

Statewide Coordinating Council for Public Health District Coordinating Council Update

Template updated 03/2012

District: Central Date: March 22, 2012

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:

http://www.maine.gov/dhhs/boh/olph/lphd/index.shtml At the January 24 meeting, we invited Dawn Littlefield to discuss the Community Transformation Grant (CTG) purpose and expected outcomes, added to our inventory of related activities/resources, and drafted a preliminary engagement strategy.

Ongoing or upcoming projects or priority issues: Community Transformation Grant workplan and contract; implementation of 2011 District Public Health Improvement Plan (see below); April DCC meeting

Progress with District Public Health Improvement Plan: *Activities planned for completion during the quarter & whether activities were able to be completed on schedule*

- ▶ <u>Develop EPHS #7 Workgroup work plan and work commitments</u> the Workgroup has met, but a work plan is not developed yet.
- ▶ <u>Develop EPHS #3 Workgroup work plan and work commitments</u> the Workgroup has developed a work plan for quarterly coordinated district messages, and completed the first two messages.
- ▶ <u>Develop & implement medication management messaging campaign encouraging patient</u> <u>engagement in their own care</u> – we've developed a needs list, and are trying to find resources.
- ▶ <u>Use Central District Public Health Unit Updates and DCC website to communicate important information to DCC, LHOs, & partners</u> ongoing task with updates going out weekly as needed.
- ▶ Conduct 1-2 LHO certification & training programs in 2011 done; another planned for spring
- ▶ Establish & implement DCC Vaccination Work Group & communication network ongoing
- Provide Input for State Health Plan & HealthyMaine 2020 nothing to report this quarter

Successes achieved

▶ Second EPHS #3 Workgroup coordinated messaging campaign, 'Healthy Winter Walking' developed and delivered

Barriers encountered

Staff and volunteer resources to focus on DPHIP plan implementation and workgroup support

Progress with Community Transformation Grant: Activities planned for completion during the quarter & whether activities were able to be completed on schedule

- ▶ April 24 DCC meeting to discuss CTG with full DCC and choose CTG objectives to work on, update inventory, and draft preliminary engagement strategy
- ▶ March 27 Steering Committee meeting to draft staffing plan, work plan, and job description
- Participation in state CTG calls

Successes achieved

▶ Submitted CTG inventory, chose objectives, worked on engagement strategy, and finalized contract

Barriers encountered

▶ Resources to meet deadlines and keep up with start-up changes/new information without staff yet

Structural and Operational changes, including updates in membership. None this quarter.

In-district or multi-district collaborations: Oral Health Workgroup, Substance Abuse Workgroup, Prescription Monitoring Program collaboration, National Take-back Day April 28.

Other topics of interest for SCC members:

Steadily building participation in and awareness of the DCC has led to more interest in using the DCC to recruit partners and 'asks' to take on work as a district – a good success, but one that highlights our lack of champions, focus, and resources to complete work identified by the whole DCC in the DPHIP.

Central District 2 3/22/12

22 M.R.S.§412 (2011).

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- (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 tribal health department or health clinic

Central District 3 3/22/12

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