



# Statewide Coordinating Council for Public Health District Coordinating Council Update

Template updated 03/2012

<b>District: Aroostook District</b>	<b>Date: June 12, 2012</b>
<p><b>Brief review of decisions and outcomes from Executive Committee and DCC meetings held since last SCC meeting. For agendas and copies of minutes, please see district's website at:</b>  <a href="http://www.maine.gov/dhhs/boh/olph/lphd/index.shtml">http://www.maine.gov/dhhs/boh/olph/lphd/index.shtml</a></p> <ul style="list-style-type: none"> <li>➤ Include CTG update as a standing item on the Aroostook DCC agenda</li> <li>➤ Draft document of the District Report to the Legislature provided for review</li> <li>➤ The County Health Rankings results were reviewed; additional information regarding the measures used by the University of Wisconsin will be researched and shared with the group</li> </ul>	
<p><b>Ongoing or upcoming projects or priority issues:</b></p> <ul style="list-style-type: none"> <li>➤ Develop the CTG work plan, staffing plan and budget by stated deadlines</li> <li>➤ Identify provider practices willing to establish/ assess Hemoglobin A1c testing protocols to assure that this screening is conducted annually with Diabetes patients</li> </ul> <p>Dates of Interest:</p> <p>Aroostook DCC Steering Committee Meeting 7/10/12  Aroostook DCC Steering Committee Meeting 8/21/12  Aroostook DCC Meeting 9/11/12  *** State Health Assessment (SHA) / State Health Improvement Plan (SHIP) Forum  Late FALL 2012 exact date TBD  *** Local Health Workforce Forum 11/08/12</p>	
<p><b>Progress with District Public Health Improvement Plan:</b></p> <ul style="list-style-type: none"> <li>• Continue to research gaps / needs in population overall, with emphasis on health disparities. Significant qualitative and quantitative data regarding homelessness in Aroostook was shared with the DCC including gains in service provided, client safety, and community collaborations, as well as strategic outlook for serving the expanding need.</li> <li>• Results of New Freedom Transportation Grant funding application pending</li> </ul> <p>➤ Successes achieved</p> <p>* Obesity- Completed inventory; ready to launch on a multi-district (Penquis) DCC partner website</p> <p>* AMHC and Pines Health Services are expanding their Physical/mental/behavioral health integration project via submission to SAMHSA from AMHC for an integrated services grant application. The competition is expected to be very stiff, as only 32 awards will be made nationally.</p> <p>➤ Barriers encountered</p> <p><b>Obesity - Staffing vacancy has interrupted this work temporarily in terms of launching the webpage</b></p>	

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22 M.R.S. §412 (2011).

A. A district coordinating council for public health shall:

- (1) Participate as appropriate in district-level activities to help ensure the state public health system in each district is ready and maintained for accreditation; and
- (4) Ensure that the essential public health services and resources are provided for in each district in the most efficient, effective and evidence-based manner possible.

A-1. The tribal district coordinating council shall:

- (1) Participate as appropriate in department district-level activities to help ensure the tribal public health system in the tribal district is ready and maintained for tribal public health accreditation; and
- (2) Ensure that the national goals and strategies for health in tribal lands and the tribal district health goals and strategies are aligned and that tribal district health goals and strategies are appropriately tailored for each tribe and tribal health department or health clinic



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## Progress with Community Transformation Grant:

- Activities planned for completion during the quarter
  - CTG coordinator hired
  - CTG Oversight committee met x 2 to provide guidance
  - 2 CTG Workgroups have been convened and met last week to advise the coordinator/oversight committee and inform the development of the work plan. These workgroups have broad geographic representation and content expertise.
- Whether activities were able to be completed on schedule
  - All reporting / planning has been accomplished according to the established deadlines
- Successes achieved
  - Action Institute attended by Martha Bell, CTG Coordinator and Carol Bell, Director of Healthy Aroostook as well as Day 1 attendance by Stacy Boucher as a member of the State CTG Management Team
- Barriers encountered
  - No significant barriers identified; work proceeding at a very quick pace. However, the school break for summer may potentially pose a bit of a challenge.

## Structural and Operational changes, including updates in membership.

Norman Fournier, CEO Fish River Rural Health is retiring June 30, 2012. A motion was placed before the DCC to seat Heather Pelletier (incoming CEO) in his place on both the DCC and the Steering Committee. By a show of hands, unanimous approval of this membership change.

There was a second motion that Norman Fournier continue to serve on the DCC in his capacity as Aroostook County Commissioner - as he is able. By a show of hands, unanimous support for retaining his voting membership as a government sector representative.

Stephen Eyler, Executive Director of Homeless Services of Aroostook, has indicated an interest in participating formally with the DCC. This sector has not had representation. This will be brought before the nominating committee for discussion and subsequent action.

## In-district or multi-district collaborations:

- School Located Vaccine Clinic
- Community Transformation Grant
- Multidistrict Obesity Workgroup tool

## Other topics of interest for SCC members:

- None at this time

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