



# Statewide Coordinating Council for Public Health District Coordinating Council Update

Template updated 03/2012

<b>District: Penquis District</b>	<b>Date: September 20, 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>➤ Dale Hamilton resigned as board chair of the DCC. The DCC confirmed a new board chair.</li> </ul>	
<p><b>Ongoing or upcoming projects or priority issues:</b></p> <ul style="list-style-type: none"> <li>➤ State Health Assessment Forum</li> <li>➤ District Public Health Improvement Plan revisions</li> <li>➤ DCC bylaws revisions</li> <li>➤ Ongoing phone conference meetings of the obesity, flu &amp; pneumococcal, and substance abuse workgroups between DCC meetings.</li> </ul>	
<p><b>Progress with District Public Health Improvement Plan:</b></p> <p>Obesity-The finalized obesity tool will be promoted in the month of September  <a href="http://5210healthylife.com/dynamic.aspx?id=84219">http://5210healthylife.com/dynamic.aspx?id=84219</a></p> <p>Flu &amp; Pneumococcal- The Beacon Community Immunization committee contacted the DL to engage in a conversation about promotion of the Beacon project and the importance of reporting receiving a flu shot in the EMR. The DL forwarded the request to MIP and Dr. Ball to see if there were any planned CDC advertisements for the upcoming flu season. Other workgroup members will work with the Beacon project to promote the importance of updating EMR with recent vaccinations when administering at local clinics.</p> <p>Substance Abuse: The district is planning to promote through its partners the next prescription drug take back day in September</p> <ul style="list-style-type: none"> <li>➤ Whether activities were able to be completed on schedule Activities were completed on schedule.</li> <li>➤ Successes achieved Obesity- Completed inventory ready to promote website at September 14 DCC/ CTG kick-off meeting Flu &amp; Pneumococcal- Partners are willing to help disseminate the patient message to update flu vaccinations in the patients' EMR Substance Abuse-The taskforce has not met this summer.</li> <li>➤ Barriers encountered Obesity-none at this time</li> </ul>	

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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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<p>Flu &amp; Pneumococcal- none at this time Substance abuse- none at this time.</p>
<p><b>Progress with Community Transformation Grant:</b></p> <ul style="list-style-type: none"> <li>➤ Activities planned for completion during the quarter <ul style="list-style-type: none"> <li>○ September 14<sup>th</sup> CTG Kickoff event in collaboration with the DCC meeting</li> <li>○ September 20<sup>th</sup> and 21<sup>st</sup> Recess Rocks! Active Classroom Training held in collaboration with local partners and schools</li> <li>○ October 1<sup>st</sup> Color Me Healthy Childcare training on Physical Activity and Nutrition for district licensed childcare providers</li> </ul> </li> <li>➤ Whether activities were able to be completed on schedule <ul style="list-style-type: none"> <li>○ Activities were completed on schedule</li> </ul> </li> <li>➤ Successes achieved <ul style="list-style-type: none"> <li>○ Three trainings planned to reach out to the district before end of Y1</li> <li>○ Established Let's Go! Penobscot Dissemination Partnership with Let's Go 5210 to allow more district wide recognition and collaboration for schools and childcare settings</li> <li>○ Currently have 22 childcare sites enrolled as "CTG Sites" throughout the district</li> <li>○ Met with several individuals throughout the district to explore interest around ACETS</li> </ul> </li> <li>➤ Barriers encountered <ul style="list-style-type: none"> <li>○ Time crunch has put pressure on trainings and resource purchases</li> <li>○ How work will look with schools is still unknown; still waiting on guidance from the state on what this piece will look like</li> </ul> </li> </ul>
<p><b>Structural and Operational changes, including updates in membership.</b> Amber Derosier joined the DCC and is a 5-2-1-0 coordinator of EMHS. Dale Hamilton resigned as DCC board chair but will remain a DCC member. The DCC obesity committee has been joined with the CTG PAN committee.</p>
<p><b>In-district or multi-district collaborations:</b></p> <ul style="list-style-type: none"> <li>➤ Multi-district Obesity Workgroup tool</li> <li>➤ Drug Take Back Initiative-September 2012</li> <li>➤ Drug Diversion Alert Collaboration with Penquis and Aroostook PH Districts</li> <li>➤ Joint DCC Substance Abuse Committee and Bangor Public Health Advisory Board Substance Abuse Task Force Meetings</li> <li>➤ Community Transformation Grant</li> <li>➤ Multi-district CTG call including, Aroostook, Penquis and Down East Districts</li> </ul>
<p><b>Other topics of interest for SCC members:</b> None at this time</p> <ul style="list-style-type: none"> <li>➤ Bylaws and structure of the DCC in light of HMP funding and reconfiguration</li> </ul>

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