1. The Prevention Agenda priorities for the 2016-2018 reporting period are within the focus area of Preventing Chronic Disease. The measures are:
   - To reduce obesity in children and adults and
   - To increase access to high quality chronic disease preventive care and management in both clinical and community settings.

2. The SBH CSP work plan continues to focus on Preventing Chronic Disease. SBH is a member of the DSRIP PPS Bronx Partners for Healthy Communities [BPHC] as are several SBH CSP members. Our intervention interests are aligned with BPHC goals.

3. Data sources reviewed for this work plan which confirmed our priorities include:
   - The 2014 NY Academy of Medicine’s Bronx Community Needs Assessment
   - US Census, American Community Survey 5 year data 2008-2012
   - 2011-2012 Medicaid Prevention Quality indicators, NYS Department of Health Office of Quality and Patient Safety, 2014 as reported by the Office of Health Systems Management
   - NYC Health Department Community Health Profiles 2015 Bronx Community District 1, 5 and 6
   - NYC Department of Health and Mental Hygiene Community Consultations from the Take Care New York 2020
   - Vital Statistics Data as of March, 2014, New York State Department of Health-Bureau of Biometrics and Health Statistics
   - Bronx County Community Health Survey undertaken in collaboration with Montefiore Medical Center and Bronx Partners for Health Communities

4. Existing and historical partnerships with local community-based organizations, institutions; enterprises are listed in the CHNA/CSP document under Appendix A.

5. We are engaging the broad community through on-site and community-wide outreach activities and in participation at the local government level. The CSP Workgroup supports the local District Public Health Office neighborhoods efforts. The SBH CSP also has participation of local elected officials at the county, city and state level.
6. Some examples of the specific strategies and activities utilized are: workshops in the community, untraditional open-space community locations, use of mobile mammography vehicle, and including hosting subject specific on campus meetings all of which are based on earlier successes.

7. Specific measures identified within the CHNA/CSP document for reporting are scheduled to be tracked quarterly to evaluate impact. By implementing and tracking the performance on a strict timeline any modifications to the interventions such as prioritizing, turnaround times, follow up, etc. can be determined in an effective and efficient manner.