



Statewide Coordinating Council for Public Health District Coordinating Council Update

Template updated 03/2012

District: Down East	Date: 22 March 2012
<p>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</p> <p>DCC Meeting was held at the Maine Sea Coast Mission Edge Center in Cherryfield on December 14 with seventeen participants.</p> <ul style="list-style-type: none"> • Rebecca Miller of Northern New England Poison Center was our speaker for our Downeast Deeper Dive and focused on Surveillance and Outreach for Substance Abuse and Poisonings. • A tribal health update was provided by Clarissa Webber, one of our tribal liaisons. • The Community Transformation Grant was discussed: Planning Committee will act as Oversight Team. • Short update on the progress of the DPHIP work teams was provided. • DCC organization was discussed; Cheryl facilitated a short exercise on gaining the benefits of the DCC. • SCC update and discussion provided by Kathie Norwood. • Next DCC meeting: March 23, 2012 in Cherryfield. 	
<p>Ongoing or upcoming projects or priority issues:</p> <ul style="list-style-type: none"> • Develop DCC benefits one pager to use as recruitment with district organizations. • Recruitment of Planning Committee members; Election process for Co-Chairs. • Community Transformation Grant ongoing deliverables and timeline. 	
<p>Progress with District Public Health Improvement Plan:</p> <p>Work Team Update</p> <ul style="list-style-type: none"> • Health Indicators Team: Finished up indicator list and compilation of data reports. • Health Gaps Team: Meetings through Maine Quality Counts on building collaboration. • Communication Team: Team has not met. • Health Promotion Team: Focus on Let's Go as district wide promotion. • Resource Development Team: Team has not met. • Workforce Development Team: Team has not met. 	
<p>Progress with Community Transformation Grant:</p> <p>Community Transformation Grant</p> <ul style="list-style-type: none"> • Pre-inventory started and will be complete by June. • DCC voted for DCC Planning Committee to act as Oversight Team for Year 1. • Discuss CTG Coordinator responsibilities; develop ad and position description for March posting. • Discuss responsibilities of fiscal agent and DCC. • Early discussions on objectives and work plan. 	
<p>Structural and Operational changes, including updates in membership.</p> <ul style="list-style-type: none"> • Operating Structure and Principles document being reviewed and changed to match district work in Community Transformation Grant activities 	

Downeast District

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March 13, 2012

¹Section 5. 22 MRSA c. 152

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;
2. Provide a mechanism for district-wide input to the state health plan under Title 2, section 103;
3. Ensure that the goals and strategies of the state health plan are addressed in the district; 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



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- Facilitated discussion on questions: Why do you come to DCC meetings; what would other organizations get out of attending; and name three others that you would encourage to attend.
- Develop one pager messaging on the value of the DCC==collaboration, regional goals, funding opportunities.

In-district or multi-district collaborations:

- Aligning Forces for Quality
 - Further discussions and meetings on prescription drug monitoring and health care responsibility and building patient centered medical home model in both counties.
- County Substance Abuse Task Force
 - Both Hancock County and Washington County are developing ways of expanding existing task forces around underage drinking (Hancock County) and substance abuse (Washington County) to include both prevention/health promotion and medical/clinical facets of approaches.

Other topics of interest for SCC members:

None at this submission.

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