

City of Philadelphia
Community Health Improvement Plan
2014-2018

2017 Annual Implementation
& Evaluation Report

January 2018



Compiled by the Philadelphia Department of Public Health (PDPH) and the Community Health Improvement Plan (CHIP) workgroups. The views expressed in this document do not necessarily reflect the official policies of PDPH or the City of Philadelphia.

Philadelphia’s Community Health Improvement Plan 2017 Annual Implementation and Evaluation Report

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I. Overview

Philadelphia’s Community Health Improvement Plan (CHIP) was finalized in May 2014 after a year-long planning process led by the Philadelphia Department of Public Health (PDPH) in partnership with the Drexel University Dornsife School of Public Health. Over 160 stakeholders representing a diverse set of organizations and communities contributed to the plan.

This annual report provides a summary of actions taken, partners involved, and progress achieved in 2017 as it relates to performance measures and health indicators in the Philadelphia CHIP. This is the fourth annual implementation and evaluation report of the Philadelphia CHIP.

II. Access to Care

Workgroup

The Access to Care workgroup is chaired by Carol Rogers, Executive Director of [Healthy Philadelphia](#). Healthy Philadelphia is a non-profit organization that was formed as a result of a local ballot referendum, which passed with a 3:1 majority. The mission of the organization is to make high quality health care available to all Philadelphians by bringing together the community, health care providers, businesses, government, and grassroots leaders to develop coordinated and integrated systems of care. The workgroup members are listed in Table 1.

Table 2: Access to Care workgroup

Name	Organization	Sector
Francine Axler	Public Health Management Corporation	Non-profit
Jermaine Bromell	Better Health Network	Non-profit, faith-based
Phyllis Cater	Spectrum Health Services	Non-profit, FQHC
Susan Choi	Health Care Improvement Foundation	Non-profit
Yvonne Claudio	Philadelphia Department of Public Health	Government
Suzanne Cohen	Health Federation of Philadelphia	Non-profit, FQHCs
Prudence Dalrymple	Drexel University's Institute for Healthcare Informatics	Academia
Ana V. Diez Roux	Drexel University	Academia
Dana Dwiranti	Greater Philadelphia Health Action	Non-profit
Eric Edi	Coalition of African Communities	Non-profit

David Grande	Healthy Philadelphia, University of Pennsylvania	Non-profit, academia, health system
Maura Heidig	AccessMatters	Non-profit, family planning
Patrick Keenan	Pennsylvania Health Access Network	Non-profit
Gina Kirk	Public Health Management Corporation	Non-profit
Priscilla Koutsouradis	Delaware Valley Healthcare Council of The Hospital & Healthsystem Association of Pennsylvania	Non-profit
Rob McKenna	U.S. Health Resources and Services Administration, Region III	Government
Naomi Mirowitz	Philadelphia Department of Public Health	Government
Elhaji Ndiaye	Philadelphia Community Development Corporation	Non-profit
Lauren Pongan	SEAMAAC	Non-profit
James Plumb	Jefferson Center for Urban Health	Academia, health system
Carol Rogers	Healthy Philadelphia	Non-profit, advocacy
Donna Torrisi	Family Practice and Counseling Network	FQHC
Walter Tsou	Healthy Philadelphia	Non-profit, advocacy
Yolanda Watson	Sayre Health Care Center	Non-profit, FQHC
Sulaiman Wood	Mayor's Office of Community Empowerment & Opportunity	Government
Vincent Zarro	Drexel University	Academia

Goal 1: Maximize implementation of the provisions of the Affordable Care Act (ACA) that impact access to care.

Objective 1: Maximize enrollment of eligible Philadelphians in health insurance exchanges and ensure consumer knowledge of all exchange options.

- Since the implementation of the ACA with the launch of Marketplace enrollment in 2014 and Pennsylvania’s Medicaid expansion in 2015, increasing numbers of Philadelphians are living with health insurance – many for the first time in their lives.
- The 2017 ACA open enrollment period was between November 1 and December 15, 2017. A local coalition of enrollment assisters including Pennsylvania Health Action Network (PHAN), PASSI (Pan Asian Senior Services), Benefits Data Trust, the Health Federation of Philadelphia, Public Health Management Corporation, and Better Health Network, shared resources to disseminate culturally sensitive and literacy appropriate information about the availability of health insurance to community leaders, elected officials, and other grassroots leaders, including immigrant leaders.
- Philadelphia enrollment in medical assistance:

Year	Enrollment
2013	519,800
2014	522,700
2015	550,300
2016	617,400
2017	662,996

- In 2017, 55,848 Philadelphians were enrolled in health insurance through the Marketplace, representing a 3% increase from 2016.
- Children’s Health Insurance Program enrollment has increased 23% between 2015 and 2017, with 24,297 children enrolled in 2017.
- The Philadelphia Office of Community Empowerment and Opportunity Benefits Access Group is working to analyze why eligible Pennsylvanians are having their medical assistance renewals denied, and to develop an advocacy strategy to address this lapse in benefits.
- The Mayor’s Office of Community Empowerment & Opportunity (CEO) hosted a Shared Prosperity Roundtable, “What’s Next for the Affordable Care Act?” on August 25, 2017 to discuss on-going threats to affordable health care, and develop successful strategies to promote the open enrollment period. More than 50 agency and community leaders participated.
- The Penn Center for Public Health Initiatives hosted a seminar, “Health Care inside the Walls,” on October 19, 2017. Dr. Bruce Herdman, Chief of Medical Operations for the Philadelphia Prisons, described efforts to ensure that all people have completed an application for medical assistance before release, and those with chronic health conditions have an appointment to be seen in a FQHC within 30 days of discharge. In 2018, presumed eligibility for MA will be established as the norm, so that individuals will not have to go through a new process for MA enrollment.

Objective 2: Ensure/increase capacity of primary care providers.

- No Year 4 activity.

Goal 2: Maintain and grow the health care safety net, regardless of the ACA and the status of Medicaid expansion.

Objective 1: Ensure geographic availability and distribution of safety net health care services.

- PDPH Health Commissioner Thomas Farley, MD, MPH, announced that the revised PDPH Strategic Plan includes objectives on monitoring and reporting of access to primary care on a neighborhood level, and plans to partner with health insurance providers and CHCs to direct primary care services to those areas with inadequate access.
- A new health center, operated by ICNA Relief (Islamic Circle of North America,) has been approved by the Philadelphia Zoning Board of Adjustment at 7400 Frankford Avenue. The low cost and/or free health center, providing care to all, is scheduled to open in 2018 and will serve patients living in lower Northeast Philadelphia, a long-underserved area of the City, where many people have chronic diseases, are at risk of having an unmet health care need, and face long waits for appointments.

Objective 2: Ensure availability for underserved populations, particularly undocumented immigrants.

- The Board of Directors of the PDPH health centers monitors any decrease in use of PDPH health centers within immigrant communities. It is important that communities understand that PDPH health centers are places where immigrants, regardless of their immigration status, are welcomed.
- AFRICOM, whose mission is to empower the African and Caribbean communities by facilitating their integration into the social and economic fabric in the Greater Philadelphia area, has hosted “Know Your Rights” sessions, which have been well attended.
- Maternity Care Coalition (MCC) hosted a forum, “Advocating for Immigrant Women, Children and Families” on October 3, 2017. More than 100 health care providers, outreach workers, and advocates attended the discussion of threats and response to anti-immigrant rhetoric.

Goal 3: Improve the quality of primary care services.

Objective 1: Develop and use quality of care indicators in Philadelphia’s publicly funded community-based primary care providers.

- The PDPH Fiscal Year 2018 budget reflected an increase to support implementation of a Patient Centered Medical Home Model in the eight city-operated health centers. This initiative aims to increase quality, continuity, and follow-up care for patients with chronic health conditions and has enabled each health center to increase staff with new hire of a physician assistant/nurse practitioner, a medical assistant, and a behavioral health specialist.

Objective 2: Improve rates of preventive care screening and follow-up treatment.

- No Year 4 activity.

Objective 3: Improve inter- and intra-systemic communication among agencies/organizations that serve vulnerable populations.

- Healthy Philadelphia's West/Southwest Philadelphia Transitions in Care Workgroup (consisting of representatives from the area's 3 hospitals and 5 CHCs) has developed a "Guide for Hospitalists and Hospital Clinicians: Discharging High Risk Patients Who Get Primary Care at CHCs". This guide establishes a mutually agreed to plan for communications between in-patient and out-patient providers.
- Since implementing the guidelines, clinicians have noted an improvement in quality of hand-off of patients from hospitals to out-patient setting with increase in the number of patients recently released from hospitals who are coming to their follow-up appointments with discharge summaries. Patient Information is being shared through E-faxing, EPIC and P2P (Patient to Patient) and HealthShare.

Table 2: Measures of Success – Access to Care

Measure	Baseline	2014	2015	2016	2017	2018 Target
Reduce the percentage of adults without health insurance	18.5% (CHDB, 2012) ¹	Data will be available in 2015	12.4% (CHDB, 2014-15) 12.6% (U.S. Census Bureau, American Community Survey 1-Year Estimates, 2014)	CHDB data available in 2018 9.7% (U.S. Census Bureau, American Community Survey 1-Year Estimates, 2015)	CHDB data available in 2018	13%
Reduce the percentage of adults forgoing care due to cost	18.5% (CHDB, 2012)	Data will be available in 2015	13.4% (CHDB, 2014-15)	CHDB data available in 2018	CHDB data available in 2018	13%

Table 3: Indicators of progress– Access to Care

Indicator	Baseline	2014	2015	2016	2017	2018 Target
Number of eligible Philadelphians enrolled in health insurance exchanges	TBD	60,724	75,076	55,651	55,848	75,000
Number of Philadelphians enrolled in HealthChoices, Pennsylvania’s Medicaid expansion program	NA	NA	107,879	161,992	171,881	
Number of Philadelphia children and adults enrolled in Medical Assistance	519,800 (2013)	522,700	550,300	617,400	662,996	
Philadelphia Enrollees in Children’s Health Insurance Program	25,422 (2013)	21,501*	19,802	22,455	24,297	

¹ CHDB=Community Health Database

*The ACA took effect on January 2014. The FPL lower limit for CHIP changed from 133% to 100% FPL. Enrollment from CHIP was lost as children became eligible for medical assistance.

Percentage of uninsured with regular source of care	65% (CHDB, 2012)	Data available in 2015	64% (CHDB, 2014, 15)	CHDB data available in 2018	CHDB data available in 2018	85%
Percentage of adults receiving preventive services and screening -Colon cancer screening (50-74 years, colonoscopy or sigmoidoscopy in lifetime)	74.6% (CHDB, 2012)	Data will be available in 2015	72.6% (CHDB, 2014-15)	CHDB data available in 2018	CHDB data available in 2018	85%
-Breast cancer screening (50-74 years, women, mammogram in last 2 years)	83% (CHDB, 2012)		82.5% (CHDB, 2014-15)			90%

III. Reducing Chronic Disease Related to Poor Diet and Physical Inactivity

Workgroup

The Reducing Chronic Disease Related to Poor Diet and Physical Inactivity is chaired by Christina Miller of the [Health Promotion Council](#) (HPC) and Sara Solomon of the [University of Pennsylvania's Center for Public Health Initiatives](#). Health Promotion Council addresses chronic disease prevention and management through direct service, capacity-building, and policy- and systems-change initiatives. The University of Pennsylvania's Center for Public Health Initiatives' mission is to educate and train public health leaders and practitioners, foster multi-disciplinary collaboration, and promote excellence in public health research and community partnerships.

The workgroup represents various organizations including government, community-based organizations, health systems, and academic institutions (see Table 4).

Table 4: Reducing Chronic Disease Related to Poor Diet and Physical Inactivity workgroup

Name	Organization	Sector
Rickie Brawer	Jefferson Center for Urban Health	Academia, health system
Abby Cabrera	Jefferson Center for Urban Health	Academia, health system
Carolyn Cannuscio	University of Pennsylvania	Academia
Amy Carroll-Scott	Drexel University	Academia
Nick Claxton	Philadelphia Department of Public Health	Government
Marvetta Coleman	Gateway Health	Insurance
Betyann Creighton	School District of Philadelphia	Government
Noelle Dames	Greater Philadelphia Coalition Against Hunger	Non-profit
Sonia DeVan	Gateway Health	Insurance
Beth Dowshen	School District of Philadelphia	Government
Roxanne Dupuis	University of Pennsylvania	Academia
Marina Fanous	University of Pennsylvania	Academia
Jennifer Fassbender	American Diabetes Association	Non-profit
Tatiana Garcia-Granados	Common Market Philadelphia	Distributor
Neil Goldfarb	Greater Philadelphia Business Coalition on Health	Non-profit, Business
Steven Gregg	SquashSmarts	Non-profit
Sara Grossman	Philadelphia Department of Public Health	Government
Deborah Hetrick	Aramark Healthcare	Business

Christine Jacobs	AmeriHealth Caritas	Health Insurer
Meerab John	CARDONE Industries, Inc.	Business
Marisa Jones	Safe Routes to School National Partnership	Non-profit
John Keith	American Lung Association	Non-profit
Jonathan Kirch	American Heart Association	Non-profit
Krista LaNoce	Public Health Management Corporation	Non-Profit
Caroline LaRochelle	University of Pennsylvania Prevention Research Center	Academia
Bill La Salle	Thomas Jefferson University, Aramark	Academia, Business
Nikki Lee	Philadelphia Department of Public Health	Government
Jennifer Litchman-Green	American Heart Association	Non-profit
Elizabeth Massas	The Salvation Army: Kroc Center	Non-profit
Sharon McCray	Access Matters	Non-profit
Kelli McIntyre	Philadelphia Department of Public Health	Government
Katie Meister	Public Health Management Corporation	Non-profit
Christina Miller	Public Health Management Corporation, Health Promotion Council	Non-profit
Grif Miller	U.S. Public Health Service	Government
Jamie Miller	Public Health Management Corporation	Non-profit
Naomi Mirowitz	Philadelphia Department of Public Health	Government
Marjie Mogul	Maternity Care Coalition	Non-profit
Katie Monroe	Bicycle Coalition	Non-profit
Waffiyah Murray	City of Philadelphia	Government
Mahak Nayyar	U.S. Dept of Health and Human Services, Region 3	Government
Lauren Nocito	Public Health Management Corporation	Non-profit
Theresa O'Brien	Thomas Jefferson University Hospital	Health system
Lauren Puzen	Healthier Generation	Non-profit
Roberta Ross	Family Planning Council	Non-profit

Keri Salerno	Public Health Management Corporation	Non-Profit
Tanya Sen	Greater Philadelphia Coalition Against Hunger	Non-profit
Brenda Shelton-Dunston	Black Women's Health Alliance	Non-profit
Sarah Shrimplin	U.S. Dept of Health and Human Services, Region 3	Government
Rob Simmons	Thomas Jefferson University	Academia
Aimee Smith	Freedom Valley YMCA	Non-profit
Sara Solomon	University of Pennsylvania's Center for Public Health Initiatives	Academia
Muna Tefferi	Philadelphia Department of Public Health	Government
Amy Verbofsky	Delaware Valley Regional Planning Commission	Government
Senbagum Virudachalam	Children's Hospital of Philadelphia	Health system
Amanda Wagner	Philadelphia Department of Public Health	Government
Stefanie Washburn	American Heart Association	Non-Profit
Yoshiko Yamasaki	Norris Square Community Alliance	Non-profit

Goal 1: Increase access to healthy food.

Objective 1: Increase the number of businesses and academic institutions that implement healthy food policies and programs.

- 16 hospitals have signed the [Good Food, Healthy Hospitals pledge](#)
- As part of the Sodium Reduction in Communities Program Grant – a five year initiative – PDPH Get Healthy Philly (GHP) continues to 1) work with the Temple Center for Asian Health on reducing sodium in restaurants; 2) pilot purchasing and contracting innovations for “Good Food” (healthy, local, sustainable, and fair) for City Departments and other institutional purchasers including hiring a full time Good Food Purchasing Coordinator; and 3) work with the Drexel Food Lab on development of new partnerships regarding the manufacturing of low-sodium products.
- The Food Policy Advisory Council convenes a Good Food Purchasing subcommittee.
 - The Delaware Valley Regional Planning Commission (DVRPC) has an active role on the Food Policy Advisory Council and continues to convene the Healthy Communities Task Force, focusing on health and social justice.

- Asociación Puertorriqueños en Marcha (APM) maintains a food buying club pooling financial resources within the community allowing residents to purchase healthy foods direct from the distributor thus reducing the cost.
- Turning Points for Children implemented a food pantry at Tilden Middle School including canned and packaged goods and produce from Philabundance, a local hunger relief organization (serves about 60 individuals a week bimonthly).
- The Greater Philadelphia Business Coalition (GPBCH) is promoting farm to table services to their 45 member organizations, representing approximately 750,000 individuals.
- The Food Trust works on several initiatives related to this objective, including:
 - Expanding the Philly Food Bucks to five Fresh Grocer grocery stores; and
 - Expanding food buying clubs and other produce distribution models to food retailers in low-income communities ;
- US Department of Health and Human Services, Office of the Assistant Secretary for Health, Region 3 (HHS) works to connect county-level health departments on healthy food and food access; The Office of the Assistant Secretary for Health within HHS is tasked with promoting healthy food procurement contracts within municipalities, including the promotion of CDC guidance.
- The Maternity Care Coalition (MCC) started a nutrition and physical activity program in Riverside Women's Correctional Facility.

Objective 2: Increase the number of child care and out of school time (OST) programs that adopt best practices in nutrition and eating.

- HPC and PDPH provided training and technical assistance for OST and Philadelphia Parks and Recreation sites to support implementation of Philadelphia's Comprehensive Food Standards.
- HPC serves as the Alliance for a Healthier Generation intermediary for Philadelphia, and provides training and technical assistance to child care and OST programs on nutrition and physical activity guidelines.
- PDPH has begun working with the Mayor's Office of Education to adapt nutrition standards to include early childhood education settings and to discuss strategies for implementation in city-funded programs.
- The Food Trust has initiated a statewide Head Start "stars system" to support Early Childhood Head Start centers to implement locally grown and healthy foods.
- Jefferson Hospital partnered with MCC to implement a food buying club at Early Head Start centers with corresponding nutrition education.
- The Reinvestment Fund works on healthy food financing initiatives and USDA regulations.

Objective 3: Increase the uptake of exclusive breastfeeding among infants 0-3 months of age.

- HPC and PDPH conducted a survey of licensed early childcare centers regarding current practices regarding nutrition (including breastfeeding) and physical activity (including screen time and outdoor play).

- GPBCH implemented a breastfeeding survey to both employees and employers to understand current needs among large (mostly corporate) business organizations. Results will inform best practices.
- MCC created a Baby-Friendly Hospital Task Force. The Task Force is working on improving exclusive breastfeeding rates among hospitals as part of the Baby Friendly Hospital Initiative.
- Three of the six Philadelphia delivery hospitals have achieved the Baby-Friendly designation. Two birth hospitals continue to work towards the Baby-Friendly designation and one birth hospital is aiming to earn the PA Department of Health Keystone Ten Initiative designation. The Children’s Hospital of Philadelphia, which delivers infants with complex congenital anomalies, has received the PA Department of Health Keystone Ten Initiative designation.

Goal 2: Increase physical activity among children and adults.

Objective 1: Improve access to safe spaces so that children and adults will feel safe exercising in their neighborhoods.

- PDPH and APM, with support from Philadelphia Managing Director’s Office of Transportation and Infrastructure Systems, Philadelphia Water Department, and Philadelphia City Planning Commission, are working to improve neighborhood walkability in Eastern North Philadelphia through the training and engagement of community connectors in walk audits, safety demonstrations, and dialogue. They have also identified and are installing signage for two WalkWorks Routes in the service area.
- Organizations such as the Philadelphia Parks and Recreation, the Fairmount Park Conservancy, GirlTrek, Indego Bike Share, and PDPH are partnering to help connect Philadelphians with existing green spaces and physical activity.
- The Bicycle Coalition of Greater Philadelphia offers lessons to adults who are returning or who are new to riding lessons on safely riding to increase health and wellness.
- Philly Powered, launched in Fall 2015, is a campaign designed to promote everyday physical activity particularly among adult men and women who are seeking to live healthier lives. Some highlights from 2017 include:
 - A billboard, radio, and digital campaign highlighting stories and free and low cost fitness opportunities such as walking, double dutch, and swimming;
 - Poolside fitness programming for adults at five SwimPhilly pools;
 - Three new walking groups in partnership with the Fairmount Park Conservancy and Philadelphia Parks and Recreation; and
 - The development of [video assets](#) to promote movement breaks and break down misperceptions of barriers to physical activity.
- Fairmount Park Conservancy piloted [We Walk PHL](#) in 2017, a new program in partnership with Philadelphia Parks and Recreation (PPR), PDPH, and HPC. The program offered free walking groups at three city parks for 18 weeks. Walks were posted on websites through Philly Powered, the Fairmount Park Conservancy, and PPR.

Objective 2: Increase the number of child care and out of school time programs that adopt best practices in physical activity.

- Nutrition and physical activity for childcare was included as a best practice in the newly issued city-wide plan [A Running Start](#). PDPH is working with partners to implement related components.
- In November 2017, the GSK US Community Partnerships team convened stakeholders – including community groups, child care providers, government officials, healthcare providers and the philanthropy community – to discuss and brainstorm solutions to improve nutrition and increase physical activity among young children in early child care settings across Philadelphia.
- In June 2017, the Board of Health adopted a [resolution](#) regarding sugary drinks and screen time in early childhood settings. PDPH and partners are providing education and technical assistance to support implementation of the recommendations by childcare providers across Philadelphia.
- MCC trained Early Head Start staff on the "I Am Moving, I am Learning" initiative, and expanding physical activity opportunities for staff.

Goal 3: Further the integration of nutrition and physical activity promotion with clinical practice.

Objective 1: Increase relevant resources available for providers to disseminate in their clinical practice.

- PDPH GHP continues to convene the Community-Clinical linkages Workgroup to share existing and emerging best practices, tools, and opportunities for collective action regarding the social determinants of health, with an initial focus on housing.
- Hospitals participating in [COACH](#) (Collaborative Opportunities to Advance Community Health) are screening patients for food insecurity and working with community partners to connect patients to food-related benefits and healthy food resources.
- The [NaturePHL program](#) launched in the summer of 2017 bringing together physicians, clinicians, educators, public health advocates, park and recreation agencies, and other organizations to offer outdoor activity prescriptions for Philadelphia families and help connect them to healthy outdoor play in their neighborhoods.
- The Food Trust is working with Lankenau Medical Center, Jefferson Hospital, and Albert Einstein Medical Center, on Food Bucks RX and [Heart Smarts](#) to incentivize healthy food purchases.
- In conjunction with the [Make a Choice Campaign](#), HPC developed and disseminated Prevent Diabetes STAT, a provider resource toolkit educating several thousands of primary care providers on the impact and importance of referring to Diabetes Self-Management Education and Diabetes Prevention Programs

Objective 2: Educate medical, osteopathy, nursing, and physician’s assistant students on integrating prevention and clinical management of chronic disease.

- Penn’s Center for Public Health Initiatives implemented [Walk with a Future Doc](#), a partnership with medical students from the Perelman School of Medicine to promote health and well-being through bi-weekly walks with residents and community members.
- Thomas Jefferson University MD curriculum addresses population health and health sciences through a focus on Social Determinants of Health in relationship to healthy behaviors (nutrition and physical activity).

Goal 4: Improve knowledge of and access to evidence based community resources.

Objective 1: Continue to support the creation and dissemination of information about healthy food outlets and existing physical activity programs.

- The Food Policy Advisory Council—through its Anti-Hunger subcommittee—developed [Philly Food Finder](#), a food resources toolkit that provides consolidated information on how to get affordable, healthy food in Philadelphia. Guides will be distributed to clinical practices to promote the resource.
 - The Anti-Hunger subcommittee continues to partner with local organizations such as the Greater Philadelphia Coalition Against Hunger and PDPH to ensure that listed information is up to date.
- [Philly Powered](#), launched in Fall 2015, is a campaign designed to promote everyday physical activity particularly among adult men and women who are seeking to live healthier lives. The campaign, led by PDPH GHP, is supported by over 50 partners such as the Philadelphia Parks and Recreation, American Heart Association, Latinas in Motion, The Food Trust, Bicycle Coalition of Greater Philadelphia, Black Men Run/Philadelphia, and several academic institutions and health care systems. The website provides inspirational videos as well as ideas to find free and low-cost ways to get fit nearby.

Table 5: Measures of success – Reducing Chronic Disease Related to Poor Diet and Physical Inactivity

Measure	Baseline	2014	2015	2016	2017	2018 Target
Reduce the percentage of adults who are obese	31.9% (CHDB, 2012)	Data will be available in 2015	33.3% (CHDB, 2014-15)	CHDB data available in 2018	CHDB data available in 2018	28%
Reduce the percentage of children <18 years old who are obese	20.7% (School District, 09-10)	20.3% (School District, 2012-13)	TBD	20.2% (School District, 2014)	20.6% (School District, 2015)	17%

Table 6: Indicators of progress – Reducing Chronic Disease Related to Poor Diet and Physical Inactivity

Indicator	Baseline	2014	2015	2016	2017	2018 Target
Number of institutions including nutrition standards in food contracts	0 (PDPH, 2013)	1 (PDPH, 2014)	7 (PDPH, 2015)	7 (PDPH, 2016)	27 (PDPH, 2017)	14
Number of schools participating in safe routes to school encouragement activities	8 (OTIS, 2013)	19 (OTIS, 2014)	19 (OTIS, 2015)	33 (OTIS, 2016)	8 (OTIS, 2017)	
Use of SNAP and SNAP-related incentives at farmers markets	\$117,000 (PDPH, 2013)	\$129,000 (PDPH, 2014)	\$98,226 (PDPH, 2015)	\$115,897.56 (PDPH/TFT, 2016) <small>*number adjusted from 2016 report</small>	\$120,034.72 (PDPH/TFT, 2017)	\$200,000
Number of large businesses that adopt evidence-based nutrition and activity-related workplace changes	~10 (PDPH, 2013)	24 (PDPH, 2014)	29 (PDPH, 2015)	36 (PDPH, 2016)	16 (PDPH, 2017)	50
Number of Indego bike share rides by cash and Access Passholders (*Indego launched in April 2015)	N/A	N/A	16,351 (Member and ridership data from Indego Reports to OTIS)	46,101 (Bicycle Transit, 2016)	59,200 (OTIS, October 2017)	64,000