

The Maine State Health Improvement Plan 2013-2017 Executive Summary



Maine Center for Disease
Control and Prevention
An Office of the
Department of Health and Human Services

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Executive Summary

The Maine Center for Disease Control and Prevention (Maine CDC), an office of the Maine Department of Health and Human Services (DHHS), is responsible for providing essential public health services that preserve, promote, and protect health. Many organizations, both public and private, share this goal. This Plan reflects the public health priorities of the Maine CDC and Maine DHHS, with significant input from our public health partners.

The State Health Improvement Plan (SHIP) is designed to improve the health of all Maine people. It focuses on six health priorities, with goals, objective, and strategies for achieving measurable success over the next three years. The first four priorities are categorical, or subject-specific, and the remaining two priorities are focused on public health infrastructure:

Categorical	Infrastructure
Immunizations	Inform, Educate and Empower the Public (Essential Public Health Service # 3)
Obesity	
Substance Abuse and Mental Health	Mobilize Community Partnerships (Essential Public Health Service # 4)
Tobacco Use	

The Maine CDC developed priorities and objectives for the SHIP by using data from:

- 2010:**
Local Public Health System Assessments
- 2011:**
District Public Health Improvement Plans;
State Public Health System Assessment;
Healthy Maine 2020
- 2012:**
State Health Assessment
- 2012-2013:**
Updated District Public Health Improvement Plans

Further input was gathered from:

- Private stakeholders, such as health care providers and community members
- Maine CDC staff
- Other Maine DHHS staff
- Other public stakeholders, including colleagues throughout local and state governments

Members of both Maine CDC leadership and the Statewide Coordinating Council for Public Health (SCC) selected priorities, based on criteria developed by the SCC. These priorities were then approved by Maine DHHS leadership and the SCC.

Six workgroups of subject matter experts developed measurable objectives, which were also approved by DHHS and the Statewide Coordinating Council for Public Health. These workgroups also developed strategies and identified potential partners for implementation.

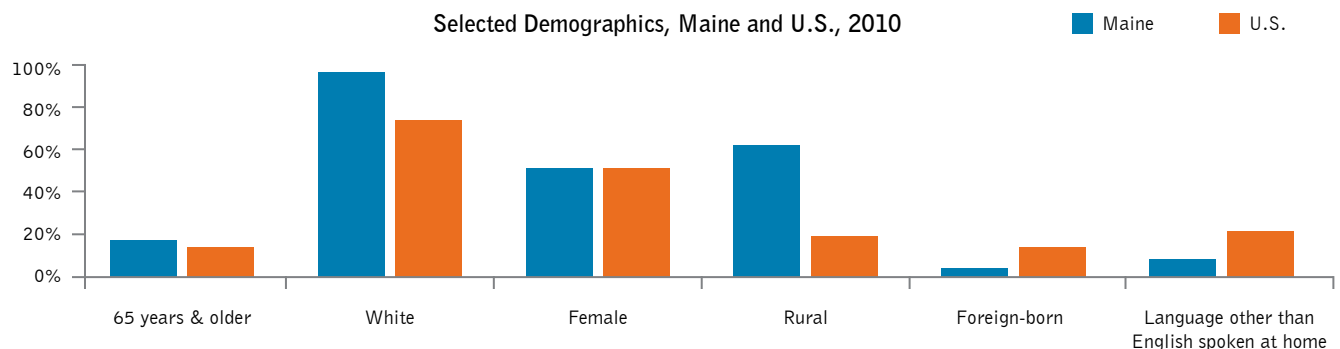
The final review process included Governor LePage and his staff, Maine DHHS leadership, and the Statewide Coordinating Council for Public Health.

The State of Maine's Health

Maine is a rural, older, primarily white, English-speaking state. Some of these factors can pose unique public health challenges, including higher rates of chronic disease, and fewer resources for low-English-proficiency residents.

According to the U.S. Census:

- 61% of Maine's population lives in rural areas.¹
- Of Maine's 1.3 million residents, 17% are over 65 years of age, compared to 14% nationally.²
- The state's population is gradually becoming more racially diverse: the 2010 census shows Maine is 95% white, decreasing from 97% in the 2000 census.³
- Furthermore, 3% of the state's population is foreign born, compared to 13% nationally. 7% speak a language other than English at home.
- Women represent 51% of Maine's population.²



¹ U.S. Census Bureau. Growth in Urban Population Outpaces Rest of Nation, Census Bureau Reports, 2010. Available at: <http://www.census.gov/geo/reference/ua/urban-rural-2010.html>

² U.S. Census Bureau. Maine People QuickFacts, 2012. Available at: <http://quickfacts.census.gov/qfd/states/23000.html>

³ U.S. Census Bureau. 2010 Census Interactive Population Search. Available at: <http://www.census.gov/2010census/popmap/ipmtext.php?fl=23>

Maine State Health Improvement Plan Priority Areas

Immunizations

Increase youth and adult immunizations

- Increase routine childhood vaccinations
- Increase routine adolescent vaccinations
- Increase human papillomavirus (HPV) vaccinations
- Increase school-based access to influenza vaccinations
- Promote standard practices for tetanus, diphtheria, and pertussis (Tdap) vaccinations among obstetric providers
- Increase pneumococcal vaccinations among seniors

Obesity

Reduce youth and adult obesity

- Reduce consumption of sugar-sweetened beverages
- Increase consumption of fruits and vegetables
- Increase adult physical activity during leisure time
- Increase youth physical activity
- Increase infant breastfeeding

Substance Abuse and Mental Health

Reduce substance abuse and improve mental health

- Increase developmental screening of children birth to three years of age
- Promote drug-prescribing protocols in health care settings
- Increase Screening, Brief Intervention, Referral and Treatment (SBIRT) services
- Increase depression and substance abuse screening in health homes
- Increase adoption of evidence-based suicide prevention, screening and assessment in health care and school settings
- Increase access to substance abuse and mental health services via primary care providers

Tobacco Use

Reduce tobacco use and exposure to tobacco smoke

- Increase access to and use of state tobacco treatment programs
- Increase number of smoke-free environments
- Reduce exposure to indoor tobacco smoke in homes
- Increase partnerships with organizations serving vulnerable populations to promote or increase awareness of tobacco treatment, prevention, and control resources.
- Increase youth involvement in anti-tobacco initiatives

Inform, Educate & Empower the Public

Increase the community's awareness of public health

- Implement a system for distributing public health messages
- Increase use of plain language best practices

Mobilize Community Partnerships

Increase the community's active involvement in public health

- Increase community engagement in public health activities
- Increase awareness of the value of public health



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