



Wicomico County Local Health Improvement Coalition Meeting Minutes

Friday, June 7, 2024 @ 9:00 a.m. *(Approved at August 2, 2024 Meeting)*

Meeting Name:	<i>Wicomico Local Health Improvement Coalition</i>	Meeting Location:	<i>Wicomico County Health Department Adkins Building</i>
	<i>Friday, June 7, 2024</i>	Minutes Recorder:	<i>Cathey Insley (virtual)</i>
Meeting Time:	<i>9:00 a.m.</i>	Minutes Reviewer:	<i>Group</i>
Meeting Attendees and Organizational Representation:	<i>Lisa Renegar (WiCHD), Matthew McConaughey (WiCHD), Josh Boston (CHC), Pamela Tenemaza (MDH), Tammy Griffin (WiCHD), Christina Gray (WiCHD), Kat Rodgers (TidalHealth), Katherine Feldman (MDH), Rochelle Tyler (TidalHealth), Keirsten DeBoer (DHHHC), Cathey Insley (WiCHD), Ellen Willingham (JHHC), Julene Krenzer (Carefirst), Katherine Feldman (MDH), Michele Gregory (City of Sby), Tara Wampler (Aetna), Ulric Hetsberger (BC/BS), Jessica Sexauer (WiCHD), Deborah Stanley (CEC)</i>		

TOPIC	DISCUSSION	ACTION
WELCOME	Kat called the meeting to order at 9:02 a.m. and members provided self introductions.	
Approval of Minutes	Jessica made a motion to approve April minutes, seconded by Deborah Stanley, and carried.	Cathey will post .
Presenter	<p>Building a Healthier Maryland (mdh.bahm@maryland.gov) <i>Pamela Tenemaza, Health Policy Analyst, MDH Deputy Secretary's Office of Public Health Services</i></p> <ul style="list-style-type: none"> ● Pamela presented on the State Health Improvement Plan, as developed by the BAHM team from the State Health Assessment. ● State is also working on accreditation and Workforce Development. ● Partners: state LHICs and Health Officers, other partner organizations. ● Identified 5 priority areas: <ul style="list-style-type: none"> ○ Chronic Disease, Access to Care, Women's Health, Violence, Behavioral Health ○ Health Equity and Social Determinants of Health incorporated into all five priority areas. <p>Priority Area 1: Chronic Disease</p> <ul style="list-style-type: none"> ● Goal 1: Enhance primary prevention of chronic disease <ul style="list-style-type: none"> ○ Food insecurity ○ Physical activity ● Goal 2: Enhance screening, treatment and care for chronic illness <ul style="list-style-type: none"> ○ Colorectal and lung cancer screening ○ Emergency room visits for asthma ○ Adults with diabetes ○ Adults with hypertension 	

Priority Area 2: Access to Care

- Goal 1: Enhance care delivery models to meet needs of different populations
 - Telehealth services for outpatient behavioral health services
 - School Based Health Centers
- Goal 2: Recruit/retain high quality healthcare and public health workforce
 - Increase # of adults with usual primary care providers
 - Reduce average wait time for primary care first appointment
- Goal 3: Reduce barriers to care
 - Reduce number not covered by private or public health insurance

Priority Area 3: Women's Health

- Goal 1: Improve maternal health outcomes through maternal care
 - Reduce preterm births
 - Reduce infant mortality
 - Reduce low birth weight
 - Reduce unintended pregnancy rate
 - Increase deliveries where individuals are screened for clinical depression during postpartum period
 - Reduce maternal mortality rate
 - Increase prenatal care beginning in first trimester
- Goal 2: Increase breast and cervical cancer prevention, screening and care
 - Increase breast cancer screening
 - Increase adolescents up to date on HPV vaccine
 - Increase females receiving cervical cancer screening

Priority Area 4: Violence

- Goal 1: Reduce firearm-related suicides, homicides, injuries
 - Reduce age-adjusted rate of firearm-related suicides
 - Reduce age-adjusted rate of firearm-related homicides
 - Reduce emergency department visits related to intimate partner violence.
- Goal 2: Reduce rates and harms associated with intimate partner and sexual violence

Priority Area 5: Behavioral Health

- Goal 1: Expand access and utilization of behavioral health services
 - Reduce emergency department visits for mental health conditions
 - Reduce rate of suicides
 - Increase youth substance use treatment providers
 - Increase utilization of public behavioral health services
- Goal 2: Reduce disparities in mental health outcomes
 - Reduce students who felt sad or hopeless

	<ul style="list-style-type: none"> ○ Increase affordable housing to improve health outcomes, including mental health ● Goal 3: Reduce overdose and negative health outcomes from substance use <ul style="list-style-type: none"> ○ Reduce opioid fatality rate ○ Reduce emergency department visits related to addictions related conditions. <p>Alignment Across Plans</p> <ul style="list-style-type: none"> ● Worked to align with the Moore/Miller plan, AHEAD Medicaid model, and Managing for Results. <p>Next Steps</p> <ul style="list-style-type: none"> ● Continue to develop best process for alignment, Kick-Off Summit, add additional partners for the next phase. <p><i>Christina asked if there will be a publicly accessible site/dashboard - and will it include jurisdictional data?</i></p> <ul style="list-style-type: none"> ● Will be publicly available, and will include local data. 	
Health Officer Updates	<ul style="list-style-type: none"> ● Monitoring Avian flu. No cases reported in Maryland. ● Fiscal year is ending; working to initiate contracts with our partners for fiscal year 2025. 	
Health Equity Framework Model Selection	<ul style="list-style-type: none"> ● 9 responses received from 18 voting members received, just 1 vote shy of a quorum/majority. ● 44.44% selected the Institute for Healthcare Improvement from the four models. <ul style="list-style-type: none"> ○ Kat shared that this model encompasses elements from the others. ● Jessica Sexauer made a motion to move forward with the results shared since there was a majority from the responses received, and one or two additional votes would not likely change the result. ● Josh Boston seconded, and carried. 	
Subcommittee Updates	<p>Lisa Renegar, Wicomico County Health Department:</p> <ul style="list-style-type: none"> ● Will send a meeting poll to set the first meeting for the new subcommittee. <p>Behavioral Health Workgroup/LBHA</p> <ul style="list-style-type: none"> ● Michelle Hardy has accepted an invitation to present to the state on October 17th about the partnership between LBHA and LHIC. ● Wrapping up FY24 contracts. ● Sent a survey to BH providers to get a pulse of their language access capability and assess needs. ● FY25 Sexual Health in Recovery program - looking at one time programs that can make an impact in the substance use disorder community. Would like to explore and host training for substance use disorder providers and staff on LGBTQ best practices. ● Requested funding to complete a needs assessment for women and children residential spaces. ● May also offer translation/interpretation services for providers, and transportation for our peer and recovery services. ● Law Enforcement Assisted Diversion program and Shore Center waiting for their FY25 budget allocations. Have requested increases for a couple of programs that didn't indicate they would be level 	

funded in FY25. Once budgets are approved can move forward with programming.

- BHA has reached out regarding a SAMHSA grant opportunity for the treatment legislative bill passed this year. Wicomico county was asked to be a pilot if funds are awarded.

Chronic Disease/Live Health Wicomico Workgroup

- Completing a survey to get a baseline of the number of CHWs in the region (Including Somerset, Worcester, Wicomico and Sussex, DE).
- Currently in IRB review; submitted over a month ago.

Partner Updates

Tammy Griffin, Prevention

- Law Enforcement recognition luncheon was held 6/6, recognizing individuals that work to keep children safe from underage drinking and smoking.
- 13 new and ongoing contracts for chronic disease programming under Dr. Marie Fouche.
- Contracts with 7 organizations to establish new community gardens: MAC, Salvation Army, Word of Life, Parkside A+ garden, Community of Joy, Delmarva Muslim Community, Rebirth all establishing gardens to feed the community and address food insecurity.
- Cessation cohorts held through Rebirth and the Delmarva Muslim Community Center.
- UMES - health corner store grant to create an app that will connect local farmers to local community stores to provide produce and get produce into the community.
- Migrant Clinician’s Network funding allowed completion of focus groups and key informant interviews in the hispanic and latino community to discuss how the LHD can provide better services, language access and health disparities for their communities.
- Applied for MCHRC grant “Green Thumb Harvest. Healthier Helpers: Planting the Seeds for Community Health in Wicomico County.”
- To support more CHWs in the community as well as community gardens to address food insecurities.

Deborah Stanley, Community Empowerment Center

- Proud to have received an award at the law enforcement recognition luncheon yesterday.
- June 8th Community Health Fair, several partners are participating. Setup time is at 10 am, outdoor event 11 - 2 at St. Paul’s AME Zion Church on Delaware Avenue.

Jason Sammons, Department of Social Services

- Child Fatality Review team: LHD shared a Safe Sleep demonstrator at the last meeting, and DSS has now purchased those babies to also provide prevention education and information.
- Business cards on safe sleep were also shared, DSS has purchased those as well.
- City of Salisbury was selected for a pilot project with Maryland Juvenile Services and Dept of Corrections “Safer Stronger Together”
 - Salisbury was selected based on clients having the highest interface with all three agency services. Baltimore and Hagerstown were also selected.
 - Working to hire a family navigator. They don’t want this position to work in a state agency office, Jason proposed the Harm Reduction Center as a host location.

	<p>Keirsten DeBoer, Deer’s Head Hospital Center</p> <ul style="list-style-type: none"> ● Shore Transit has reduced the number of stops they are making; several dialysis patients are affected. ● Working with delegates to see if there is a solution. ● No longer stopping at Woodbrooke or WorWic, and reduced the number of days they come to DHHC. ● DHHC has a yearly grant from the Community Foundation to purchase transit tickets, but if the buses aren’t running, patients can’t get to the center. <p>Kat Rodgers, TidalHealth Peninsula Regional</p> <ul style="list-style-type: none"> ● Child/Adolescent unit is now open. ● HealthFest will be held at a new time and a new location this year. ● Fliers are available in English, Spanish and Haitian Creole. ● Sending CHWs out to outreach/promote. ● Saturday June 22nd from 9 am to noon at the Fire Department on Cypress Street. ● Screenings and assessments, community providers will be in attendance ● Received notification that the REACH coalition was awarded the Health Equity Resource Community Grant for \$4.8M over five years. ● Allocated \$100K a year in food related strategies, may be able to work with LHD community gardens. ● Put in money for transportation in specific zip codes. Working with the United Way of the Lower Eastern Shore. Will develop a rideshare program for our area. ● Adopt a Block opening a food pantry off of Benny Street; will likely pilot a similar pantry in that area. ● Will replicate some of the things TidalHealth has been doing with Rebirth. Sent a nurse practitioner out to see individuals with diabetes and/or hypertension but no insurance or primary care provider. ● Summer: launching mobile mammography campaign. Working to raise \$1M to offer digital mammography in the community. 	
NEXT MEETING	<p>Friday, August 2, 2024 @ 9:00 a.m. LOCATION: Adkins Conference Room (second floor), 801 N. Salisbury Blvd, Salisbury</p>	
ADJOURNMENT	<p>The meeting was adjourned at 10:05 am.</p>	