and practices that increase availability and consumption of healthy foods. |
| Local Strategy: | Disseminate model policies and practices about healthy eating and increasing access to healthy food and beverages. |
| Local Objective: | By June 30, 2019, identify model policies practices that increase availability and consumption of healthy foods. |

| HP2020 Goal: | NWS-14 Increase the contribution of fruits to the diets of the population aged 2 years and older |
| SHIP Strategy: | CD1.3 Increase the availability of healthful food |
| SHIP Objective: | CD1.3.5 By June 30, 2013, DOH will collaborate with the U.S. Dept. of Agriculture’s Women, Infants and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) to expand opportunities to purchase healthy foods for users of these services. |
| Local Strategy: | Expand healthy food purchase options. |
| Local Objective: | By June 30, 2019, DOH MD will collaborate with the U.S. Dept. of Agriculture’s Women, Infants and Children (WIC) and Supplemental Nutrition Assistance Program (SNAP) to decrease the percentage of WIC children 2 years and older who are overweight or at risk of being overweight from 27.0% (2014) to 25.0%. |

### Increase access to resources that promote healthy behaviors

| HP2020 Goal: | NWS-8 Increase the proportion of adults who are at a healthy weight Increase the proportion of adults who are at a healthy weight |
| SHIP Strategy: | CD2.1 Collaborate with partner agencies and organizations to implement initiatives that promote healthy behaviors |
| SHIP Objective: | CD2.1.2 By Dec. 31, 2015, decrease the percentage of adults who are overweight from 37.8% |
Local Strategy: Collaborate with partners and organizations to promote Healthy behaviors among Miami-Dade adults who are overweight.

Local Objective: By June 30, 2019, decrease the percentage of Miami-Dade adults who are overweight from 38.1% (2010) to lower than 35.9%.

**HP2020 Goal:** NWS-11(Developmental) Prevent inappropriate weight gain in youth and adults.

**SHIP Strategy:** CD2.1 Collaborate with partner agencies and organizations to implement initiatives that promote healthy behaviors.

**SHIP Objective:** CD2.1.3 By Sept. 30, 2012, the Departments of Health and Education will identify strategies for monitoring childhood markers of well-being including: measuring height and weight (to obtain body mass index) and individual-level physical activity.

Local Strategy: Record childhood markers of well-being.

Local Objective: CD2.1.3. By June 30, 2019, decrease the percentage of high school students reporting BMI at or above the 95th percentile.

**HP2020 Goal:** NWS-7 (Developmental) Increase the proportion of worksites that offer nutrition or weight management classes or counseling

**SHIP Strategy:** CD2.2 Support use of evidence-based employee wellness programs to promote healthy behaviors.

**SHIP Objective:** CD2.2.2 By June 30, 2014, increase by 5% the availability of employee wellness programs that address nutrition, weight management and smoking cessation counseling services in workplaces other than state agencies.

Local Strategy: Provide technical assistance to organizations to develop wellness programs for worksites other than governmental agencies.

Local Objective: By June 30, 2019, The Consortium for a Healthier Miami-Dade’s Worksite Wellness committee will develop a plan to provide technical assistance to increase by 5% the availability of employee wellness programs in Miami-Dade.

**HP2020 Goal:** NWS-11(Developmental) Prevent inappropriate weight gain in youth and adults.

**SHIP Strategy:** CD2.3 Implement the Alliance for a Healthier Generation’s Healthy Schools Program or USDA’s Healthier US School Challenge

**SHIP Objective:** CD2.3.4 By Dec. 31, 2015, decrease the percentage of adolescents who are overweight from 13.6% to 12.9%.

Local Strategy: Disseminate evidence-based best practices on adolescent healthy weight.

Local Objective: By June 30, 2019, decrease the percentage of adolescents who are overweight from 17.4% (2010) to 15.5%.

**Reduce chronic disease morbidity and mortality**

**HP2020 Goal:** C-3 Reduce the female breast cancer death rate Reduce the female breast cancer death rate

**SHIP Strategy:** CD3.2 Promote early detection and screening for chronic diseases such as asthma, cancer, heart disease and diabetes

**SHIP Objective:** CD3.2.1 By Dec. 30, 2015, increase by 10% the percentage of women who receive a breast cancer screening based on the most recent clinical guidelines from 61.9% (2010) to 71.9%.

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Local Strategy: Encourage women in Miami-Dade to seek cancer screenings regularly through education.
Local Objective: By June 30, 2019, increase the percentage of women 40 and older in Miami-Dade who received mammogram in the past year from 62.9% (2007) to 74.2%. By June 30, 2019, increase the percentage of women 18 years of age and older in in Miami-Dade who had a clinical breast exam in the past year from 59.6% (2010) to 71.9%.

HP2020 Goal: C-4 Reduce the death rate from cancer of the uterine cervix
SHIP Strategy: CD3.2 Promote early detection and screening for chronic diseases such as asthma, cancer, heart disease and diabetes
SHIP Objective: CD3.2.2 By Dec. 30, 2015, increase by 10% the percentage of women who receive a cervical cancer screening based on the most recent clinical guidelines from 57.1% (2010) to 67.1%
Local Strategy: Encourage women in Miami-Dade to seek cervical cancer screenings regularly through education.
Local Objective: By June 30, 2019, increase by 10% the number of women 18 years of age and older who received a Pap test in the past year from 56.9% (2010) to 66.9%

HP2020 Goal: Promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights
SHIP Strategy: CD3.2 Promote early detection and screening for chronic diseases such as asthma, cancer, heart disease and diabetes
SHIP Objective: CD3.2.4 By Dec. 30, 2015, increase the percentage of adults who had their cholesterol checked in the past two years from 73.3% to 76.3%
Local Strategy: Encourage Miami-Dade residents to get screening for chronic diseases through an educational campaign.
Local Objective: By June 30, 2019, increase the percentage of Miami-Dade adults who had a cholesterol screening in the past two years from 61.5% (2007) to 70.5%

HP2020 Goal: Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.
SHIP Strategy: CD3.3 Promote use of evidence-based clinical guidelines to manage chronic diseases
SHIP Objective: CD3.3.3 By Dec. 31, 2013, assess and implement at least three effective strategies for promoting clinical practice guidelines through partner networks.
Local Objective: By June 30, 2019, implement a minimum of three effective strategies for promoting clinical practice guidelines through partner networks.

Reduce illness, disability and death related to tobacco use and secondhand smoke exposure

HP2020 Goal: TU-1 Reduce tobacco use by adults
SHIP Strategy: CD4.2 Promote quitting among Florida’s youth and adults
SHIP Objective: CD4.2.1: By Dec. 31, 2014, reduce current smoking rates among Florida adults from 17.1% (2010) to 14.5%
Local Strategy: Promote increased use of cessation services throughout Miami-Dade.
Local Objective: By June 30, 2019, reduce current smoking rates among Miami-Dade adults from 10.6% (2010)
| HP2020 Goal: | TU-1 Reduce tobacco use by adults |
| SHIP Strategy: | CD4.2 Promote quitting among Florida’s youth and adults |
| SHIP Objective: | CD4.2.2 By Dec. 31, 2015, reduce the use of other tobacco products—smokeless tobacco, snus (pouched smokeless tobacco) and cigars—among Florida adults from 5.6% (2010) to 4.76%. |
| Local Strategy: | Promote increased use of cessation services throughout Miami-Dade. |
| Local Objective: | By June 30, 2019, reduce the use of other tobacco products—smokeless tobacco, snus (pouched smokeless tobacco) and cigars—among Miami-Dade County adults. |

| HP2020 Goal: | TU-2 Reduce tobacco use by adolescents |
| SHIP Strategy: | CD4.2 Promote quitting among Florida’s youth and adults |
| SHIP Objective: | CD4.2.3: By Dec. 31, 2015, reduce current cigarette use among Florida’s youth, ages 11–17 from 8.3% (2010) to 7.5%. |
| Local Strategy: | Develop an educational campaign on the dangers of youth tobacco use. |
| Local Objective: | By June 30, 2019, reduce current cigarette use among Miami-Dade’s youth, ages 11–17 from 4.7% (2010) to 3.5%. |

| HP2020 Goal: | TU-2 Reduce tobacco use by adolescents |
| SHIP Strategy: | CD4.2 Promote quitting among Florida’s youth and adults |
| SHIP Objective: | CD4.2.4 By Dec. 31, 2015, reduce the use of tobacco products other than cigarettes by youth, ages 11–17, from 14.1% (2010) to 12.7%. Tobacco products include: smokeless tobacco, snus, cigars, flavored cigars, bidis, kreteks, pipe tobacco, flavored tobacco |
| Local Strategy: | Promote increased use of cessation services throughout Miami-Dade. |
| Local Objective: | By June 30, 2019, decrease the percentage of Miami-Dade teens (11-17) who have used smokeless tobacco in the last 30 days from 3.7% (2011) to 1.7%. By June 30, 2019, decrease the percentage of Miami-Dade teens (11-17) who have smoked a cigar in the last 30 days from 8.7% (2011) to 3.8%. |

| HP2020 Goal: | Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure. |
| SHIP Strategy: | CD4.3 Eliminate Floridians’ exposure to secondhand tobacco smoke |
| SHIP Objective: | CD4.3.1 By Dec. 31, 2015, reduce the percentage of Florida adults who were exposed to secondhand smoke at home during the past 7 days from 8.6% (2010) to 7.7%. |
| Local Strategy: | Develop an educational campaign on the dangers of secondhand smoke exposure at home. |
| Local Objective: | By June 30, 2019, decrease the percentage of non-smokers who report that someone smokes at home from 6.4% (2013) to 5.1%. By June 30, 2019, decrease the percentage of households with children that report someone smokes at home from 11.4% (2013) to 7.2%. |

| HP2020 Goal: | Reduce illness, disability, and death related to tobacco use and secondhand smoke exposure. |
| SHIP Strategy: | CD4.3 Eliminate Floridians’ exposure to secondhand tobacco smoke |
| SHIP Objective: | CD4.3.2 By Dec. 31, 2015, reduce the percentage of Florida youth, ages 11–17 who were exposed to secondhand smoke in a room or car during the past 7 days from 50.3% (2010) to 45.3%. |
| Local Strategy: | Develop an educational campaign on the dangers of youth being exposed to secondhand smoke. |
smoke in a room or car.

**Local Objective:** By June 30, 2019, reduce the percentage of Miami-Dade teens (11-17) who have been exposed to second-hand smoke in the last 30 days from 31.9% (2014) to 29.8%.
Community Redevelopment and Partnerships

- Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals
- Build and revitalize communities so people can live healthy lives
- Provide equal access to culturally and linguistically competent care
**Strategic Issue Area**

Integrate planning and assessment processes to maximize partnerships and expertise of a community in accomplishing its goals

<table>
<thead>
<tr>
<th><strong>HP2020 Goal:</strong></th>
<th>Promote health for all through a healthy environment.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SHIP Strategy:</strong></td>
<td>CR1.1 Include a public health component in community planning processes to increase awareness and opportunity for the built environment to impact healthy behaviors.</td>
</tr>
<tr>
<td><strong>SHIP Objective:</strong></td>
<td>CR1.2.2 By Dec. 31, 2013, DOH and the Florida Association of Health Planning Agencies and other organizations will develop resources and training materials that promote health-related conversations about health benefits to communities resulting from the built environment.</td>
</tr>
<tr>
<td><strong>Local Strategy:</strong></td>
<td>Develop resources and training materials on the topic of Health and the Built Environment in addition to identifying speakers who can provide education and community awareness.</td>
</tr>
<tr>
<td><strong>Local Objective:</strong></td>
<td>By June 30, 2019, The Health and the Built Environment Committee of the Consortium will promote health–related conversations about health benefits within the various communities of Miami-Dade.</td>
</tr>
</tbody>
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<tbody>
<tr>
<td><strong>SHIP Strategy:</strong></td>
<td>CR1.2 Share effective strategies and messages that support the connection between the built environment and healthy behaviors.</td>
</tr>
<tr>
<td><strong>SHIP Objective:</strong></td>
<td>CR1.2.4 By Dec. 31, 2015, DOH will work with the Department of Transportation and the Department of Environmental Protection to increase the number of municipalities, counties and regions that have complete streets policies for implementing Section 335.065, Florida Statutes, from 13 in 2011 to 26.</td>
</tr>
<tr>
<td><strong>Local Strategy:</strong></td>
<td>A plan will be developed to allow for the adoption of Complete Streets Policy in Miami-Dade.</td>
</tr>
<tr>
<td><strong>Local Objective:</strong></td>
<td>By June 30, 2019, increase the number of municipalities that have complete streets policies from 0 (2013) to 34.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>HP 2020:</strong></th>
<th>Promote health for all through a healthy environment.</th>
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</thead>
<tbody>
<tr>
<td><strong>SHIP Strategy:</strong></td>
<td>CR1.3 Maximize effective and efficient means of collecting and sharing data that is common to multiple assessment processes.</td>
</tr>
<tr>
<td><strong>SHIP Objective:</strong></td>
<td>CR1.3.1 by June 30, 2014, DOH will develop guidance for inspectors to incorporate community assessment activities into their inspections/duties.</td>
</tr>
<tr>
<td><strong>Local Strategy:</strong></td>
<td>Develop guidelines for assuring that the various municipalities within Miami-Dade conduct the appropriate community health assessments prior to undertaking new projects.</td>
</tr>
<tr>
<td><strong>Local Objective:</strong></td>
<td>By June 30, 2019 two municipalities would have conducted health impact assessments within Miami-Dade.</td>
</tr>
</tbody>
</table>
## Build and revitalize communities so people can live healthy lives

<table>
<thead>
<tr>
<th>HP2020 Goal</th>
<th>Promote health for all through a healthy environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>SHIP Strategy</td>
<td>CR2.1 Make it safer for people to live active, healthy lives by increasing community policing, addressing substandard housing and increasing aging-in-place opportunities</td>
</tr>
<tr>
<td>SHIP Objective</td>
<td>CR2.1.6 By Oct. 31, 2014, DOH will work with the Department of Elder Affairs and other state agencies to disseminate model “Communities for a Lifetime” policies focused on improving health by “aging in place” (e.g., enabling seniors to remain at home for as long as possible)</td>
</tr>
<tr>
<td>Local Strategy</td>
<td>Support partners in creating opportunities for older adults to be more active in Miami-Dade.</td>
</tr>
<tr>
<td>Local Objective</td>
<td>By June 30, 2019 a strategy will be written in partnership with the Alliance for Aging that will support older adults being able to age in place with the best quality of life</td>
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</table>

## Provide equal access to culturally and linguistically competent care

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<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>SHIP Strategy</td>
<td>CR3.1 Promote health in all policies to ensure that decisions and investments promote health or mitigate the negative health consequences of previous policies</td>
</tr>
<tr>
<td>SHIP Objective</td>
<td>CR3.1.1 By July 31, 2013, DOH will offer systematic support and technical assistance to CHDs to perform Health Impact Assessments that will systematically inform the decision-making process about health consequences of plans, projects and policies</td>
</tr>
<tr>
<td>Local Strategy</td>
<td>Train DOH Miami-Dade employees in performing Health Impact Assessments.</td>
</tr>
<tr>
<td>Local Objective</td>
<td>By June 30, 2019 conduct one Health Impact Assessment training for DOH MD employees.</td>
</tr>
</tbody>
</table>
Access to Care

- Regularly assess health care assets and service needs
- Improve access to primary care services for Floridians
- Enhance access to preventive, restorative and emergency oral health care
- Reduce maternal and infant morbidity and mortality
Strategic Issue Area
Regularly assess health care assets and service needs

HP2020 Goal: Improve access to comprehensive, quality health care services
SHIP Strategy: AC1.1 Collaboratively assess and report Florida’s health care access resources and needs including patterns of health care system use and barriers to care.
SHIP Objective: AC1.1 By Dec. 31, 2012, and every four years thereafter to coincide with the state health improvement planning process, a health resource assessment process will be conducted resulting in a written report that includes an inventory, analysis and geographic mapping of Florida’s health care providers including high-volume Medicaid providers, health care needs of Florida residents, and health insurance coverage.
Local Strategy: Develop a strategy for updating community resources with agencies within the community that obtain the appropriate data.
Local Objective: By July 31, 2014 a plan will be devised as to the most effective way to update community resources in collaboration with community partners.

HP2020 Goal: Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines
SHIP Strategy: AC1.1 Collaboratively assess and report Florida’s health care access resources and needs including patterns of health care system use and barriers to care.
SHIP Objective: AC1.1.3 By June 30, 2014, and every three years thereafter, Department of Health will collect and report county-level Behavioral Risk Factor Surveillance System (BRFSS) data to assess related health behaviors and health status.
Local Strategy: The BRFSS data and the Community Health Household Needs Assessments will be incorporated into the development of the Community Health Improvement Plan in order to track neighborhood level health indicators.
Local Objective: By June 30, 2019, a local Community Health Needs Assessment will be conducted to assess related health behaviors and health status at the zip code level. This will coincide with the five-year assessment cycle using the Mobilizing for Action through Planning and Partnerships.

Improve access to primary care services

HP2020 Goal: AHS-4 (Developmental) Increase the number of practicing primary care providers.
SHIP Strategy: AC2.1 Reduce professional health care workforce shortages and improve geographic distribution of the professional health care workforce.
SHIP Objective: AC2.1.7: By Dec. 31, 2015, the percentage of mid-level providers in primary care practice settings will increase by 10%.
Local Strategy: Strategies will be developed through the various networks within the county to assure that the needs of the desperate population are being met.
Local Objective: By June 30, 2019 the Florida Department of Health in Miami-Dade Administration will participate in and support programs within the County that promote primary care and residency programs.
### HP2020 Goal: OH-4 Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year.

**SHIP Strategy:** AC4.2 Promote integration between the oral health care system and other health care providers, including information sharing, education for medical providers on preventive dental health services, more effective reimbursement, and incentives for improving coordination of care to improve access to oral health services and revision of Medicaid reimbursement rules.

**SHIP Objective:** AC4.2.1 By Dec. 31, 2014, increase the percentage of adults who report having visited a dentist or dental clinic in the past year from 64.7% to 67%.

**Local Strategy:** Develop a process to integrate oral health awareness activities into the community.

**Local Objective:** By June 30, 2019, increase the percentage of adult CHD clients receiving dental services in Miami-Dade County.

### HP2020 Goal: OH-7 Reduce the proportion of adults who have ever had a permanent tooth extracted because of dental caries or periodontal disease.

**SHIP Strategy:** AC4.2 Promote integration between the oral health care system and other health care providers, including information sharing, education for medical providers on preventive dental health services, more effective reimbursement, and incentives for improving coordination of care to improve access to oral health services and revision of Medicaid reimbursement rules.

**SHIP Objective:** AC4.2.2 By Dec. 31, 2014, reduce the percentage of adults who report having permanent teeth removed because of tooth decay or gum disease from 53% to 51%.

**Local Strategy:** Reduce the percentage of adults who had a permanent tooth removed because of tooth decay or gum disease in Miami-Dade from 48.8% to 45% by June 30, 2019.

**Local Objective:** By June 30, 2019, increase the number of children CHD clients receiving preventative services in Miami-Dade County.

### HP2020 Goal: OH-11 Increase the proportion of patients who receive oral health services at Federally Qualified Health Centers (FQHCs) each year.

**SHIP Strategy:** AC4.2 Promote integration between the oral health care system and other health care providers, including information sharing, education for medical providers on preventive dental health services, more effective reimbursement, and incentives for improving coordination of care to improve access to oral health services and revision of Medicaid reimbursement rules.

**SHIP Objective:** AC4.2.4 By Dec. 31, 2015, increase the percentage of the targeted low-income population receiving dental services from a county health department from 9.8% to 18.64%.

**Local Strategy:** Ensure the availability of the Seals on Wheels program in the areas of the county with decreased fluoridated water.

**Local Objective:** By June 30, 2019, increase the percentage of CHD clients from targeted low-income population receiving dental services in Miami-Dade.

### HP2020 Goal: OH-12 Increase the proportion of children and adolescents who have received dental sealants on their molar teeth
SHIP Strategy: AC4.3 Assess current and future practitioner needs via re-licensure surveys of dentists and dental hygienists to ascertain geographic distribution of practitioners and types of practice.

SHIP Objective: AC4.3.2 By Dec. 31, 2015, increase the percentage of children and adolescents who have received dental sealants on their molar teeth.

Local Strategy: Develop an awareness campaign for families on the importance of dental sealants on molar teeth in Miami-Dade.

Local Objective: By June 30, 2019, increase the number of children CHD clients receiving dental sealants in Miami-Dade County.

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**HP2020 Goal:** MICH-5 Reduce the rate of maternal mortality.

**SHIP Strategy:** AC5.1 Raise awareness among providers and consumers on the importance and benefits of being healthy prior to pregnancy.

**SHIP Objective:** AC5.1.2 By Dec. 31, 2015, reduce the rate of maternal deaths per 100,000 live births from 20.5 (2010) to 12.2.

**Local Strategy:** Create an educational campaign about healthy pregnancy that targets Black/Other Non-white races in Miami-Dade.

**Local Objective:** By June 30, 2019, reduce the rate of maternal deaths per 100,000 live births in Miami-Dade from 22.3 (2010) to 14.0.

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**HP2020 Goal:** FP-5 Reduce the proportion of pregnancies conceived within 18 months of a previous birth

**SHIP Strategy:** AC5.2 Raise the awareness of Medicaid Family Planning Waiver services for all women who lost full Medicaid services within the last two years to potentially eligible women.

**SHIP Objective:** AC5.2.1 By Dec. 31, 2015, decrease the percentage of births with inter-pregnancy intervals of less than 18 months from 36.9% (2010) to 36%.

**Local Strategy:** Leverage resources to enhance family planning related education in order to sustain short inter-pregnancy intervals at a low level.

**Local Objective:** By June 30, 2019, decrease the percentage of births with inter-pregnancy intervals of less than 18 months from 30.4% (2010) to 29.5%.

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**HP2020 Goal:** FP-8 Reduce pregnancies among adolescent females.

**SHIP Strategy:** AC5.3 Utilize positive youth development sponsored programs to promote abstinence and reduce teen sexual activity.

**SHIP Objective:** AC5.3.1 By Dec. 31, 2015, decrease the percentage of teen births, ages 15–17, that are subsequent (repeat) births from 9% (2010) to 8.5%.

**Local Strategy:** Develop an educational campaign that will provide health education and counseling (including abstinence education) to teens in Miami-Dade.

**Local Objective:** By June 30, 2019, decrease the percentage of Miami-Dade teen births, ages 15–19, that are subsequent (repeat) births from 238 (2013) to 7.
per 1000 females.

**Local Strategy:** Develop an educational campaign that will provide health education and counseling (including abstinence education) to teens in Miami-Dade.

**Local Objective:** By June 30, 2019, reduce live births to mothers aged 15–19 from to 21.0 (2012) to 20.0 per 1000 Miami-Dade females.

**HP2020 Goal:** MICH-1  Reduce the rate of fetal and infant deaths

**SHIP Strategy:** AC5.4 Partner with Department of Children and Families to initiate an educational health care provider and consumer campaign on safe sleep.

**SHIP Objective:** AC5.4.3 By Dec. 31, 2015, reduce the infant mortality rate from 6.5 (2010) to 6.1 per 1000 live births.

**Local Strategy:** Develop an educational campaign that provides information on the Safe Sleep Campaign.

**Local Objective:** By June 30, 2019, reduce the infant mortality rate in Miami-Dade from 4.9 (2012) to 4.5 per 1000 live births.

**Local Objective:** By June 30, 2019, reduce the infant mortality rate in Miami-Dade from 4.9 (2012) to 4.5 per 1000 live births.

**HP2020 Goal:** MICH-21  Increase the proportion of infants who are breastfed

**SHIP Strategy:** AC5.4 Partner with Department of Children and Families to initiate an educational health care provider and consumer campaign on safe sleep.

**SHIP Objective:** AC5.4.5 By Dec. 31, 2015, increase the percentage of women who are exclusively breastfeeding their infant at 6 months of age from 9.9% (2007) to 12%.

**Local Strategy:** Develop a community awareness campaign on the importance of breastfeeding, lactation policy and employee right to pump until child is 1-year-old.

**Local Objective:** By June 30, 2019, increase the percentage of women who are exclusively breastfeeding their infant at 6 months of age from 9.3% (2007) to 12%.
Health Finance and Infrastructure

- Use health information technology to improve the efficiency, effectiveness and quality of patient care coordination, patient safety and health care outcomes for all Floridians
- Assure adequate public health funding to control infectious diseases, reduce premature morbidity and mortality due to chronic diseases, and improve the health status of residents and visitors
- Attract, recruit and retain a prepared, diverse and sustainable public health workforce in all geographic areas of Florida
- Promote an efficient and effective public health system through performance management and collaboration among system partners
Strategic Issue Area:
Use health information technology to improve the efficiency, effectiveness and quality of patient care coordination, patient safety and health care outcomes for all Floridians

**HP2020 Goal:** Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

**SHIP Strategy:** HI1.1 Connect providers and electronic health record systems in a network that consists of a State-Level Health Information Exchange, Direct Secured Messaging and local health information exchanges and gateways.

**SHIP Objective:** HI1.1.1 By Jan. 1, 2013, no less than 1,500 health care providers will be registered to exchange data by using direct secured messaging.

**Local Strategy:** DOH MD Information Technology will ensure electronic health record systems and data transmission are available.

**Local Objective:** By Jan. 1, 2018, no less than 1,500 Miami-Dade health care providers will be registered to exchange data by using direct secured messaging.

**HP2020 Goal:** Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

**SHIP Strategy:** HI1.1 Connect providers and electronic health record systems in a network that consists of a State-Level Health Information Exchange, Direct Secured Messaging and local health information exchanges and gateways.

**SHIP Objective:** HI1.1.2 By Dec. 31, 2012, at least 50% of the participants active in direct secured messaging will have sent a transaction at least one time in the last month.

**Local Strategy:** DOH MD Information Technology will ensure EHR systems and data transmission are available.

**Local Objective:** By June 30, 2019, at least 40% of the participants active in DOH MD Information Technology direct secured messaging will have sent a transaction at least one time in the last month.

**HP2020 Goal:** Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

**SHIP Strategy:** HI1.1 Connect providers and electronic health record systems in a network that consists of a State-Level Health Information Exchange, Direct Secured Messaging and local health information exchanges and gateways.

**SHIP Objective:** HI1.1.3 By Jan. 1, 2013, no less than 10 organizations will be data sharing and no less than eight organizations will be actively sharing data daily through the Florida Health Information Exchange.

**Local Strategy:** A process will be developed between Miami-Dade organizations to ensure collaboration in electronic data sharing.

**Local Objective:** By Jan. 1, 2018, no less than 8 Miami-Dade organizations will be data sharing and no less than 6 organizations will be actively sharing data daily through the Florida Health Information Exchange.
| HP2020 Goal: | Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity. |
| SHIP Strategy: | HI1.2 Promote provider adoption of certified electronic health record software. |
| SHIP Objective: | HI1.2.6 By Dec. 31, 2013, county health department clinical providers in all 67 counties will be using DOH certified electronic health records in accordance with criteria established by the Federal Office of National Coordination. |
| Local Strategy: | Develop a plan to have all clinical providers throughout Miami-Dade using electronic health records. |
| Local Objective: | By June 30, 2019, DOH MD clinical providers will be using DOH certified electronic health records in accordance with criteria established by the Federal Office of National Coordination. |

Assure adequate public health funding to control infectious diseases, reduce premature morbidity and mortality due to chronic diseases, and improve the health status of residents and visitors.

| HP2020 Goal: | Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity. |
| SHIP Strategy: | HI2.2 Update public health program office Legislative Budget Request funding methodologies in preparation for budget requests to replace reimbursement for public health services previously embedded in Medicaid Cost Based Reimbursement. |
| SHIP Objective: | HI2.2.1 By Sept. 30, 2012, DOH programs for high priority service areas will complete sample budget requests in the standard legislative budget format. These programs include infectious disease control and epidemiology services; family health services. |
| Local Strategy: | DOH MD programs will develop a method to complete sample budget requests in the standard legislative budget format. |
| Local Objective: | By June 30, 2019, DOH MD programs for high priority service areas will complete sample budget requests in the standard legislative budget format. |

| HP2020 Goal: | Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity. |
| SHIP Strategy: | HI2.3 Routinely review and update fee policies and fee schedules. |
| SHIP Objective: | HI2.3.1 By Sept. 30, 2012, DOH Central Office will implement the rule revision recommendations from the CHD Fee Workgroup to allow the enhanced ability to assess and collect fees from clinical patients who have the ability to pay. |
| Local Strategy: | DOH MD will follow the Central Office rule revision recommendations from the fee system. |
| Local Objective: | By June 30, 2019, will follow the Central Office rule revision recommendations from the fee system to allow the enhanced ability to assess and collect fees from clinical patients who have the ability to pay. |
HP2020 Goal: Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

SHIP Strategy: HI2.3 Routinely review and update fee policies and fee schedules.
SHIP Objective: HI2.3.2 By Dec. 1, 2012, all CHDs will have documented a fee analysis or fee adjustment process to better align fees with actual cost.
Local Strategy: Develop a plan that follows the Central Office rule revision recommendations from implementing a fee system locally.
Local Objective: By June 30, 2019, DOH MD will have documented a fee analysis or fee adjustment process to better align fees with actual cost.

HP2020 Goal: Use health communication strategies and health information technology (IT) to improve population health outcomes and health care quality, and to achieve health equity.

SHIP Strategy: HI2.3 Routinely review and update fee policies and fee schedules.
SHIP Objective: HI2.3.3 By Sept. 30, 2012, all non-clinical DOH program offices will have documented a fee analysis or fee adjustment process to better align fees with actual cost.
Local Strategy: Follow the Central Office rule revision recommendations for the fee system to implement a fee process locally.
Local Objective: By June 30, 2019, DOH MD non-clinical program offices will have documented a fee analysis or fee adjustment process to better align fees with actual cost.

Attract, recruit and retain a prepared, diverse and sustainable public health workforce in all geographic areas of Florida.

HP2020 Goal: ECBP-19 Increase the proportion of academic institutions with health professions education programs whose prevention curricula include interprofessional educational experiences.

SHIP Strategy: HI3.1 Facilitate collaboration between state agencies and universities to provide trainings and other resources that support and develop existing public health employees, particularly in the area of core competencies for public health professionals.
SHIP Objective: HI3.1.2 By Dec. 1, 2013, DOH and Florida Public Health Training Centers will produce a plan to collaboratively address identified training gaps, using data from the needs assessment.
Local Strategy: Follow the plan produced by DOH and implement it locally.
Local Objective: By Dec. 1, 2018, DOH MD and Florida Public Health Training Centers will produce a plan to collaboratively address identified training gaps, using data from the needs assessment.

HP2020 Goal: HI-3 Increase the proportion of Council on Education for Public Health (CEPH) accredited schools of public health, CEPH accredited academic programs, and schools of nursing (with a public health or community health component) that integrate core competencies.

SHIP Strategy: HI3.2 Ensure that students graduating from colleges of public health have mastered the
core competencies for public health professionals and have applied them through an internship.

**SHIP Objective:** HI3.2.2 By Dec. 30, 2012, DOH and the Florida Colleges of Public Health will develop a plan to increase opportunities for graduate students to develop practical application skills through structured internships and other strategies that increase mastery of core competencies.

**Local Strategy:** Develop a plan to implement the state plan locally and follow all state directives.

**Local Objective:** By June 30, 2019, DOH MD will develop a plan to increase opportunities for graduate students to develop practical application skills through structured internships and other strategies.

**HP2020 Goal:** To ensure that Federal, State, Tribal, and local health agencies have the necessary infrastructure to effectively provide essential public health services

**SHIP Strategy:** HI3.4 Promote the development of workforce development plans for public health system partners who address current and future training and resource needs.

**SHIP Objective:** HI3.4.4 By July 1, 2014, the percentage of employees who have had an Employee Development Plan completed during their performance appraisal will increase from 19.5% to 30%.

**Local Strategy:** Develop a plan to ensure compliance with the State Human Resources directives by increasing the percentage of employees who have had an Employee Development Plan completed during their performance appraisal.

**Local Objective:** By June 30, 2019, the percentage of employees who have had an Employee Development Plan completed during their performance appraisal will increase.

**Promote an efficient and effective public health system through performance management and collaboration among system partners.**

**HP2020 Goal:** To ensure that Federal, State, Tribal, and local health agencies have the necessary infrastructure to effectively provide essential public health services

**SHIP Strategy:** HI4.3 Collect, track and use performance data to inform business decisions and support continuous improvement.

**SHIP Objective:** HI4.3.1 By Dec. 31, 2015, the state public health system assessment (using the National Public Health Performance Standards tool) will show results indicating moderate to significant activity in mobilizing partnerships.

**Local Strategy:** Develop a process to collect performance data relative to significant activity in mobilizing partnerships.

**Local Objective:** By June 30, 2019, DOH MD public health system assessment will show results indicating moderate to significant activity in mobilizing partnerships.

**SHIP Objective:** HI4.3.2 By Dec. 31, 2015, the state public health system assessment (using the National Public Health Performance Standards tool) will show results indicating moderate to significant activity related to assessment and assurance that programs
to educate, empower and inform are effective.

**Local Strategy:** Work with and support partner organizations during the state public health system assessment and provide input and analysis when requested.

**Local Objective:** By June 30, 2019 DOH MD public health system assessment will show results indicating moderate to significant activity.

**HP2020 Goal:** To ensure that Federal, State, Tribal, and local health agencies have the necessary infrastructure to effectively provide essential public health services.

**SHIP Strategy:** HI4.3 Collect, track and use performance data to inform business decisions and support continuous improvement.

**SHIP Objective:** HI4.3.4 By Jan. 31, 2015, 31 CHDs will be accredited by the Public Health Accreditation Board.

**Local Strategy:** Develop a plan that follows the Public Health Accreditation Board centralized state model for accreditation.

**Local Objective:** By Jan. 31, 2016, DOH MD will be accredited by the Public Health Accreditation Board.