## Central DCC District Public Health Improvement Plan Progress Summary 2013-15



Priority Issue	District Need/ Problem/Focus Area	Strategy/Activity	Status
Mental Health & Substance Abuse	Identify and assist in coordinating existing and emerging initiatives targeting the integration of behavioral health services in the primary care setting.	Provide access to the most current list of substance abuse treatment agencies.	ongoing (via Healthy Northern Kennebec website)
		Identify all primary care practices with integrated mental health and substance abuse care	done (2014)
		Provide brief definitions of the integration activities/ initiatives using resources from Maine Health Access Foundation (MeHAF).	Update Provided to include Health Homes (2015)
	Identify and promote opportunities that exist for coordination of care. Perform this within available resources by enhancing communications/ information sharing	Align with two State Health Improvement Plan (SHIP) goals – referencing coordination of care	ongoing
		Link with Healthy Maine Partnerships (HMPs), identify which HMPs are promoting Screening, Brief Intervention, and Referral to Treatment (SBIRT) and identify ways to support adoption across the District.	Identification completed 2015 Supporting HealthReach pilot of SBIRT at two Kennebec County sites & addition to electronic medical records (EMR)
	Provide Tobacco-Free Policy and Cessation Support to mental health and substance abuse agencies and primary care practices with integrated mental health and substance abuse care	Disseminate information about trainings and resources Engage with agencies and practices identified as ready for the tobacco policies and cessation supports.	done (2014) continue to disseminate information
Physical Activity & Nutrition	Physical inactivity is a marker of poor health All children achieve at least 60 minutes per day and all adults achieve at least 150 minutes per week of moderate to vigorous physical activity.	Implement Community Transformation Grant (CTG) assess, train, and improve practice at Early Care & Education and School sites; communicate important messages and good Ideas; recruit partners	done (2011-14 - ended 1 year early) 48 childcare sites & 12 schools made significant improvements
		Add Active Community Environments Objective/work to CTG Implementation; form local team(s)	done (2014)
Oral Health	Children with no dental care provider Hygiene education for children	Form DCC Oral Health Workgroup	done, ongoing
		Hold Oral Health Screening Event in Somerset County	done (2014)
		Assess need & locations for future oral health screenings	shifted focus to Community Health Worker (CHW) model
			continued on next page

á	Screening & preventive care for children & adults Reconstructive care for adults	Develop and implement a strategy to increase the number of primary care practices using 'From the First Tooth'	reviewed MaineGeneral's strategy, training data, and utilization rates; piloted strategy for increasing participation (2014) used Maine Oral Health Funders grant to conduct district assessment and draft plan (2014) currently Implementing plan (2015- 2019) to expand care in clinical settings & use CHW to work with low socioeconomic status parents
		Seek resources for increased access, prevention, and services in the district	4-year Maine Oral Health Funders Grant awarded (2015)
From 2011-13 D	District Public Health Improveme	nt Plan (DPHIP)	
Vaccination Coordination	Vaccination Communication, Coordination, & Preparedness	<ul> <li>Formed Vaccination Workgroup to:</li> <li>Serve as vaccination contacts and communication network for the Central District</li> <li>Distribute vaccination information in the district</li> <li>Develop/identify consistent, useful, vaccination messages for use in the district</li> <li>Support and promote district vaccination efforts</li> <li>Support public health emergency readiness and response efforts</li> </ul>	ongoing
Communication	Consistent Messaging	Member updates at quarterly DCC meetings Use District Public Health email updates to communicate important information to DCC, Local Health Officers (LHOs), & partners	ongoing

**Central District Coordination Council (DCC) Vison:** A healthy population served by comprehensive, well-coordinated, public health services

## **DPHIP Purpose:**

- 1) Improve health of district residents
- 2) Improve the district public health system
- 3) Inform the State Health Improvement Plan

**DPHIP Guiding Principles/Criteria:** 

- Maximize impact & use of limited resources
- Use evidence based strategies & population-based interventions
- Involve multiple sectors
- Address district disparities
- Strengthen & assure accountability (measureable)
- Best addressed at the district level
- Focus on prevention
- Data driven