

District: **Aroostook District** Date: June 18, 2020

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/mecdc/public-health-systems/lphd/district8/council-main.shtml

- > February 5, 2020: DCC Presentation: Electronic Nicotine Delivery Systems (ENDS/Vaping Related Illness), Kristen McAuley, Director, Prevention and Training, Center for Tobacco Independence, MaineHealth March 6, 2020: DCC Coronavirus Partner RoundTable Updates (Emergency Preparedness, Hospitals,
- Social Service Agencies, Primary Care and Behavioral Health)
- Dates of note in Aroostook District:
 - Next DCC Meeting: August 5, 2020
 - Next Steering Committee Meeting: July 1, 2020
 - Next Healthy Aging Committee Meeting: June 27, 2020
 - Next Public Heath Emergency Planning Committee Meeting: July 9, 2020

Ongoing or upcoming projects or priority issues:

> Aroostook DCC convened an Application Review Committee for MYANS Aroostook Youth Engagement Contract, applications reviewed, recommendations made & awarded accordingly.

Progress with District Public Health Improvement Plan:

- > Aroostook DCC wrote a Letter of Support for Northern Light, AR Gould Hospital's application for Colorectal Cancer Screening funds
- Aroostook DCC wrote a Letter of Support for AMHC's application for Department of Justice, Office for Victims of Crime (FY) 2019 funding opportunity.

Structural and Operational changes, including updates in membership.

- > Changes in membership: Bill Sheehan is now the representative from DEP; Jamie Walsh, RN is now the representative from the VA.
- May 14, 2020 a new Public Health Emergency Planning Committee created as a collaboration with Aroostook EMA convened it's first meeting.

In-district or multi-district collaborations:

> The Healthy Aging Committee; project group progress: Workforce Workgroup - collaboration between OADS, PHN, Primary Care, hospitals & MeCDC assessing current tools being used in the field for determining Wellbeing/Cognitive Competency; Housing Workgroup—Aging in Place Safety Checklist review in process. > April 29 & April 30, 2020: Aroostook DCC facilitated technology and logistics for a Public Health Nursing and Aroostook Mental Health Center collaboration. Donning and Doffing PPE Trainings from PHN Nurses to AMHC Staff.

Other topics of interest for SCC members: None to report at this time.

District Name: Aroostook		

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

1

(4) Ensure that the essential public health services and resources are provided for in each district in the most efficient, effective and evidencebased 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 triba and tribal health department or health clinic



District: Central Date: June 18, 2020

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 The April 28 quarterly DCC meeting was a shorter meeting via Zoom and had 52 attendees. Our district Field Epidemiologist gave a COVID-19 and Infectious Disease Update and then the participants each contributed a brief update covering:

- ▶ Introduce yourself & where you're from
- ▶ How are you and your organization doing?
- ▶ Is there anything you need that we can help find?
- ▶ Is there anything that you would like to offer to others?

In addition, after our first district COVID-19 case on March 18, the Steering Committee has had a weekly call to discuss Situational Awareness and District Needs.

Ongoing or upcoming projects or priority issues: COVID-19 response, infection prevention, PPE provision, and assistance for organizations providing basic needs. Just starting back up with work on the Partners for Recovery (PFR/HRSA) Grant and hospital HRSA grants; Harm Reduction/ Needle Exchange capacity building and Naloxone distribution; and ACEs-Resilience training and resources.

Progress with District Public Health Improvement Plan (DPHIP): Activities planned for completion during the quarter and whether activities are able to be completed on schedule

- Use Central District Public Health Unit updates to communicate important information to DCC, LHOs, and partners added chief municipal officials at the start of COVID-19 response. Ongoing task with updates going out weekly as needed.
- ▶ Workgroups have been paused for the quarter to deal with COVID-19 response and new infection prevention working conditions. The Steering Committee has had a weekly call to discuss Situational Awareness, District Needs, and take care of time-sensitive DCC business.

Successes achieved

- ▶ 'District Donations, Financial Assistance, and Volunteer Opportunities' handout created and shared to help answer the question 'What can I do to help?' and to solicit scarce PPE. Updated weekly as needed.
- ▶ The ACEs-Resilience Workgroup updated the district training and resources handout for distribution
- ▶ The District-Wide Prevention Messaging Workgroup developed a new playlist for the KVCAP buses.

Barriers encountered

• Disruption in usual way of doing business and lack of staff time for other DCC tasks due to COVID-19 pandemic response.

Structural and Operational changes, including updates in membership: none this quarter

In-district or multi-district collaborations: COVID-19 response with County EMAs and regional EMS; prevention assistance for organizations serving vulnerable populations (e.g., shelters, long term care, congregate living, behavioral health providers, at-risk youth programs, food/meals programs, libraries)

Other topics of interest for SCC members: Consensus is that conducting a LPHSA during a pandemic will not give accurate or comparable results and would not be a valuable use of resources at this time or in the near future. In-person meetings have also been suspended to model good infection control practices.



District: Cumberland Date: 06/15/20

For agendas and copies of minutes, please see district's website at: http://www.maine.gov/dhhs/mecdc/public-health-systems/lphd/district2/council-main.shtml

Brief review of decisions and outcomes from Executive Committee and DCC meetings held since last SCC meeting:

January DCC Meeting:

Thirty-nine people attended the January 17th full Council meeting, held in South Portland. Election results were shared:

CDPHC 2020 Election Results:

Cathy Bean - CDPHC Chair

Carl Toney - CDPHC Vice Chair

Newly-elected CDPHC Members - Abdullahi Ali (Gateway Community Services), Joseph Chappell (Cumberland County Emergency Management), Ellen Freedman (MaineHealth), Maggie Gamble (United Way), Elizabeth Jackson (Greater Portland Health), Inza Ouattara (Catholic Charities), Cathy Pinkham (Local Health Officer, Bridgton and Harrison), Josh Pobrislo (Local Health Officer, South Portland), Barb Price (Consumers for Affordable Healthcare), and Helen Twombly (Local Health Officer, Sebago)

The Treasurer reported that after working with Consultant Chioma Nnaji, the CDPHC currently has discretionary funding of \$11,752.76 remaining from the \$23,838 that was carried over.

Relating to the CDPHC's focus around Youth Mental Health and ACEs, **Stephanie Eglinton** of Maine Children's Alliance (MCA) shared information on priorities and the upcoming census.

Council members and interested parties were briefed on the upcoming Local Public Health System Assessments.

COVID-19 Response:

Cumberland County has had the highest number of COVID-19 cases in the State, and this trend continues. As such, the District Liaison, DCC Chair, Executive Committee members, and key Council members and interested parties have had their work focused solely on pandemic response since the year began. CDPHC cancelled meetings in January and March.

May EC meeting:

On May 15th the Executive Committee met and decided to hold a virtual Council meeting – postponing it by a week.

May DCC: On May 29th, 42 people participated in a full Council meeting. We opened the meeting with an update on asylum seekers, many of whom have settled in Brunswick. The meeting was an opportunity for all participants to provide an update on activities around, or in spite of, COVID-19.

The EC is expected to meet soon, and the date of the next full council meeting is tbd.

Ongoing or upcoming projects or priority issues:		
The first session of the Local Public Health Systems Assessment took place at the Westbrook Public Library on March 11 ^{th.} The second session, scheduled for May 6 ^{th,} was cancelled.		
Progress with District Public Health Improvement Plan:		
Structural and Operational changes, including updates in membership:		
In-district or multi-district collaborations:		
Other topics of interest for SCC members:		

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 tribal health department or health clinic

Form: SCC-DCC Update_9 October 2015 2



Template updated 03/2015 (CTG section removed)

Date: June 18, 2020 **District: Downeast**

Brief review of decisions and outcomes from Executive Committee and DCC meetings held since last SCC meeting. SCC meeting materials and general information can be found at http://www.maine.gov/dhhs/mecdc/public-healthsystems/lphd/district7/council-main.shtml.

District Public Health Council Meetings

January 17, 2020 in Cherryfield: 22 Attendees (8 remote)

Kev Action:

- Deeper Dive: Health Literacy
- LPHSA overview; Cancer Priority
- Distribute State Opioid Response Plan and State Economic Development Plan

May 15, 2020 all Virtual Meeting: 17 Attendees (All Remote)

Key Action:

- Deeper Dive: Coronavirus Update
- Committee Updates: Palliative Care & Health Literacy

2020 Meetings: 1/17, 5/15, 7/19, 9/18 and 11/20

Executive Committee Meetings

December 20, 2019

- 2020 Strategic Planning; Meeting Agendas, Committees, & Evaluations
- LPHSA Planning

February 21, 2020

- Health Literacy Committee
- **Project ECHO Awareness**
- Palliative Care Summer Summit Committee

April 17, 2020

Coronavirus Update

Ongoing or upcoming district projects or priority issues:

Local Public Health Systems Assessment (postponed)

Downeast District June 12, 2020 1

¹Section 5. 22 MRSA c. 152

A district coordinating council for public health shall:

- Participate as appropriate in district-level activities to help ensure the state public health system in each district is ready and maintained for accreditation:
- 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
- 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 triba and tribal health department or health clinic



Progress with District Public Health Improvement Plan:

- Cancer: worksite healthcare initiative to increase screening mammograms for employees.
- Facebook: Social Media daily checked and kept up to date with Downeast Public Health related issues.

Structural and Operational changes, including updates in membership:

- Newsletters: Reproductive Health (February 2020); Census (February 2020); Personal Preparedness (April 2020); Asthma and Allergy Awareness (May 2020); Men's Health (June 2020)
- Membership Updates and Orientation

In-district or multi-district collaborations:

- **Palliative Care Summit**
- Medical Reserve Corps Informational Meetings
- Washington County Basic Needs Committee
- Downeast Substance Treatment Network and Washington County Substance Use Response Collaborative (Collaborative work focused on clinical and behavioral health treatment and recovery supportive programming in Washington and Hancock Counties)

Downeast District June 12, 2020 2

¹Section 5. 22 MRSA c. 152

A district coordinating council for public health shall:

- Participate as appropriate in district-level activities to help ensure the state public health system in each district is ready and maintained for accreditation:
- Provide a mechanism for district-wide input to the state health plan under Title 2, section 103:
- Ensure that the goals and strategies of the state health plan are addressed in the district; and
- 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





District: Midcoast Date: June 18, 2020

Brief review of decisions and outcomes from Steering Committee and District Coordinating Council (DCC) meetings held since last SCC meeting.

- At the February 11, 2020 Midcoast Public Health Council meeting, Korey Pow, Maine Integrated Youth Health Survey Project Coordinator (MIYHS), spoke about Midcoast MIYHS results and shared successes and challenges. Sue Campbell, Project Director for OUT Maine, presented on the creation of welcoming and affirming communities in the Midcoast region, including the work they do under the MYAN contract. An update was also provided about the Local Public Health System Assessment (LPHSA) meetings, which were postponed due to COVID 19 response.
- District Council members, community partners and District staff have been engaged in COVID 19 response actions since mid-March; Council meetings have been placed on hold.
- The next Steering Committee meeting is scheduled for August 11, 2020, to prepare for a DCC meeting on September 8, 2020.

Ongoing or upcoming projects or priority issues:

- At the most recent Steering Committee meeting, the following topics were discussed, in addition to the ongoing workgroup priorities (physical activity/obesity, lead, mental health):
 - Brown tail moth, tick-borne diseases, and rabies
 - Food security
 - Risk communication

Progress with District Public Health Improvement Plan:

• The LPHSA process temporarily took the place of DPHIP discussion; most recently, COVID 19 response actions and planning has diverted partner resources.

Structural and operational changes, including updates in membership:

• District operations have focused on the Covid-19 response.

In-district or multi-district collaborations:

- The MPHC Council Coordinator provided technical assistance for the Medical Reserve Corps' June webinar, which included presentations by Jennifer Frenette, Regional Liaison for HHS ASPR, Don Dumont, Warning Coordination Meteorologist for the National Weather Service, and Dr. Glen MacPherson, Flight Surgeon for the US Coast Guard/US Public Health Service.
- Midcoast SCC Representative Melissa Fochesato & Midcoast DL Drexell White convened a Zoom meeting in May to discuss Covid-19 impacts on the New Mainer & Immigrant populations.

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.





District: Penquis Date: June 18, 2020

Brief review of decisions and outcomes from Steering Committee and DCC (District Coordinating Council) meetings held since last SCC (State Coordinating Council) meeting.

The last Penquis DCC meeting was held on June 5, 2020. The previous meeting on March 6 was replaced by an LPHSA meeting. Agenda items at the June meeting focused on transportation planning grant application, the postponed Local Public Health System Assessment process, and district and state-level COVID 19 response. The next DCC meeting will be held on September 11, 2020.

Ongoing or upcoming projects or priority issues:

- Transportation initiatives
- Oral Health
- Shared CHNA
- COVID 19 response and re-opening planning

Progress with District Public Health Improvement Plan:

• The LPHSA process temporarily replaced discussions about DPHIP work; COVID 19 response has diverted a lot of the State's resources around district-level work and most district members' time and attention.

Structural and operational changes, including updates in membership:

- Gabe O'Brien, Northern Districts Coordinator, Maine Youth Action Network
- Yvette MacArthur, Project Coordinator, Youth Programs, Penquis CAP
- Karen Sites, Youth Project Coordinator, Restorative Justice Facilitator, Penquis CAP

In-district or multi-district collaborations:

- DOT HOPE grant: Several DCC members, including the lead applicant, EMDC, are collaborating on a transportation planning grant application. If awarded it will provide funding to explore engineering, sustainability and fiscal feasibilities for expanded and innovative transportation solutions in some of the most economically disadvantaged parts of the Penquis District. This may include expanded broadband access and affordability to improve telecommuting, the expansion and improvement of the *Getting There* website to facilitate ride sharing, bus services, environmentally sustainable solutions and/or other possibilities that arise during the assessment and surveying process. The proposal builds on work done in the Penquis District for the TIGER 2 grant awarded previously, and the group is considering applying for additional funding in July.
- Mask Up for Me: In response to partial compliance with the state executive orders regarding
 mask-wearing as part of the COVID 19 response efforts, district collaborators and the
 Community Health Leadership Board created a website, https://chlb.me/mask-up-for-me/, at

Penquis District Page 1 of 2 June 18, 2020

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

- which information and resources can be obtained and shared widely to help to promote making the healthy choices around mask wearing the easy choice. Along with the information and resources, there is a social media campaign ongoing which helps to promote those who are wearing masks and why they are choosing to do so.
- Shared CHNA: the advisory board is currently meeting to discuss metrics, potential virtual
 forum options and the requisite technology, to gather data about significant health needs,
 and to create an RFP for one or more vendors for the forums coming up in the fall of 2021.
 The next big step will be the distribution of the RFPs in August; after that, local planning
 teams will engage in early 2021 to identify locations and invitees; and then the details and
 logistics will be worked out over the course of 2021.

Other topics of interest for SCC members:

- COVID 19 healthcare response: DCC healthcare members report that while many of them are
 in the process of re-opening to the public or are fully re-opened, the public has been slow to
 return, due to fears about COVID 19. Most agencies/facilities also report that they plan to
 continue offering telehealth services, even after the patient volume has re-stabilized. The
 rollout of telehealth services was a big, unexpectedly quick success driven by the pandemic.
- Penquis District prevention services contracts, particularly tobacco use prevention contracts, have gotten some statewide notice for their success at achieving their objectives in face of the COVID 19 disruptions.

Penquis District Page 2 of 2 June 18, 2020

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



District: Tribal District

Date: 6/18/2020

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

Latest DCC Meeting was held on November 11, 2019. Next meeting will be in July 2020.

Ongoing or upcoming projects or priority issues:

- Tribal Liaison continues to convene quarterly DCC meetings. Next Tribal DCC meeting is in July 2020.
- o Recovery workgroup continues to meet regularly.
- Tribal Data sharing agreement with the Maine CDC regarding COVID-19 data surveillance in progress

Progress with District Public Health Improvement Plan (DPHIP):

- Community Health Improvement Plans (CHIP) for each Tribal community are completed or in progress
- Tribal Data Sub-Committee continues to meet weekly to discuss data relevant to DPHIP
 - Work with WPH continues to address prevention activities with the Tribal District

In-district or multi-district collaborations:

- District Liaison will continue to attend Penquis, Downeast and Aroostook DCCs.
- In-District Collaboration:
 - ✓ DL and WPH join to address Data Sharing Agreements and their importance within the Tribal District as related to COVID surveillance

Other topics of interest for SCC members:

- Wabanaki Health and Wellness/WPH has secured funding related to COVID-19 for the Tribal communities, including, HRSA's Rural Tribal COVID-19 Response Program and SAMHSA's Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 and US CDC's
- Throughout the COVID-19 response, the Tribal District and Wabanaki Public Health have worked with the Tribal communities to provide support and meet the needs of community members during these difficult times.
 - ✓ This includes working with Ricker Orchards and Maine potato farmers to secure 6,000 pounds of apples and 15,000 pounds of potatoes, which were then distributed to each of the five communities. Healthy recipes were developed using apples and potatoes, which were then published via social media through the months of April and May.

Tribal District 1 6/18/2020

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 tribal health department or health clinic



- Tribal Youth Council meetings have continued meetings virtually four nights per week. The Penobscot, Indian Township and Sipayik youth councils meet weekly, with one night for youth from all communities to come together.
- ✓ WPH constructed and distributed 300 gratitude journals to the Penobscot community. Penobscot families are encouraged to write one gratitude message per day either on their own or as a family.
- ✓ The Colored Paper Project-This project was designed to assist elders in communicating with WPH staff and Community Elder Advocates on their physical and mental statuses, as well as any other needs they have while engaging in social distancing practices. WPH staff delivered instructions for elders to participate along with sheets of red, yellow, green, and blue papers (each color has a specific meaning). Elders are asked to place a sheet on their doors to communicate their status with staff. WPH staff travel along each of the Passamaquoddy reservations twice a day to check on the statuses of elders.
- ✓ Wellness Kits Project-WPH staff constructed and delivered 360 Elder Wellness Kits to the Passamaquoddy communities which included: toilet paper, water, gloves, mask, and soap, along with an activity item (cards, crossword, etc.), sanitizing spray, a crisis number card, and colored paper for the Colored Paper Project. The masks included in these kits were handmade by WPH staff and community volunteers.
- ✓ Hand Sanitizer Delivery-WPH worked with community partners to secure a total of fifteen 5-gallon jugs for distribution across the Wabanaki health center and public safety departments in each community.
- ✓ Virtual Wabanaki Recovery Meetings are happening every evening at 7:30 pm via Zoom. This includes Wellbriety, Alcoholic Anonymous and Narcotics Anonymous meetings. Along with other activities to bring community members together, including an Open Mic Night and a Beginner's Beading Class.
- ✓ Virtual Passamaquoddy Language Classes every Tuesday at 2pm.

Tribal District 2 6/18/2020

22 M.R.S.§412 (2011).

A. A district coordinating council for public health shall:

A-1. The tribal district coordinating council 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.

⁽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 tribal health department or health clinic

District: Western

June 2020

For agendas and copies of minutes, please see district's website at: http://www.maine.gov/dhhs/boh/olph/lphd/index.shtml

Brief review of decisions and outcomes from Executive Committee and DCC meetings held since last SCC meeting:

Details around the LPHSA meetings were discussed, including the target audience, the state's efforts in the State Public Health Systems Assessment (SPHSA), the 10 Essential Public Health Services and how the LPHSA differs from the Maine Shared CHNA. Members were asked to volunteer on a subcommittee; please email Jamie at Jamie.L.Paul@Maine.gov if you would like to participate. Members are encouraged to attend the LPHSA meetings.

Legislative Update: Ned Claxton, Maine Senate District 20, shared updates on public health bills and answered questions from around the table. He discussed bills around the Medicaid expansion, paid leave, immunizations, marijuana, mental health, long-term care systems, and early childhood intervention among others. He highlighted the historic passing of four bills in one day regarding reducing the cost of medications and noted that his bill was carried over involving medication donation and redistribution. The next legislative session starts January 8th. To reach Ned, please email:

<u>Ned.Claxton@Legislature.Maine.gov</u> or visit: <u>www.legislature.maine.gov/senate</u>. Members discussed interest in having Ned back for a future meeting.

Ongoing or upcoming projects or priority issues:

LPHSA was held on 2/28/20 in lieu of regularly scheduled DCC meeting. The other 2 scheduled LPHSA meetings were canceled due to COVID-19.

Local Public Health Systems Assessment: Many questions and comments regarding the LPHSA were addressed earlier in the agenda. It was shared that the intended workload for the subcommittee includes connecting with potential participants. A preliminary list of volunteers was noted as Mike H., Steve, Nate and Andrea. Others wanted to confirm their participation later. A Doodle Poll will be shared to set up calls for the subcommittee.

Progress with District Public Health Improvement Plan:

Statewide Coordinating Council for Public Health

District Coordinating Council Update

Structural and Operational changes, including updates in membership:

In-district or multi-district collaborations:

Maine Youth Action Network (MYAN) Grant and Annual Leadership Conference Update: Sabrina LoPizzo shared an update on the annual youth leadership conference for middle and high schoolers that was held in Bangor, ME. Focused on the importance of the youth voice, students from Rangeley Lakes Regional, Mt. Blue High, Mt. Valley High, and Lewiston Middle Schools represented Western District. Some of the attendees presented on topics such as - navigating conversations around coming out, the Yellow Tulip Project, and the power of youth voices among others. Feel free to contact Sabrina at slopizzo@fchn.org for more information regarding MYAN trainings, resources and support, or visit them online at: www.myan.org.

Other topics of interest for SCC members:

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 tribal health department or health clinic





District: York Date: 06/18/2020

For agendas and copies of minutes, please see district's website at: http://www.maine.gov/dhhs/boh/olph/lphd/index.shtml

Brief review of decisions and outcomes from Executive Committee and DCC meetings held since last SCC meeting:

The Executive Committee continues to meet regularly.

The council worked to support the Local Public System Assessment. The first meeting took place on March 2^{nd} , 2020 and had great participation. The second meeting has been postponed due to the Covid-19 response.

The council held a Zoom meeting on June 1st focusing on mental health. Clay Greybeal PhD. MSW presented on "From Problems to Possibilities". This was a well-attended meeting with 34 participants.

Ongoing or upcoming projects or priority issues:

Healthy Living Collaborative:

The previous meeting featured Chris Pasternak, Wells-Ogunquit School Nutrition Director. He shared the many great works happening in their program including but not limited to:

- o Increasing/strengthening partnerships with local farms for farm to school opportunities.
- o Increasing fresh fruit and vegetable consumption with participation in a DOD Fresh Program
- o Decreasing food waste with the addition of Food Share tables, while also increasing the availability of healthy snacks to students wishing to utilize.
- o The addition of a breakfast cart to increase breakfast perception and participation
- We shared updated recommendations from the Maine Obesity Advisory Council
- Discussed purpose of our council based on Maine Prevention Services goals and intertwining our own visions and goals.
- Opportunities to how our group can help each other:
- o SNAP-Ed: POP club needs funding sources to help with sustainability
- o WIC: enrollment is down, continued support and referrals is appreciated
- o Hannaford: Class trips/tours are under-utilized. Referrals to families and community programs would be helpful for store demos. They offer MyPlate Guiding Star Tours, Diabetes and Heart Health Tours for adults, and more!! Up to date class schedules can be found on their webpage

Progress with District Public Health Improvement Plan:





Structural and Operational changes, including updates in membership:

Meagan McCue from Caring Unlimited has joined the council

In-district or multi-district collaborations:

Other topics of interest for SCC members:

The York County District Liaison, in partnership with many stakeholders, is convening a task force to work on Alzheimer's and Dementia issues within the district. A cognitive assessment pilot project being done by Southern Maine Healthcare, and working towards district readiness for implementation of the Bold Act. Currently this work is on hold due to the Covid-19 response.

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