Statewide Coordinating Council for Public Health
District Coordinating Council Update

Template updated 03/2012

District: Down East
Date: 22 March 2013

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:

DCC Meetings
January 25 at Ellsworth & Machias DHHS Offices connected via videoconference with nineteen participants.
- DCC Growth: created draft mission and vision statements.
- Reviewed Phase 1 DPHIP Infrastructure Priorities and voted to focus on EPHS # 3 & 7 and defocus on # 8 & 9.
- 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).
- Update on Tribal Health Program including new staffing and roles.

March 22 at Maine Seacoast Mission in Cherryfield.
- Will utilize most of time for reviewing DPHIP strategic issues and criteria for prioritization.
- Will vote for top three strategic issues and have work groups form to define each.
- Updates Provided for Tribal, SCC, and CTG.
- Planning Committee looking at utilizing webinar for some future DCC meetings.
- Next scheduled DCC meeting: May 24, 2013.

Ongoing or upcoming projects or priority issues:
- Regional Public Health Hazard Vulnerability Analysis.
- Identify and develop means to coordinate services and communicate with Vulnerable Populations.

Progress with District Public Health Improvement Plan:
- More than twenty strategies, data indicators, and activities organized into seven strategic issues.
- 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.
- Roadmap work plan developed to provide to DCC stakeholders an iteration of the timeline and work progression for the new DPHIP.
- Voting for top three strategic issues planned for March 22 DCC meeting.

1Section 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.
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.