MID-SHORE LOCAL HEALTH IMPROVEMENT COALITION MEETING December 08, 2014

Present:	Jennifer Berkman Mike Clark Scott Haas Julie Jones	Cathy Bilodeau Jill Cotter Roger Harrell Margaret Jopp	Carolyn Brooks Janet Fountain Holly Ireland Miranda LeCompte	Joseph Ciatola Michelle Hammond Susan Johnson Paula Lowry
	Thom McCarty Michele Morrissette Rebecca Rice Sandra Wilson	Kathleen McGrath Sharon Pahlman Robin Shores	Wanda Molock Chris Pettit Leland Spencer	Nicole Morris Krista Pettit Mary Ann Thompson

I. WELCOME, INTRODUCTIONS AND ANNOUNCEMENTS: DR. SPENCER

Dr. Spencer welcomed everyone to the meeting, and a round of self-introductions was made.

- It is time to update SHIP Health Action Plan
 - Of the 39 health indicators, the top 3 for our region are: diabetic ED visits, adolescent obesity and adolescent smoking rates.
 - In the 2013 ranking, adolescent obesity dropped out of the top 5, obesity is up, smoking dramatically improved, but still up since others improved as well.
- The new plan addresses the same areas for diabetes.
- For adolescent smoking- no regional activities are planned, as counties are doing so much in this area.
- Mental health through MSMHS- Holly Ireland- covered as a region through her organizationthis is well-handled already.
- Substance abuse ED visits are now a separate indicator
- There is no new funding to address these areas- so we will focus on what is currently being done.
- Diabetes self-management training study looked at 2012 data- looked at 100,000 private patients with insurance who were newly diagnosed diabetics- how many during the first year of diagnosis went to get training or education about being diabetic- 6.8%; it was 15 % for insulin dependent diabetic patients.

II. REGIONAL PARTNER UPDATES

Nicole Morris: Community Clinical Linkages

- Received funding to work on initiatives around priorities- Body & Soul project (healthy eating and physical activity in congregations through health ministries).
- Capacity building on the mid-shore includes training community members for CHWs and peer leaders for CDSMP.
 - So far they have educated over 150 people, largely for diabetes, reaching people where they are.
 - They are poised to reach an additional 250 people.
- Million Hearts funding will build upon what we have already done, with room to grow.
- Looking at how best to engage Primary Care providers to refer out to these resources.
- Many resources are being leveraged on the Mid-Shore to saturate the community.

Kathleen McGrath: Shore Health

- Community benefits report for FY14- HSCRC and government under ACA.
 - Shows how we serve the underserved in the area.

- DHMH is looking to the hospitals- health needs assessment to be done in FY15 will then be reported on in 2016.
 - Will look at how we partner; will be looking to the coalition for planning for this to really look at the true cost to move the needle on ED visits for diabetes, etc.
 - July 2015 will be the data collection for the needs assessment- prioritizing needs, etc.
 - Looking at Shore Wellness partners- readmission rates, partnering on grants.
 - Metrics from SHIP helped drive the priorities.

Susan Johnson: Choptank Health

- New Quality department- changed the focus for population health.
 - New team with Jill-looking at chronic disease patients- where are the gaps in care?
 - New Patient Services Coordinators- linking patients to services.
 - Clinical Informatics Coordinator to be able to run reports, making sure everything is in the right place. The goal is to have everything in the chart.
 - Dental case manager being hired.
 - Just got started looking at what patient population looks like.
 - Health care transitions team- first meeting was last Friday. This is hands on work to make sure linkages are made between patients and the care they need.
 - Would like a CHW to be part of the team as well.

Holly Ireland:

- Phase 2 in administration, finance and regulation.
- Phase 3-Value Options goes into effect January 1, 2015- fee for services
 - Substance abuse will be worked into fee for services -core service agencies and local addiction services- localities.
 - There are many changes associated with the transition.
 - Updating community health plan- needs assessment done in 2014.
- Shared a handout that individuals could sign up to be on groups working 6 goals.
- 1 in 4 people have a diagnosable behavioral health issue; 60% of adults do not receive treatment.
 - Stigma prevents individuals from seeking help.
 - Individuals will go to a friend or family member instead of seeking professional help.
 - Suicide rates and domestic violence rate are very high and need addressing as well.
 - Crisis Services Committee-provides intervention and training for law enforcement and emergency first responders to identify situations and be able to divert to appropriate services. It is a 40-hr introductory training- to be more effective in diverting from the ED to community based services.

Jennifer Berkman: ESAHEC

- Have submitted HERSA grant to expand mental health services to University of Maryland Shore Regional Health at Chestertown hospital.
- Because of ACA, educating low literacy individuals on how to make an appointment, what their benefits are, etc. Will be hosting training in Spanish and English.
- Updating training for CHWs, etc.
- Hosting training for Prediabetes Prevention Program- the prediabetes program is very
 important because it is meeting the needs of the general population because they might
 seek out a diabetes educator but they might not qualify to receive education through
 insurance because they are not a diagnosed diabetic.
- Representatives went to Capitol Hill last week- republicans and democrats don't want to see a freeze- AHECs are not in the President's budget.
- Currently working with the CDC to educate the public and the American Association of Pediatricians about HPV vaccinations- -educating them on how to give advice about getting

the HPV vaccination.

III. PRESENTATION- SANDY WILSON- HEZ UPDATE- DORCHESTER COUNTY HEALTH DEPARTMENT

PPT and handouts available on www.midshorehealth.org

- Cambridge to Federalsburg in Caroline County- 10.5 practitioners.
- In second year, funders want to know what are the benefits of the recruits?
- Focus on diabetes, hypertension, and behavioral health concerns.
- Support staff- CHWs
- Linda walls developed a system of data gathering- was able to report 1429 unduplicated individuals-56.4% minority
- Challenges- year one
 - Federalsburg clinic opening in mid-January- for adult behavioral health needs instead of having to go elsewhere.
 - Referrals to CHW
 - Calculating cost savings
- Year 2 goals- same as year 1, but will be held highly accountable to evaluators.

IV. PRESENTATION- SHARON PAHLMAN- UNIVERSITY OF MARYLAND COOPERATIVE EXTENSION- SOLUTIONS IN YOUR COMMUNITY

PPT and handouts available on www.midshorehealth.org

- Shared handouts of each county's faculty and staff contacts.
- The cooperative extension service is celebrating 100 years
- The Morrill Act, and Smith-Lever Act- research based knowledge brought to the people and supported by the USDA and individual counties
- Offers educational services on a variety of topics to youth and adults.
- V. ADJOURNMENT: With no further business, the meeting adjourned at 2:00 pm.

The next coalition meeting will take place on Monday, March 9, 2015 at 12:30 pm, at the Queen Anne's County Health Department. Lunch will be provided, beginning at noon.