Health

Access and choice are the main drivers in healthy lifestyles and a healthy community. The way a community is designed, its open spaces, paths for biking and walking, and access to healthy foods as well as healthcare facilities, all contribute to overall community health. Reducing the use of cars and shifting to more walking and biking not only positively impact the environment, but also improve health through increased physical activity, avoiding emissions affecting respiratory systems, and reducing traffic-related injuries. Additionally, reducing noise and increasing interaction with natural surroundings is expected to reduce stress and promote overall well-being.

Access to healthier food and making healthier food choices, including eating less processed foods and eating more locally produced fresh foods lowers risk of obesity and other health conditions. There are also environmental benefits of consuming more locally produced foods through the reduction of energy required to produce and move food. Our local economy benefits from a strong local food market. Finally, a sustainable community is one in which all residents have equal access to healthcare services.

Health

Assessment Area

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Information was collected on key indicators of health outcomes or diseases, as well as access to healthy transportation options and foods, in order to identify links and achieve a better understanding of the challenges our community faces in realizing sustainable health.

SUMMARY OF KEY SUSTAINABILITY CHALLENGES

Main challenges identified through collaborative stakeholder analysis of assessment data & indicators

- Assessing and managing how environmental factors play a key role in our society's overall health.
- Providing and promoting active lifestyles options to our residents such as biking, walking, and access to mass transit. There is a need for collaboration between public health professionals, traffic engineers, and city planners.
- Educating the community on healthy food choices and increase the accessibility of and market for locally grown products.
- Providing charity care with the objective of getting people healthy and self sufficient.
- Addressing uninsured rates in the County.
- Ensuring that the entire community has access to primary care services for health promotion and disease prevention.

ASSESSMENT DATA & INDICATORS

Data and analysis to identify key challenges & establish a sustainability baseline

A series of indicators is presented to establish the public health baseline in Miami-Dade County. These are followed by data access to quality food and water and bicycling and pedestrian resources. Lastly we analyze the physical and economic accessibility to healthcare services. Feedback in this area is welcomed as we realize that data gaps exist.

Overweight, Obesity, and Physical Activity

The surrounding environment affects our health and physical activity. Communities, homes and workplaces can all influence personal health. Because of this influence, it is important to create communities that make it easy to engage in physical activity and to eat a healthy diet. In Miami-

Dade County, we have the advantage of year round warm weather. This may contribute to better health, but in the summer and fall months heat can be a deterrent to some outside activities. Walkable communities can increase health by providing shady, aesthetic, and safe modes of transportation. Data for Miami-Dade County residents indicates there are health concerns related to weight and physical activity.

Overweight and obesity are both labels for ranges of weight that are greater than what is generally considered healthy for a given height. The terms also identify ranges of weight that have been shown to increase the likelihood of certain diseases and other health problems.

For adults, overweight and obesity ranges are determined by using weight and height to calculate a number called the "body mass index" (BMI). BMI is used because, for most people, it correlates with their amount of body fat. An adult who has a BMI between 25 and 29.9 is considered overweight. An adult who has a BMI of 30 or higher is considered obese. There are certain factors that are factors for overweight and obesity: the caloric balance equation, the environment, and other factors such as genetics. Overweight and obesity result from an energy imbalance. This involves eating too many calories and not getting enough physical activity. Caloric balance is like a scale. To remain in balance and maintain your body weight, the calories consumed (from foods) must be balanced by the calories used (in normal body functions, daily activities, and exercise).

Figure 1 reflects the percent of overweight and obese adults in the county and state for 2007. The county's results are slightly higher in all categories. Figure 2 analyses the physical activity and nutrition of our community. The level of activity is considerably lower compared to the state. Only 29.2 percent of the population meets the recommended physical activity level. Both of these conditions affect negatively the health of our residents.

Figure 1

Overweight & Obesity (2007)	County	State
Adults who are obese	26.0 %	24.1 %
Adults who are overweight	38.9 %	38.0 %
Adults who are overweight or obese	64.9 %	62.1 %

Figure 2

Physical Activity & Nutrition (2007)	County	State
Adults who are inactive at work	67.3 %	34.5%
Adults who are sedentary	35.4 %	25.4 %
Adults who consume at least five servings of fruits and vegetables a day	23.1 %	26.2 %
Adults who consumed three or more servings of vegetables per day	24.3 %	29.1 %
Adults who consumed two or more servings of fruit per day	37.9 %	36.2 %
Adults who meet moderate physical activity recommendations	29.2 %	34.6 %
Adults who meet vigorous physical activity recommendations	23.7 %	26.0 %

(Source: http://www.floridacharts.com/charts/mapp_report.aspx)

(Source: http://www.cdc.gov/obesity/causes/index.html)

Diabetes

Lifestyle changes for prevention research have shown that taking action to manage blood glucose in pre-diabetics can delay or prevent Type 2 diabetes from developing. Modest improvements in weight, a low fat, high fiber diet, and regular physical activity are all aspects of

prudent advice to prevent prediabetes and Type 2 diabetes. Environments that encourage physical activity and healthy food help address this health concern. In Miami-Dade County, 33.5 percent of all adults reported no leisure time physical activity and 64.9% were overweight or obese (2007).

Diabetes is the fifth deadliest disease in the United States, and since 1987 the death rate due to diabetes has increased by 45 percent to 24.6 per 100,000. Death rates due to heart disease, stroke, and cancer have declined. Figure 3 shows that age-adjusted mortality rates from diabetes in 2008 were highest in Miami-Dade County (23.5), greater than the State of Florida (20.6). View results in the following table.

Figure 3

	Average Number of Deaths			Age-Adjusted 3-year Death Rate (per 100,000)		
	2004-06	2005-07	2006-08	2004-06	2005-07	2006-08
State of Florida	5,036	5,137	5,128	21.2	21.1	20.6
Miami-Dade County	613	636	639	23.5	24.0	23.5

In Florida 8.7 percent of the population has been diagnosed with diabetes and 7.6 percent of County residents have been reported (in 2007). In Miami-Dade, 181,425 people have diabetes. There were 2,847 adults admitted to a hospital for diabetes long-term complications (2008). The cost of these admissions was \$139 million for services rendered by hospitals. These services averaged \$48,947 per admission, excluding associated professional fees and personal convenience items.

(Source: http://www.healthcouncil.org/publications/Diabetes Snapshot.pdf)

Hypertension

Hypertension is considered a significant health risk factor. In Miami-Dade County 25.3 percent of all persons were diagnosed with hypertension in 2007, an increase of 1.7 percent since 2002, but lower than the state rate of 28.2 percent. Key components of preventing and treating hypertension are healthy lifestyles, ongoing medical care, and following the treatment plan prescribed by a doctor. Obesity is associated with a two to six-fold increase in risk of occurrence of hypertension. Weight loss is a foundation of any lifestyle modification effort designed to decrease blood pressure. Additional lifestyle changes that lower blood pressure include reduced sodium intake, moderation of alcohol intake, adequate potassium consumption and increased physical activity.

There are 73.6 million Americans age 20 and older with hypertension (or approximately one in three adults). Of these, 71.8 percent are aware they have it, 61.4 percent are under current treatment with only 35.1 percent managing it properly. It is estimated that about 25 percent of the U.S. population age 20 and older has prehypertension. In the US, approximately 69 percent of people who have a first heart attack, 77 percent who have a first stroke and 74 percent who have chronic heart failure, have high blood pressure. It is also a risk factor for blindness and kidney disease.

In 2006 high blood pressure was listed as a primary or contributing cause of death for 319,000 Americans. Figure 4 shows that the number and rate of deaths with hypertension as the primary cause in Miami-Dade County have generally been on the rise since 2006. The County rate for 2008 was the same as for the state.

Figure 4

	Average Number of Deaths			Death Rate		
	2006	2007	2008	2006	2007	2008
State of Florida	1826	1712	1833	7.1	6.5	6.8
Miami-Dade County	161	175	192	6.0	6.4	6.8

In 2008, 2,450 adults were admitted to a hospital with a principal diagnosis of hypertension and had no cardiac procedure performed during their stay. The undiscounted cost for services rendered by hospitals associated with these admissions totaled \$56,414,945; an average of \$23,026 for a single admission.

(Source: http://www.healthcouncil.org/publications/Hypertension_Snapshot.pdf)

Asthma

Asthma is a serious, sometimes life-threatening respiratory disease that affects the quality of life for millions of Americans. Although there is no cure for asthma yet, it can be controlled through medical treatment and management of environmental triggers. There are currently 23 million people in the US with asthma, nearly seven million of whom are under the age of 18.3.

In Florida, 6.2 percent of the adult population has reported having asthma (2007). In 2008 4.6 percent of adults, 4.9 percent of middle school students, and 17.1 percent of high school students in Miami-Dade County have reported having asthma (2008).

Asthma is one of the most common reasons for hospital admission and emergency room care. People with asthma experience well over 100 million days of restricted activity annually and the total annual costs of the disease are estimated at \$20 billion nationally. Asthma accounts for approximately 13 million lost school days every year and persists as the most common serious chronic disease in children deaths occur in the US each year.

As shown in Figure 5, approximately 5,000 asthma-related deaths occur in the US each year. Miami-Dade County's death rate from asthma is slightly below that of the state (2008).

Figure 5

	Average Number of Deaths			Age-Adjusted 3-Year Death Rate (per 100,000 persons)		
	2004-06	2005-06	2006-08	2004-06	2005-07	2006-08
Florida	193	191	175	0.9	0,9	0.8
Miami-Dade	21	21	18	0.8	0.8	0.7

In Miami-Dade County the rate of adult asthma admissions per 100,000 adults rose in 2008 after a 7.7 percent fall in 2007 and remains above pre-2003 levels. 3,229 adults were admitted to a hospital with a principal diagnosis of asthma (2008). The cost of these admissions was \$90,898,051 for services rendered by hospitals. These services averaged \$28,150 per admission, excluding associated professional fees and personal convenience items.

Lifestyle changes for prevention research have that controlling or eliminating exposure to second and third-hand smoke, pet dander (from animals with fur or feathers), indoor mold, cockroach and other pests (parts, secretions and droppings), dust mites, combustion

byproducts (smoke, car fumes, fuel-burning appliance fumes), strong odors (perfume, aerosols, sprays, talcum powder) and outdoor allergens/irritants (pollen, mold, extreme/changing weather) reduces the frequency and severity of asthma attacks. Also the monitoring of lung function for assessment and treatment, implementing environmental control measures to reduce triggers, putting in place comprehensive pharmacological therapy, and patient education result in effective asthma management.

In terms of air quality the topography and meteorological patterns of South Florida help remove harmful air emissions from our community. The indicators reveal that the overall air quality in Miami-Dade falls within the "Good" range of the Environmental Protection Agency's (EPA) National Ambient Air Quality Standards over 80 percent of the days of the year. While this is true, the days when the air quality falls within the Moderate and Unhealthy for Sensitive Groups categories are of concern for the populations more sensitive to air pollution, such as the elderly and very young, and those suffering from respiratory illnesses and diseases.

(Source: http://www.epa.gov/asthma/about.html)

(Source: http://www.healthcouncil.org/publications/Asthma_Snapshot.pdf)

Health Insurance Coverage

Miami-Dade County's rate of uninsured for the population from 18 to 64 years is higher than the state's rate. Most of this population is above the poverty levels which does not entitle them to government programs leaving most coverage to employer-based insurance. Due to increasing high costs, many companies are choosing to provide limited or no insurance. Privately held insurance rates are also following the same trend and preexisting restrictions makes it very difficult for families to purchase them independently.

For reporting purposes, the Census Bureau broadly classifies health insurance coverage as private coverage or government coverage. Private health insurance is a plan provided through an employer or a union or purchased by an individual from a private company. Government health insurance includes such federal programs as Medicare, Medicaid, and military health care; the Children's Health Insurance Program (CHIP); and individual state health plans.* People were considered "insured" if they were covered by any type of health insurance for part or all of the previous calendar year. They were considered "uninsured" if, for the entire year, they were not covered by any type of health insurance.

(Source: http://www.census.gov/prod/2009pubs/p60-236.pdf)

Figure 6

	Florida		Miami-Dade County, Florida	
	Estimate	%	Estimate	%
Total:	17,995,843		2,355,454	
Under 18 years:	3,996,332	22.21%	533,384	22.64%
With health insurance coverage	3,295,275	18.31%	422,225	17.93%
No health insurance coverage	701,057	3.90%	111,159	4.72%
18 to 64 years:	10,894,707	60.54%	1,460,631	62.01%
With health insurance coverage	7,906,963	43.94%	925,412	39.29%
No health insurance coverage	2,987,744	16.60%	535,219	22.72%
65 years or over:	3,104,804	17.25%	361,439	15.34%
With health insurance coverage	3,044,429	16.92%	345,196	14.66%
No health insurance coverage	60,375	0.34%	16,243	0.69%

(Source: American Community Survey, 2008)

Access to Healthcare Facilities in terms of Public Transportation:

Accessibility to healthcare is important. One of the goals stated in the County's Transit Development Plan is to improve the accessibility to major health care, recreation, education, employment cultural and social services facilities. Its measure is to have transit service route miles within 1/4 mile of major health facilities, recreation, education, employment, cultural and social services facilities.

Approximately 64 transit service route miles operate within a ¼ mile of major medical facilities while more than 130 transit service miles operate within ¼ mile of all colleges and universities within Miami-Dade County. Figure 7 shows the major hospital and transit bus routes that have stops in close vicinities to these facilities.

Figure 7

Hospital Name	Routes
Jackson North Medical Center	22,95,246,77,2,42,E
North Shore Medical Center	77,277,33,17
Ryder Trauma Center	12,21,22,32,77,95,M,246,277
Miami Jewish Home & Hospital for the Aged	2,3,9,10,16,54,62,93,202
Jackson Memorial Hospital	12,21,22,32,77,95,M,246,277
University of Miami Hospital	12,21,22,32,95,M,246,17,211
South Florida Evaluation & Treatment Center	M,22,95,246,77,12,21,32,211,277,6
University of Miami Hospital & Clinics	95,77,277,12,211,M,22,246,21,32
Bascom Palmer Eye Institute	95,77,277,12,211,M,22,246,21,32
Department of Veterans Affairs Medical Center	95,12,M,22,246,21,32,17
Mount Sinai Medical Center	M,62,C,J,120,115
Aventura Hospital	95,3,9,99,E
Miami Heart Institute	J,115
Selected Specialty Hospital	95,12,77,211,277,6,7,11,51,207,208
Miami Children's Hospital	56,24,57
Westchester General Hospital	24
West Gables Rehabilitation Hospital	24
Kindred Hospital South Florida - Coral Gables	8
Metropolitan Hospital of Miami	57,7,238
Mercy General Hospital	12,48
Sister Emmanuel Hospital	12,48
Doctors Hospital	48,56,500
South Miami Hospital	57,500,73,37,52,72
Larkin Community Hospital	57,52,500,37,72
Coral Gables Hospital	42,37,24,56
Jackson South Community Hospital	57,52,1,31,34,38,252,287
Baptist Hospital	88104
HealthSouth Rehabilitation Hospital	70
Homestead Hospital	35
Kendall Regional Medical Center	40,240
Palmetto General Hospital	29
Palm Springs General Hospital	54,29,33,73
Hialeah Hospital	54,42,28,L
Southern Winds Hospital	54,33,29

Water Quality

Miami-Dade County's drinking water meets or exceeds all federal and state drinking water standards. This is determined through routine monitoring for contaminants by microbiologists, chemists, and water treatment specialists of more than 100,000 analyses of water samples each year. Water quality samples are collected throughout the county and tested regularly. Samples include untreated and treated water taken at our facilities, sample sites throughout the service areas and at customers' homes. These tests are overseen by various federal, state and local regulatory agencies.

Bicycle and Pedestrian Trips

Figure 8 compares the number of bicycle and walking trips in 1995 and 2001. The graph illustrates an approximate doubling in both modes during this period. This trend can be attributed to the development of new facilities (e.g., Phase 1 of the South Miami-Dade Busway), expansion of Miami-Dade Transit's (MDT) Bike & Ride program, and gas price inflation during that period.

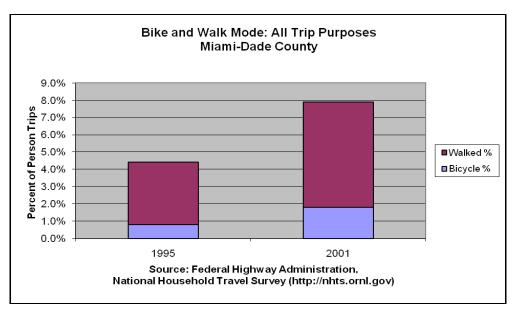
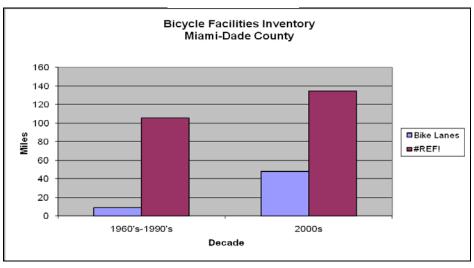


Figure 8

Bicycle Facility (Pathways)

Since 2000 almost 40 miles of bike lanes and 30 miles of paved paths have been built in Miami-Dade County. The increase in facilities mileage is the result of adopted policies, planning, and new funding sources such as the federal Transportation Enhancements Program, the County's Building Better Communities Bond Program and other municipal initiatives. Continued development of an integrated system of bicycle facilities will increase the travel options for residents and visitors.

Figure 9



Walking

Regular physical activity may be correlated to protection from diabetes and cardiovascular disease (Carnethon et al., 2004). Walking, the most common form of physical activity (CDC, 1991) has been associated with reduced weight (Schilling & Linton, 2004), and reduced risk for diabetes and cardiovascular disease (Carnethon et al., 2004). Figure 10 shows an inverse correlation between the percentage of adults that are overweight and the percent of trips that are made on foot. Figure 11 indicates a correlation between obesity and driving time.

Figure 10

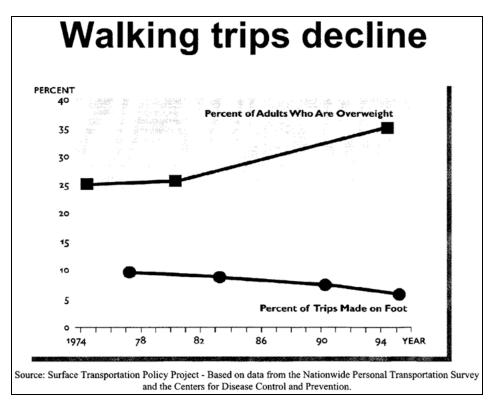
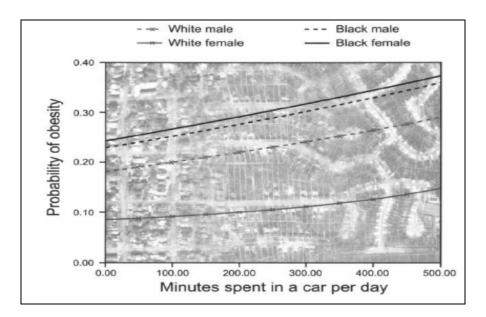


Figure 11



In the face of these health challenges, it is important to focus the development of future built environment (anything built by humans) towards mixed use infrastructure that combines with street connectivity, pedestrian infrastructure, aesthetics, and access to public transportation.

Acre of Green Space per UMSA Residents

As part of the Parks and Recreation Department related Strategic Plan Outcomes to ensure available high quality green space throughout the County, the goal is to meet the local park level service of 2.75 acres per 1000 Unincorporated Municipal Service Area (UMSA) residents. This is an ongoing effort. The present value is 3.71.

(Source: http://www.miamidade.gov/mppa/library/PDFs/businessplans/FY09/Narrative/recculture_Parks.pdf)

Food Quality & Access

Access to fresh, wholesome, local foods positively impacts the health of a community. There are two main challenges with food: access to locally grown food and healthier choices.

We are the second largest agricultural producer in the nation. Ninety to 95 percent of our produce is sold outside of Miami-Dade County. This means that we are choosing to purchase food that has traveled long distances. We can reduce our carbon imprint regarding our food significantly by purchasing from our local producers, as well as benefit from fresher foods.

Educating residents about healthier eating choices improves community health. University of Florida Extension's nutrition education programs, which are federally funded, serve low-income adults and children on healthy food purchasing, preparation, and life styles. For every federal dollar spent some \$10.64 in long-term health costs and \$2.48 are saved in food purchases are realized. These programs are restricted to food stamp eligible residents. Additional programs like this would improve health.

Both price and geographic proximity to grocery stores affects access to healthy and nutritious food. Low-income neighborhoods traditionally have fewer grocery stores and therefore less availability of produce. Data has not been collected at this point to evaluate whether this is an issue in our community. Indicators or considerations used by other communities include the distribution of grocery stores by census tract income; price of market basket in dollars by store

chain and store location; and quality of food available (e.g. nutrient density, freshness, organic) by store chain and location. Using data on grocery store locations and mass transit route and schedule information may be used to calculate travel times from homes to supermarkets to estimate the accessibility of supermarkets for households that rely on transit for shopping trips. The geographical occurrences and pricing of products sold at farmers' markets would be important to understand in this type of analysis. It would also be important to analyze pricing differences in markets in the different areas and neighborhoods of the county. Finally, another consideration would be how these prices compare to those of farmers markets and convenience stores which are generally regarded as more expensive and offering much less variety of healthy products to consumers, especially in terms of fresh produce and lean meat.

EXISTING EFFORTS

Consolidates current plans, goals, and initiatives related to the specific assessment area

Comprehensive Development Master Plan

The Comprehensive Development Master Plan (CDMP) expresses the County's general objectives and policies addressing where and how it intends development or conservation of land and natural resources will occur during the next ten to 20 years, and the delivery of County services to accomplish the plan's objectives. It provides for "sustainable development" - allowing for land capacity to meet projected needs, preservation of wetlands and agricultural areas and protection of (drinkable) water well fields.

The CDMP establishes the broad parameters for government to do detailed land use planning and zoning activities, functional planning and programming of infrastructure and services. As such, it is a framework for use by other programs to be developed to support its long-range planning goals. For each of the master plan elements, there are goals, objectives and policies, measures to be monitored and maps of planned future facilities.

The Community Design and Health component for the CDMP is presently under development.

Social Services Master Plan (SSMP)

The Social Service Master Plan addressing the social services challenge as a whole, rather than in isolated parts - in order to provide the means truly to raise people's quality of life. It gives the Miami-Dade community an overall snapshot of the human services issues and challenges they face, what our goals should be, suggested steps for strategic action, results and outcomes to be reached, and report-card indicators that will help both benchmark along the way and gauge progress made toward the goals. To accomplish this means that services must be integrated, not just to avoid duplication, but to meet human necessities in a comprehensive manner. Identify the linkage between people's needs and assess how best to educate the community, ease access to needed services, and provide those services comprehensively based on individual and neighborhood needs.

The SSMP cover nine service areas. They are as follows:

- Basic Needs Poverty & Hunger
- Health
- Children Youth & Families
- Elders
- Children & Adults with Disabilities
- Workforce Development for Special Populations
- Criminal Justice
- Immigrants & New Entrants

• Special Needs (Mental Health, Substance Abuse, Homelessness, Victims of Domestic Violence or Sexual Assault)

Its vision is for "residents have access to quality healthcare and lead healthy lives" and the goals are:

- Residents will know how and where to access healthcare services.
- Residents will have equal opportunities for access to comprehensive healthcare services.
- Residents will be knowledgeable and have the capability to make healthy lifestyle choices and effectively manage their health
- Healthcare providers will provide culturally appropriate care to the populations they serve

The last update of the social services master plan was done in 2008.

(Source: http://www.alliance4hs.org/master_plan.htm)

Miami-Dade County Park and Open Space System Master Plan

Approved by the Board 2008, the Park and Open Space System Master Plan (OSMP) established a vision for a seamless, sustainable parks and open space system to create a new, interconnected framework for growth; one that results in a more livable, sustainable community.

Consisting of existing and proposed parks, public spaces, natural and cultural places, greenways, trails, and streets. The interconnected framework will form the foundation or "The String of Pearls" of the County to accommodate growth while also improving the quality of life for residents. The new framework will encourage the revitalization of neighborhoods; allow for the orderly redevelopment of existing land uses in response to changing markets and demographics; and ensure greater environmental protection. It will also improve the social fabric of the County, providing equitable access to parks and open spaces, and providing more opportunities for residents to meet, socialize, and connect with one another.

Safety is a key pillar in the plan. It states in the goals the importance that every resident can safely and comfortably walk, bicycle, or take transit to community parks, recreation centers and special use/ sports facilities.

2003 Strategic Plan

The Strategic Plan provides Miami-Dade County management and employees with blueprint that guides the decision-making towards the future shared priorities of our local government and community. These plan priorities provide the measuring targets needed to determine if Miami-Dade County government is fulfilling its responsibilities, as well as providing for accountability and continuous improvement. The plan consists of seven areas that encompass all the County departments: Economic Development, Health and Human Services, Neighborhood and Unincorporated Area Municipal Services, Public Safety, Recreation and Culture, Transportation, and Enabling Strategies.

The Health and Human Services Safety Strategic Area component's mission statement is "To improve the quality of life and promote maximum independence through the provision of health care, housing, and social and human services to those in need." The goals to achieve it are as follows:

- Eliminate barriers to care improve the future of Miami-Dade County's children and youth
- Promote independent living through early intervention and support services
- Provide adequate, quality, and affordable housing equitably throughout Miami-Dade County

- Ensure high quality standard of care and customer service countywide
- Ensure universal access to timely and accurate service information and community resources
- Develop positive relationships among all groups to promote unity in Miami-Dade County (Source: http://www.miamidade.gov/stratplan2003/)

Draft Transit Development Plan FY2010 to 2019

The fiscal year (FY) 2010 – 2019 Transit Development Plan (TDP) Major Update is a strategic development and operational guide for public transportation used by Miami- Dade Transit (MDT) for the next 10 year planning horizon. The TDP includes an update of existing services, demographic and travel characteristics overview, a summary of local transit policies within the region, the development of proposed transit enhancements, and the preparation of a ten-year implementation plan that provides guidance for future MDT planning. A major update is required every five years and minor updates are required in interim years. There is one goal and objective that contributes to the access to healthcare.

OBJECTIVE	MEASURE
Goal 1: Improve the Quality of Transit Services	
Objective 1.1: Improve the accessibility to Major	Transit service route miles within 1/4 mile of major
health care, recreation, education, employment	health facilities, recreation, education, employment,
cultural and social services facilities	cultural and social services facilities.

Bicycle Facilities Plan

An increasing number of Miami-Dade County residents and visitors are choosing to walk or bike for all or a portion of their trip. To meet the needs of these travelers, the Metropolitan Planning Organization (MPO) has addressed walking and bicycling in its transportation plan. The creation of a Bicycle Plan is a step towards not only enhancing the County's bicycling facilities but also achieving a higher percentage of non-motorized trips by identifying areas in greatest need of bicycle improvements and focusing improvements to those areas.

(Source: http://www.miamidade.gov/mpo/docs/MPO_bike_facilities_plan_2001.pdf)

Pedestrian Plan

An increasing numbers of Miami-Dade County residents and visitors are choosing to walk or bike or all or a portion of their trip. To meet the needs of these travelers, the MPO has addressed walking and bicycling in its transportation plan. The creation of a Pedestrian Plan is a step towards not only enhancing the County's pedestrian facilities but also achieving a higher percentage of non-motorized trips by identifying areas in greatest need of pedestrian improvements and focusing improvements to those areas. The purpose of the 2025 Pedestrian Plan is to:

- Identify pedestrian facility needs based on quantitative analysis;
- Identify Candidate Projects to address pedestrian facility needs;
- Prioritize pedestrian projects; and
- Develop a Minimum Revenue Plan based on projected funding.

The goal of the 2025 Miami-Dade County Pedestrian Facilities Plan is to facilitate the construction of pedestrian improvements at locations that have been determined to address the County's most pressing needs.

(Source: http://www.miamidade.gov/mpo/docs/MPO_ped_plan_2001.pdf)

WALKSAFE Program - University of Miami Miller School of Medicine

Florida has one of the highest numbers of injuries and fatalities due to children being hit by cars. There are various health benefits for children walking to and from school safely on a regular basis. The University of Miami Miller School of Medicine WalkSafeTM program was developed

to improve pediatric pedestrian safety, increase physical activity levels through encouraging children to walk to and from school, and improve the walkability in and around elementary schools.

Multiple agencies have assisted WalkSafe through various phases of development, implementation, and evaluation. WalkSafe utilizes a 5 E Model: The WalksafeTM program is based on a 5 E Model which incorporates education, engineering, enforcement, evaluation, and encouragement.

- Education: a three day curriculum that is taught in the classroom to children in grades K-5. This information is taught yearly at the beginning of October in conjunction with the International Walk to School Day. Using the three main learning modalities (audio, visual, and motor) via formal educational curricula, videos, workbooks, outside simulation activities and art projects, WalkSafe has shown to significantly increase the pedestrian safety knowledge of elementary school children.
- Engineering: in collaboration with organizations such as the Metropolitan Planning Organization and the Department of Public Works, WalkSafe has created a task force team which helps create the safest possible environments for healthy, active living. WalkSafe facilitates the assessment of sites where children have been hit by cars and the documentation of potential engineering modifications that can be made to prevent future accidents. These detailed reports and important community suggestions are presented on a monthly basis at the Community Traffic Safety Team meetings in Miami-Dade County.
- Enforcement: keeping children safe around school zones is of utmost importance to the WalkSafeTM program. WalkSafe's partnerships with the Police Departments and other community organizations assist in ensuring that our communities are safe environments for healthy, active living. These important partnerships also seek to increase community awareness of enforcement within and around school zones.
- Evaluation: is a key factor for all programs in achieving and maintaining a higher level of
 efficiency. WalkSafe uses various forms of evaluation tools to identify and monitor
 pedestrian safety and health issues. Data collected from teacher and parent surveys,
 surveillance of injuries, and behavioral research are a few of the evaluation tools that the
 WalkSafeTM program utilizes.
- Encouragement: WalkSafe encourages everyone throughout their communities to help advocate children safely engaging in a healthy, active lifestyle. By participating in many outreach efforts, WalkSafe has become a staple in educating and encouraging others to take part in promoting safe walking environments and healthy behaviors.

Since WalkSafe's implementation in 2002, its educational component has been implemented in 223 schools and trained 6,377 teachers. Most notably, the curriculum has reached 143,045 students in 2009 alone.

(Source: http://www.walksafe.us/background.html)

(Source: http://www.enhancements.org/download/TECorner/TECorner_Winter2010.pdf)

Blueprint

Miami-Dade County has undertaken the challenge in meeting our 600,000 uninsured residents' needs. Blueprint is the Office of Countywide Healthcare Planning (OCHP) two-part approach. Part I – the low-cost, comprehensive health insurance product, Miami-Dade Blue, co-designed with Blue Cross and Blue Shield of Florida for those currently uninsured residents (under age 65) and the work force (entities with up to 50 employees); and Part II – OCHP's analysis and management of 4 core efforts: (1) transparency – data at community level, (2) chronic disease management within FQHCs, (3) work force value-added analysis of insurance, and (4) premium assistance program.

Comprehensive Community Needs Assessment of Miami-Dade County

The Comprehensive Community Needs Assessment of Miami-Dade County conducted for Miami-Dade County's Community Action Agency (CAA) is intended to serve as a benchmark by providing a number of indicators which assess socioeconomic conditions in Miami-Dade County. The analysis demonstrates that the county is experiencing demographic and economic shifts which necessitate a closer look at the characteristics of the communities by government agencies, policy makers, and community organizations. The report traces past and present condition of the county's population across several indicators which include demographic characteristics and trends, education, economic development, including employment, income and housing, criminal justice, and public health. The secondary data is supplemented by primary data obtained from a survey with adult low income county residents conducted by the FIU Metropolitan Center, and referred to as the CAA Low-Income Resident Survey from hereon.

The survey results help determine the attitudes and perceptions of a particular segment of county residents towards a variety of issues and in conjunction with the secondary data is intended to improve awareness of population needs and assist CAA in reviewing and improving its programs. Recommendations from this needs assessment include:

- CAA should continue to focus its efforts in the existing targeted areas as they contain large concentrations of low-income families. Some areas, including Perrine, Coconut Grove, and South Beach still contain pockets of poverty despite the overall increase in income as a result of gentrification.
- Community outreach efforts should be expanded to ensure low-income residents are aware of the resources and services available to them. The CAA Advisory Committees can serve as a tool for more community awareness and involvement.
- Programs and services serving low-income residents should focus on perceived areas of need by low-income residents. The Low-Income Resident Survey shows that the most important issues for residents are jobs and crime. Job skills training options and crime prevention, especially targeting juveniles, are of major importance to address the concerns of Miami-Dade residents. In that regard, CAA can expand its job skills training classes and also dedicate resources to keeping children off the streets, including both after-school programs and parental counseling.
- CAA should be proactive in offering services that address emerging needs. Financial counseling, housing assistance, and foreclosure prevention have gained special significance over the last half of 2008 and in that regard CAA can form partnerships with organizations which are already involved in mitigating the effects of the housing crisis. CAA can serve as an organization that assists low-income residents in finding the resources they need, even if CAA is not directly involved in disbursing funding or providing assistance. The same approach can be applied with regard to healthcare services.
- In times of tight budgets and diminished resource availability across government agencies, CAA can continue to be at the forefront of addressing the needs of low-income residents by reaching out to other organizations which share its mission and goals.

(Source: http://www.miamidade.gov/caa/Documents/Needsassessment/CAA%20Comprehensive%20 Needs%20Assessment.pdf)

Medicaid Metropass Program

The Medicaid Metropass Program is a joint venture of MDT and the Florida Agency for Health Care Administration (AHCA). The program provides cost-saving transportation to Medicaid recipients who use paratransit service more than six times a month, but are capable of using conventional transportation. Participants receive a monthly Metropass with the co-payment of one dollar. Those exempted from the co-payment status are individuals under 21 years of age,

those who are pregnant and those who are enrolled in a Family Planning or Family Assistance program. Participants must have three or more verifiable Medicaid medical appointments each month to continue in the program. The program began in 1993 and has accounted for an estimated total savings to ACHA of \$64.2 million. MDT has collected in excess of \$20 million in revenues from the program.

Bike Trails

The Miami-Dade Park and Recreation Department (MDPR) in conjunction with the Public Works Department is developing and improving many bike trails which span across the County. The hope is that building and improving these trails will encourage our population to depend less on cars and public transportation, thereby taking advantage of our beautiful outdoors while getting healthy, fit, and having fun. There are eight trails developed by MDPR throughout Miami-Dade County. They are the Snake Creek Trail, Rickenbacker Trail, Commodore Trail, Old Cutler Trail, Biscayne Trail, Black Creek Trail, Biscayne-Everglades Greenway, and Southern Glades Trail. (Source: http://www.miamidade.gov/greatparksummit/biketrail_maps.asp)

Miami 21

Miami 21 represents the "Miami of the 21st Century" and entails a holistic approach to land use and urban planning. It will provide a clear vision for the City that will be supported by specific guidelines and regulations so that future generations will reap the benefits of well-balanced neighborhoods and rich quality of life. Miami 21 will take into account all of the integral factors that will make each area within the City a unique, vibrant place to live, learn, work and play. Six elements serve as the lynchpins in the development of the blueprint of Miami: Zoning (Miami 21 Zoning Code), Economic Development, Historic Preservation, Parks and Open Spaces, Arts and Culture, and Transportation.

(Source: http://www.miami21.org/)

City of Miami – Bicycle Initiatives

Miami is committed to becoming a Bicycle Friendly City by 2012. The advancement of bicycle routes and facilities will create a full array of accommodations for cyclists allowing cycling to be an easy alternative to automobile use or for recreational enjoyment of our city. Miami will be a safe place to ride a bicycle creating a more livable and vibrant City for residents and tourists.

Miami Bicycle Master Plan

This Miami Bicycle Master Plan was developed with the guidance of previous bicycle study efforts locally and nationally. The study also reviewed existing conditions in the City of Miami and gauged public sentiment. This research along with city staff recommendations was used for establishing the citywide bikeway network plan, bicycle parking plan, safety and awareness actions, and evaluation tools to measure future performance of the network and suggest improvements to the existing bicycle infrastructure. The study serves as a guide for the development of the bikeway network and parking over a 20 year period in phases of 2010, 2015, 2020, and 2030.

The Miami Bicycle Master plan includes more than 280 miles of new or improved bikeways which comprises about 33 percent of the city street network. At present, the City of Miami bikeway network includes 15.91 miles of Bicycle Lanes and Shared Use Paths/ Greenways which is only 1.6 percent of the city street network. Thus, the 2030 plan recommends a comprehensive expansion and diversification of facilities to meet the needs of beginner, intermediate, and expert bicyclists. In total, seven different bikeway types are included. They include: Bicycle Routes, Shared Use Lane Markings (Sharrows), Bicycle Lanes, Shared Use Paths/Greenways, Bicycle Boulevards, Neighborhood Connections, and Scenic View Routes.

(Source: http://www.miamigov.com/bicycleInitiatives/pages/)

Community Rooted Organic Produce Service (CROPS)

Sponsored by Earth Ethics Institute and Center For Community Involvement, Community Rooted Organic Produce Service (CROPS) goal is to offer the Miami Dade College community fresh, high-quality, primarily locally grown, chemical-free (certified organic), and environmentally responsible food at affordable prices. Making organically grown food more physically and economically accessible will enable people to live healthier lives, thus easing health disparities in our community and reducing the impact of our lifestyles on the Earth by supporting sustainable farming practices and local economies.

(Source: http://www.mdc.edu/environethics/cropsabout.asp)

Earth Ethics Institute (EEI)

Earth Ethics Institute began in 1993 and has been a catalyst for introducing administrators, faculty, staff, and students at Miami Dade College to a new way of thinking called "Earth Literacy." Grounded in the profound implications of the story of the evolution of our 14-billion-year-old universe and the developmental process out of which the Earth and all life emerges, Earth Literacy fosters respect for Earth and life in all its diversity. Earth Ethics Institute provides resources, workshops, and programs for the Miami Dade College community that encourage the integration of the knowledge, values, and skills needed for a sustainable way of life into all practices and disciplines. EEI fosters an awareness of global interdependence, ecological integrity through biological diversity and the natural processes that sustain life.

(Source: http://www.mdc.edu/environethics/aboutEarthEthics.asp)

Community Gardening

Community gardening education is provided by the University of Florida's Institute of Food and Agricultural Sciences. A community garden is a collaborative greenspace in which the participants share in both the maintenance and the rewards.

There are two community vegetable gardens in Miami-Dade County. The first is the Miami Beach Victory Garden located in 226 Collins Ave, Miami Beach. The garden has 20 plots and it's under the care of the Parks and Recreation Department of City of Miami Beach, but it is managed by a core of community volunteers. The second is the community garden at Liberty Square, Liberty Square Housing Development, 65th Street NW at 14th Avenue, Miami. The garden is made up of more than 40 plots.

(Source: http://miami-dade.ifas.ufl.edu/lawn_and_garden/communitygarden.shtml)

Grass root efforts have also been made locally. This type of initiative creates a specific challenge for Land Use: it needs to provide for sustainable urban agricultural practices inside the UDB.

Farmers' Market

As part of an effort of the Economic Sustainability Department of the City of Coral Gables, the city has been hosting a Farmers Market for the past fifteen years. This year it began on January 16 and will run through March 27 on Saturdays from 8:00 AM to 1:00 PM.

(Source: http://www.coralgables.com/CGWeb/dep_dev_farmersmarket.aspx)

The Market Company, a local business, has been involved in the production of farmers' markets throughout Miami Dade and Broward County since 1995. Their locations are:

- The Jackson Memorial Foundation Green Market @ Alamo Park: 1611 NW 12th Ave inside the JMH Campus. Thursdays from 9 AM to 4 PM.
- The Aventura Mall Farmers' Market: Aventura Mall. Saturdays 10:00 AM to 9:30 PM and Sundays 12:00 PM- 8:00 PM, every first and third weekend.

- Las Olas Outdoor Gourmet Market: 1201 E Las Olas Boulevard, Ft. Lauderdale. Sunday 9:00 AM to 2:00 PM.
- Lincoln Road Farmers' Market and Organic Market: Lincoln Road, Miami Beach. Sunday from 9:00 AM to 6:30 PM.
- Normandy Village Marketplace: 900 Block of 71st Street at the Normandy Isle Fountain, along the Rue Vendome, North Beach. Saturday from 9:00 AM to 5:00 PM.
- The Pinecrest Gardens Green Market: Pinecrest Gardens (old Parrot Jungle). Sundays from 9 AM to 2 PM
- The Collins Park Sunday Market: 22nd Street and Collins Avenue, Miami Beach. Sunday from 9 AM to 6 PM.
- Upper East Side Green Market: 5556 NE 4th Court, Miami. Saturday from 9:00 AM to 4:00 PM.

(Source: http://www.themarketcompany.org/home.html)

Fertile Earth Foundation

FEF was created to educate, inspire, and spark change in the community and to initiate a dialogue between the community, businesses and municipalities. FEF orchestrates unique and stimulating events that showcase specific topics relating to how individuals, corporations and communities can lessen their footprint on Earth.

Mission:

- Raise environmental awareness in the local community through intriguingly innovative events, workshops, lectures and parties, reaching the section of the population that does not normally hear the message
- Support environmentally-focused research, from food composting to algae- to-biofuel generation

Current Projects:

- Fertile Roots Miami— Sponsored by the City of Miami, this project is a collaboration of organizations working together to help hotels & restaurants compost food waste, create soil amendment for urban gardening projects and create jobs and income by selling local produce back to the restaurants, thus closing the local food and waste production loop.
- Urban Gardening Project in Coconut Grove local garden for residents in Coconut Grove
- Green Roofs Project in Coconut Grove we're working on creating the first hurricaneresistant raised bed garden systems to pass hurricane code in South Florida. Our goal is to help our community conserve energy and grow food locally through the proliferation of green roofs.

(Source: http://www.fertileearth.org/about)

Roots in the City, Inc

Roots in the City, Inc. was founded by author and academic Marvin Dunn, Ph.D. in 1994. It is a nonprofit, community-based organization located in the Overtown neighborhood in the shadow of downtown Miami. It focuses on community development, creating jobs, and beautifying Miami's inner city. he organization has established several community gardens and tree nurseries in Overtown.

The main botanical garden sits across from the Overtown Youth Center on Northwest 14 Street and Northwest Third Avenue. Drivers headed to Miami Beach on I-395 can catch a glimpse of the lush garden beautifying this small strip of Overtown.

The vegetable garden is located across the street from the historic Mt. Zion Baptist Church on the northeast corner of Northwest Ninth Street and Northwest Third Avenue. The two-acre lot features collard greens, citrus trees and papayas. The fertile garden yields fruits and vegetables throughout the year and supplies locals with a healthy supply of greens often missing from their diet. Freshly grown produce from the garden is offered free to the community through giveaway programs to schools, community agencies and homeless shelters. Produce is also sold in markets and local stores.

Funding for Roots in the City comes primarily from the City of Miami's Community Redevelopment Agency, which supports the organization's Landscape and Horticultural Training Institute for inner-city residents. The organization has received funding from Miami-Dade County Community Image Advisory Board (CIAB) for the beautification of I-95 through Overtown and from the Dade Community Foundation.

(Source: http://www.rootsinthecity.net/Home_Page.html)

COMMUNITY FEEDBACK

Feedback & results gathered though the planning process or surveys

Living Healthy, Living Longer Miami-Dade County Survey

The Community Health Survey is a systematic, data-driven approach to determining the health status, behaviors and needs of residents in a defined geographical region. Subsequently, this information may be used to formulate strategies to improve community health and wellness.

A Community Health Survey provides information to consider when developing effective interventions so that communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status. This survey will serve as a tool toward reaching three basic goals:

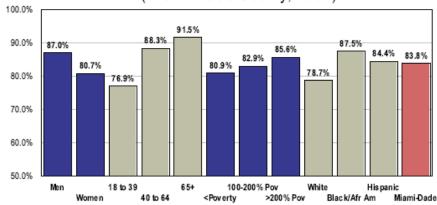
- To improve residents' health status, increase their life spans, and elevate their overall quality of life. A healthy community is not only one where its residents suffer little from physical and mental illness, but also one where its residents enjoy a high quality of life.
- To reduce the health disparities among residents. By gathering demographic
 information along with health status and behavior data, it will be possible to identify
 population segments that are most at-risk for various diseases and injuries.
 Intervention plans aimed at targeting these individuals may then be developed to
 combat some of the socio-economic factors which have historically had a negative
 impact on residents' health.
- To increase accessibility to preventive services for all community residents. More
 accessible preventive services will prove beneficial in accomplishing the first goal
 (improving health status, increasing life spans, and elevating the quality of life), as
 well as lowering the costs associated with caring for late-stage diseases resulting
 from a lack of preventive care.

The following represents an overview of findings from the 2006 PRC Community Health Survey: Living Healthy, Living Longer in Miami-Dade County, Florida. Overarching findings include:

- Geographically, where discernible differences were noted in health indicators between South Miami-Dade County and the rest of the county, South Miami-Dade County typically fared less favorably.
- While health and quality of life are good for most Miami-Dade County residents, lowincome residents and communities of color often bear the greater burden of health risk and disease.

Exhibit One or More Cardiovascular Risk Factors or Behaviors

(Miami-Dade County, 2006)



- Source: 2006 PRC Community Health Survey, Professional Research Consultants. © PRC 2006 [Item 139]
 - Includes respondents reporting any of the following: overweight, cigarette smoking, high blood pressure, high cholesterol, or physical inactivity.
 "White" and "Black/Afr Am" reflect non-Hispanic race categorizations;

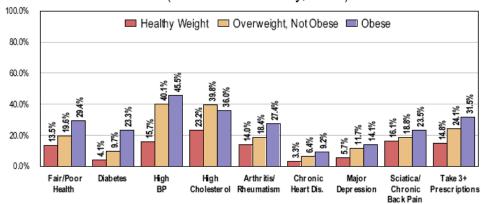
"Hispanic" can be of any race.

Other key findings from survey respondents include:

- Health Status: While most residents enjoy good physical health, one out of five says their health status is only "fair" or "poor."
- Asthma prevalence in Miami-Dade County is quite high, affecting an estimated 286,300 adults and 71,600 children.
- While the overall prevalence of diabetes is comparable to the national prevalence, the
 disease affects approximately 208,700 county residents and is especially high among
 adults aged 40+, those living below the federal poverty level, Hispanics, and Blacks.
 Just over one-third of Miami-Dade County adults get the recommended five servings of
 fruits and vegetables per day.
- An estimated 570,700 adults do not have a specific source of ongoing medical care.
- As found nationally, nearly two-thirds of Miami-Dade County adults are overweight or obese; this proportion is even higher among the Black/African American and Hispanic populations as illustrated in the following graph.

Relationship of Overweight With Other Health Issues

(Miami-Dade County, 2006)



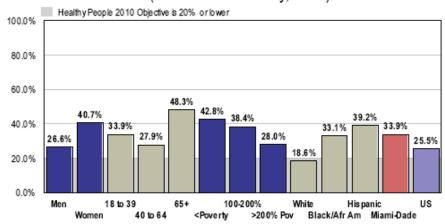
Source: • 2006 PRC Community Health Survey, Professional Research Consultants. © PRC 2006 [Items 5, 23-25, 30, 33, 34, 37, 40]

 Note: Reflects responses among the total sample of respondents, segmented by their bodyweight category (categories are mutually exclusive).

 According to the data in the following table, Miami-Dade County adults are much less physically active than Americans overall.

No Leisure-Time Physical Activity in Past Month

(Miami-Dade County, 2006)



Source: • 2006 PRC Community Health Survey, Professional Research Consultants
 © PRC 2006 [Item 86]

Healthy People 2010, 2nd Edition. U.S. Department of Health and Human Services.
 Washington, DC: U.S. Government Printing Office, November 2000. [Objective 22-1]

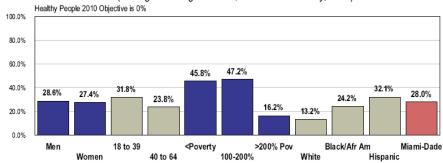
Note: • As ked of all respondents.

"White" and "Black/Afr Am" reflect non-Hispanic race categorizations;
 "Hispanic" can be of any race.

 With regards to access to healthcare services the uninsured, as well as low-income residents and communities of color, face limited access to the county's public and private health care delivery systems due to cost, as well as a variety of other barriers.

Lack Health Care Insurance Coverage

(Among Adults Age 18 to 64; Miami-Dade County, 2006)



2006 PRC Community Health Survey, Professional Research Consultants. © PRC 2006 [Item 176]

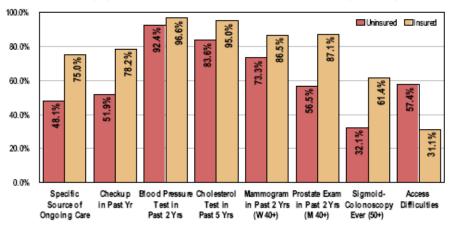
Healthy People 2010, 2nd Edition. U.S. Department of Health and Human Services. Washington, DC: U.S. Government Printing Office, November 2000. [Objective 1-1] Reflects respondents age 18 through 64.

"White" and "Black/Afr Am" reflect non-Hispanic race categorizations: "Hispanic" can be of any race

Miami-Dade County's uninsured rate is significantly higher than the national average.

Preventive Health Care

(By Insured Status; Miami-Dade County, 2006)



2006 PRC Community Health Survey, Professional Research Consultants.

© PRC 2006 [Items 16,36,39,168-170,177,178]

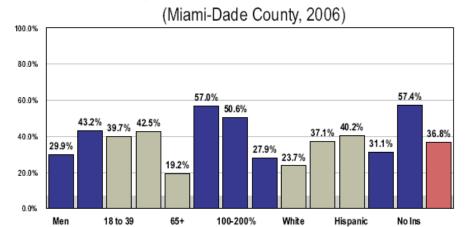
Reflects all respondents. Notes:

Insured respondents include those with either private or

government-sponsored insurance plans.

Nearly three-quarters of a million people in Miami-Dade County (679,600 adults and 63,900 children) experienced some type of difficulty or delay in accessing healthcare services over the past year. Barriers to access are not limited to financial qualifiers, but also touch on issues of finding a provider, inconvenient hours of service, and lack of transportation.

Experienced Difficulties or Delays of Some Kind in Receiving Needed Health Care in the Past Year



Sources: • 2006 PRC Community Health Survey, Professional Research Consultants. © PRC 2006 [Item 178]

<Poverty

Healthy People 2010, 2nd Edition. U.S. Department of Health and Human Services. Washington, DC:

>200% Pov

Black/Afr Am

Insured

Miami-Dade

U.S. Government Printing Office, November 2000.

40 to 64

Asked of all respondents.

· Includes difficulties related to availability, cost, office hours, transportation or other unspecified troubles/delays.

. "White" and "Black/AfrAm" reflect non-Hispanic race categorizations; "Hispanic" can be of any race.

(Source: http://www.healthcouncil.org/documents/Living_Healthy_Living_Longer.pdf)