Statewide Coordinating Council for Public Health
District Coordinating Council Update

Template updated 03/2012

District: Cumberland	Date: 9/20/12

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

Ongoing or upcoming projects or priority issues:

- Impact of the state budget on public health infrastructure in the district
- Community Transformation Grant-working to develop Year 2 workplans & budget
- Coordination on pertussis vaccination & prevention messaging
- Presentation on Lyme Disease at July Council meeting
- Partnered on proposal to join Robert Woods Johnson's Shared Services Learning Community

Progress with District Public Health Improvement Plan:

- Flu workgroup met monthly through the summer with focus on 3 strands of work (school clinics, ensuring access for vulnerable populations through adult public clinics, and coordinated communications/promotion of flu vaccination. Created collaborative poster to promote calling 2-1-1 to find public flu clinics in the district.
- Access to Care – has been a major focus of the Greater Portland Refugee & Immigrant HealthCare Collaborative, with active workgroups on mental health, dental care, vision care, primary care, and nutrition education. Partnered with UNE on a major grant proposal to HRSA that was successful and will help push access efforts forward.
- Public Health Preparedness – work is focused on partnering with Cumberland Cty EMA in the development of the MRC, and partnering with Cities Readiness Initiative to build/maintain both vaccination and communications infrastructure for use in both routine public health activities and also for special deployment in emergencies
- Work on our other DPHIP priorities (tobacco, BP & Cholesterol, Access to Care in the Lakes Region) has also picked up momentum, thanks to boost provided by the CHNA community forums in January. Workgroups for each have formed.
- Health Equity Workgroup has designed "Health on the Move" – a collaborative approach to increase the reach of community-based screening, preventive services, health education, and referral to health resources. Framework is to be piloted at Riverton Park with Portland Housing Authority in October, and at the Naples Food Pantry/community food program with CrossWalk Outreach.

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

Statewide Coordinating Council for Public Health
District Coordinating Council Update

Progress with Community Transformation Grant:

- Oversight Sub-Committee (OSC) met in June & August, next meeting is scheduled for September 21, 2012.
- Staff coordinator, objective leads, and members of Executive Committee participated in site visit with Dawn Littlefield and Pat Hart.
- OSC approved Year 1 work plans, budgets and staffing plans for PAN and ACE objectives (6/25).
- Staff coordinator submitted all Year 1 work plans, staffing plans and the finalized budget (6/29).
- Staff coordinator, DL, and others participated in 3 Technical Assistance calls (July, August, September).
- The staff coordinator will be participating on September 26, 2012 grant management call.
- PAN staff began recruiting ECE sites for enrollment in Let's Go.
- Let's Go training scheduled for end of September for ECE sites.
- Staff coordinator and objective leads met with Dawn Littlefield to review Year 1 Milestones and Activities.
- Staff coordinator began uploading enrollment information to evaluation database.
- Staff coordinator uploaded all Year 1 work plans to CTG Wiki site.
- Objective leads are drafting Year 2 work plans, budgets, and staffing plans for review by OSC on September 21, 2012.
- Staff Coordinator and Fiscal Agent submitting CTG Budget paperwork for Year 2

Structural and Operational changes, including updates in membership.

Membership Committee:

- Shane Gallagher worked with Emily Rines (committee chair) to develop list of inactive members and gaps in membership representation.
- Letters from committee chair sent to all inactive members asking for re-commitment.
- Next meeting of committee: September 27, 2012 from 2:00 pm to 3:00 pm.

In-district or multi-district collaborations:

We have developed a "Collaborations chart" as a simple mechanism to track all substantial collaborative initiatives or groups on the district priorities (DPHIP, CHIP, and/or CHNA priorities). This will provide a way to keep council members apprised of what collaborations exist that they may want to engage with, with leads offering "report-outs" and requests for input/assistance on a rotating basis through Council meeting agendas.

Other topics of interest for SCC members:

Cumberland District Representatives (Steve Fox and Becca Matusovich) and Staff (Shane Gallagher) participated in the SCC By-laws work group, which reviewed the draft by-law recommendations.

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