



**Public Health**  
Prevent. Promote. Protect.

# Statewide Coordinating Council for Public Health District Coordinating Council Update

Template updated 03/2012

<b>District: Down East</b>	<b>Date: 22 March 2013</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>	
<p><b>DCC Meetings</b></p> <p><b>January 25</b> at Ellsworth &amp; Machias DHHS Offices connected via videoconference with nineteen participants.</p> <ul style="list-style-type: none"> <li>• DCC Growth: created draft mission and vision statements.</li> <li>• Reviewed Phase 1 DPHIP Infrastructure Priorities and voted to focus on EPHS # 3 &amp; 7 and defocus on # 8 &amp; 9.</li> <li>• Review Road Map of DPHIP Prioritization: Plan additional February meeting to organize and prioritize list of strategies, data indicators, and activities (February meeting was snowed out).</li> <li>• Update on Tribal Health Program including new staffing and roles.</li> </ul> <p><b>March 22</b> at Maine Seacoast Mission in Cherryfield.</p> <ul style="list-style-type: none"> <li>• Will utilize most of time for reviewing DPHIP strategic issues and criteria for prioritization.</li> <li>• Will vote for top three strategic issues and have work groups form to define each.</li> <li>• Updates Provided for Tribal, SCC, and CTG.</li> <li>• Planning Committee looking at utilizing webinar for some future DCC meetings.</li> <li>• Next scheduled DCC meeting: May 24, 2013.</li> </ul>	
<p><b>Ongoing or upcoming projects or priority issues:</b></p> <ul style="list-style-type: none"> <li>• Regional Public Health Hazard Vulnerability Analysis.</li> <li>• Identify and develop means to coordinate services and communicate with Vulnerable Populations.</li> </ul>	
<p><b>Progress with District Public Health Improvement Plan:</b></p> <ul style="list-style-type: none"> <li>• More than twenty strategies, data indicators, and activities organized into seven strategic issues.</li> <li>• DL has met with most of the hospital and health center leadership to review DPHIP template around Access to Care strategic issue and discuss alignment of work.</li> <li>• Roadmap work plan developed to provide to DCC stakeholders an iteration of the timeline and work progression for the new DPHIP.</li> <li>• Voting for top three strategic issues planned for March 22 DCC meeting.</li> </ul>	

Downeast District

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March 22, 2013

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<sup>1</sup>Section 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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## **Progress with Community Transformation Grant:**

- Grant management activities have been supplemented by United Way of Eastern Maine, our DCC fiscal agent, in lieu of limited or no CTG Coordinator.
- Actively searching for CTG Coordinator.
- Early Care Education Support Groups (based on Bucksport Model) have been formed in three locations in order to provide sustainable mentoring and provider support mechanism once grant funding is gone.
- ECE sites being recruited during Year Two.
- GIS Mapping of schools and ECE sites in relation to farms and local food resources.
- Coordination with CTG Small Communities Grantees to determine how to complement each other's work plan in working with schools and early care education sites.
- Ongoing review of ACET information and informal team of county planners involved.

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

- Bylaw ad hoc committee formed.

## **In-district or multi-district collaborations:**

- Behavioral Health Integration Project
- UNE HRSA Washington County Chronic Disease Management Network Planning
- Shared Youth Vision Council District Initiative

## **Other topics of interest for SCC members:**

None at this submission.

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