Maine Center for Disease Control and Prevention
An Office of the Department of Health and Human Services
Paul R. LePage, Governor Ricker Hamilton, Acting Commissioner

Department of Health and Human Services
Maine Center for Disease Control and Prevention
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STATEWIDE COORDINATING COUNCIL FOR PUBLIC HEALTH
SEPTEMBER 21, 2017
AGENDA

10:00 – 12:00 Council Meeting
12:00-1:00 – Working Lunch (please feel free to bring your lunch)
Room 209B, 2nd floor, Augusta Armory, 179 Western Avenue
Call-in Information: Call number: 877-455-0244; Passcode: 879 303 3495

10:00 **Welcome**- *Patty Hamilton and Kristi Ricker, Co-Chairs*

Introductions *-All*

Review of Agenda - *Chair*
Review of prior meeting Minutes
Administrative Details

- **Steering Committee At-Large Members / Election Results**
- **Review Proposed Seat Nomination Process**

Update – Public Health and Health Services Block Grant *(Nancy Birkhimer)*

Update – State Health Improvement Plan *(Nancy Birkhimer)*

Break

SCC Approach to Public Health Issues *(Council Chairs Patty Hamilton and Kristi Ricker)*

District Reports (*District Representatives)*

Noon **Group Discussion, Budget Reductions to Fund for Health Maine,** (*Sheryl Peavey & Chris Pezzullo)*

Next Steps, Evaluation (*Patty Hamilton*)

1:00 **Adjourn**

The Statewide Coordinating Council for Public Health, established under Title 5, section 12004-G, subsection 14-G, is a representative statewide body of public health stakeholders for collaborative public health planning and coordination.

Department of Health and Human Services
Maine People Living Safe, Healthy and Productive Lives

Paul R. LePage, Governor Ricker Hamilton, Acting Commissioner

Department of Health and Human Services
Commissioner's Office
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Statewide Coordinating Council for Public Health
Meeting Minutes 6-21-2017
Augusta Armory, Room 205
10:00 a.m. – 1:00 p.m.

Welcome and introductions | Voting Member Attendance:

Seat	Roll Call	Name	Organization	Representing
1	Attending by phone	Betsy Kelley	Partners for Healthier Communities	York District
2	Planned absent	Courtney Kennedy	Good Shepherd Food Bank	Cumberland District
3	Attending	Erin Guay	Healthy Androscoggin	Western District
4	Absent	Joy Anne Osterhout	Pen Bay Medical Center & Waldo County General Hospital	Midcoast District
5	Attending	Joanne Joy	Healthy Capital Area	Central District
6	Attending	Patty Hamilton	Bangor Public Health	Penquis District
7	Planned absent Representing: Maria Donohue	Helen Burlock	Community Health & Counseling	Downeast District
8	Attending	Rachel Albert	University of Maine Fort Kent	Aroostook District
9	Attending	Christopher Pezzullo	Maine CDC	State Government
10	Planned absent	Michael Parks	DHHS, Office of Substance Abuse & Mental Health Services	Department of Health & Human Services
11	Attending	Emily Poland	Maine Department of Education	Department of Education
12	Attending	Kerri Malinowski	Department of Environmental Protection	Department of Environmental Protection
13	Attending by phone	Kenney Miller	Maine Health Equity Alliance	Essential Public Health Services
14	Vacant			Essential Public Health Services
15	Attending	Doug Michael	Eastern Maine Health Systems	Essential Public Health Services
16	Attending	Peter Michaud	Maine Medical Association	Essential Public Health Services
17	Planned absent	Meg Callaway	Charlotte White Center	Essential Public Health Services
18	Attending	Jennifer Gunderman-King	Westbrook College of Health Professionals	Essential Public Health Services
19	Vacant			Essential Public Health Services
20	Planned absent	Joanne LeBrun	Tri County EMS	Essential Public Health Services
21	Absent	Abdulkerim Said	New Mainers	Essential Public Health Services
22	Attending	Kristi Ricker	Maine CDC	Wabanaki Public Health District
23	Vacant			Essential Public Health Services

Attending:	11	Attending by Phone:	2
Planned absent:	5	Absent:	2
Vacant Seat:	3		
Total Council Makeup	23		

Total Voting Members Attending: 13; 11 = Quorum = Quorum Achieved

Interested Parties and Stakeholders Attending

James Markiewicz, Al May, Drexel White, Jessica Fogg/	Maine CDC, District Public Health
Sheryl Peavey, Nancy Birkhimer	Maine Center for Disease Control and Prevention

Agenda Review

- No changes

Minutes Review

- No changes

District Updates

- District updates are included in the meeting packet here

SHIP Update

- Nancy Birkhimer presented an update of State Health Improvement Plan (SHIP) activities. See presentation and background documents here .

- Meeting attendees broke into three groups – each group focused discussion on three of five priorities (page 6 of the presentation). Notes from the breakout groups are attached.

- Nancy invited SCC and other interested parties to continue the discussion via focused conference calls through the month of July. Survey Monkey was suggested as an alternate to conference calls.

- Action: Nancy will collate the information gathered today and discuss the best way to forward and finalize the discussion with MCDC leadership; SCC will be notified asap regarding next steps.

Governance Structure Review

- The March discussion/vote on accepting the Governance Structure revision was held over pending counsel on the question of the size of the SCC Executive Committee.
- Counsel has advised that the statute is silent on the matter of defining the Executive Committee size.
- Therefore the SCC Committee motion of an Executive Committee of five, including one chair, one co-chair, two elected members at large and the CDC Chief Operating Officer or designee was accepted.
- A motion was made to vote to accept the draft proposal by Seat 18, Jennifer Gunderman-King.
- The motion was seconded by Seat 6, Patty Hamilton.
- 13 voting members voted in favor of adopting the revised Governance. No votes were cast in opposition.
- The revised Governance was accepted by the Council.

Vacant Seats

- Dr. Pezzullo welcomed two new District representatives to the SCC; Courtney Kennedy has been appointed to Seat 2 by the Cumberland District Coordinating Council, and Joy Anne Osterhout has been appointed to Seat 4 by the Midcoast District Coordinating Council.
- Seats 14 and 19 remain vacant and are subject to appointment by the Membership Committee. It is the will of the Council to abide by the process described in the Governance document which places the appointments in the hands of the Membership Committee.
- Nominations will be taken electronically;

- Action: Seat appointments tabled until a nomination policy is drafted by the Executive Committee and will be subject to approval by the SCC membership. Council suggestions for the policy included the following:
  - Nominators shall secure the acceptance of the nominee;
  - Nominators shall gather the CV or resume of the nominee and forward to the Committee Secretary

Executive Committee Chair, Co Chair and Members

The responsibilities of the Chair and Co-Chair were defined as follows:

- The chair shall be responsible for representing the Committee and shall call to order and facilitate all SCC meetings. The Co-Chair is the designed backup.
- The Chair and Co-Chair shall serve a two year term with a maximum of three two year terms.
- At the March meeting, Patty Hamilton and Kristi Ricker were nominated as chairs. Helen Burlock was also nominated but subsequently withdrew from consideration.
- SCC agreed to formalize the appointment of Patty Hamilton to the seat of Chair and Kristi Ricker to the Seat of Co-Chair with a verbal vote.
- 13 voting members voted in favor of electing Patty Hamilton to the seat of Chair and Kristi Ricker to the seat of Co-Chair of the SCC. No votes were cast in opposition.
- Patty Hamilton and Kristi Ricker have accepted their positions as Chair and Co-Chair of the SCC Executive Committee.

The At-Large Seats stand to be filled.

- Nominees from the March meeting include Jennifer Gunderman-King, Erin Guay, Patty Hamilton, and Doug Michael.
- Patty Hamilton was determined ineligible as she has been appointed the Chair of the Committee.
- An informal suggestion was made and accepted to hold the vote for the two available At-Large Executive Committee seats electronically to support voter confidentiality.
- Action: Committee Secretary will distribute, electronically, a tool for use in electing two At-Large members from among the three nominees.

Legislative Report Question

An update on the status of the reports generated by the SCC was requested by Seat 12, Kerri Malinowski.

- Action: Committee Secretary will provide an update via email post-meeting.

Next Steps, Evaluation

- Committee members were asked to complete and return their evaluation forms.
- Next meeting 9/21/2017, 10am to 1pm, Maine State Armory

Adjourn

Motion to adjourn made by Seat 6, Patty Hamilton.
Motion seconded by Seat 16, Peter Michaud

Meeting adjourned at 2:05 pm

Statewide Coordinating Council for Public Health
District Coordinating Council Update

Template updated 03/2012

District: Aroostook District	Date: September 7, 2017

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

- Aroostook DPHIP Implementation project status reviewed; including financial awards, partners, and all submitted projects, products and documentation
- Dates of note in Aroostook District:
  - Next DCC Meeting: November 1, 2017
  - Next Access to Care committee Meeting: October 26, 2017

Ongoing or upcoming projects or priority issues:

- Continued work on Standard Operating Procedure
- Completion of Partnership Self-Assessment survey to gather partner feedback regarding our DCC strengths in the areas of synergy, leadership, administrative management, efficiency, and sufficient of resources.

Progress with District Public Health Improvement Plan:

- All DPHIP implementation funds contracted to community partners. All close-out reports received indicating progress toward measures identified in contractual Riders. All supporting documentation shared with DCC such as photographic evidence of change, brochures, pilot program implementation plans and numerical counts for FY 2016-2017. Overall 6 Cardiovascular projects, 2 Substance Abuse Prevention projects and 4 Healthy Weight projects were undertaken with 9 different partners.

Structural and Operational changes, including updates in membership.

- DCC approval to seat Erica McCrum, Maine Community Foundation as voting member.

In-district or multi-district collaborations:

- None to report this quarter

Other topics of interest for SCC members:

- Access to Care Committee is reviewing a National Academy of Medicine Discussion Paper regarding *Standardized Screening for Health-Related Social Needs in Clinical Settings* written by a team from Centers for Medicare & Medicaid Services

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22 M.R.S.§412 (2011).

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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

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Statewide Coordinating Council for Public Health
District Coordinating Council Update

District: Central	Date: September 21, 2017

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 At the July 25 DCC meeting we heard updates from our SCC Representative, DCC workgroups, and meeting attendees. Donna Guppy, Maine CDC Field Epidemiologist, gave a district Infectious Disease Update, and Joanne Joy presented on an available district LGBT Training Opportunity. We then had final presentations from our DPHIP implementation project contract awardees -- Substance Use and Adverse Childhood Experiences by Pulse Marketing, and Obesity by Public Policy Partners and Healthy Communities of the Capital Area; followed by questions and discussion. The group then approved adding Alternate Members to the DCC Bylaws.

Ongoing or upcoming projects or priority issues: refining strategies and workgroup charges to reflect loss of funding for DPHIP implementation; coordination with hospital Implementation Strategies; MGMC/ District Oral Health Implementation Grant CHW expansion to whole district and increasing/sustaining resources for community health workers; transportation services, gaps, and volunteer efforts; recruiting/maintaining sector membership; coordinating with recipients for the Maine Prevention Services contracts; vulnerable populations HAN; ongoing sustainability of successful initiatives

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 and DCC website to communicate important information to DCC, LHOs, and partners – ongoing task with updates going out weekly as needed
- Establish and implement DCC Vaccination Workgroup and communication network – ongoing
- The Substance Use & Mental Health Workgroup met before the July DCC meeting to discuss funding updates, new efforts in partner organizations, and creating a recovery coalition
- DCC Leadership has been reviewing workgroup charges and possible partnering alternatives to determine how to proceed with the elimination of funding

Successes achieved

- District Oral Health Grant increased to expand Community Health Worker services to cover the whole district

Barriers encountered

- Elimination of funding for DPHIP Implementation and District Coordinator staffing

Structural and Operational changes, including updates in membership: adding Alternate Membership to DCC Bylaws; updating Committee/Workgroup charges; ongoing review of membership and adjusting to turnover/filling gaps in sector representation; filling school nurse gaps in Vaccination Workgroup coverage; concerns expressed regarding capacity to continue school-based vaccination events for a variety of reasons

In-district or multi-district collaborations: Oral Health Grant; MaineGeneral Medical Center PICH Grant; Senior Transportation and Neighbors Driving Neighbors pilot; Poverty Action Coalition

Other topics of interest for SCC members: Steadily building participation in and awareness of the DCC has led to more interest in using the DCC to recruit partners and 'asks' to take on work as a district – a good success, but one that highlights our lack of resources to complete some work identified by the DCC.

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Statewide Coordinating Council for Public Health

District Coordinating Council Update

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

District: Cumberland	Date: 9/21/2017

For agendas and copies of minutes, please see district's website at:
http://portlandmaine.gov/218/Cumberland-District-Public-Health-Counci

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

The scheduled July 21st meeting of the full Council was cancelled, as many members had reported they would not be able to attend, and as district-level funding issues had yet to be settled.

District Coordinator, Robin Hetzler's contract with the City of Portland finished in August. Robin's work was greatly appreciated.

The Executive Committee met (with the exception of the DL) during the intervening period, when district-level funding cuts were announced, in order to have conversations about the future direction of the DCC. This was followed with a telephone call arranged with Maine CDC staff and members of the Cumberland DCC's Executive Committee on August 14th.

A subsequent Executive Committee meeting took place on August 28th with a discussion of how to move forward with DPHIP priorities and to plan the agenda for the next full Council meeting – scheduled for September 29th.

Ongoing or upcoming projects or priority issues:

There was some disruption of progress on district-level work while clarification was sought for EC members' questions about funding and engagement from the state, in the wake of cuts.

The DL will provide functional technical support to the DCC and EC moving forward. Workgroups for each of the DPHIP priorities, as well as for Advocacy and Sustainability, will be convened, and Council members will be encouraged to participate in at least one of these at the next full Council meeting, September 29th.

Progress with District Public Health Improvement Plan:

An annual meeting was held on June 26 as a follow up to SHNAPP community forums. Each of the DPHIP sub-recipients presented what they worked on in FY17. DHHS' State Health Officer attended as keynote speaker. DC and DL conducted further information gathering to inform the development of future DPHIP work plans.

A FY17 DPHIP infographic and annual report were designed, and was printed for dissemination at the June 26 annual meeting.

There were a total of 6 sub-recipients of DPHIP funds, implementing the four priority work plans. The District provided oversight on priority work plan implementation and the DC and DL conducted post-project interviews with DPHIP fund recipients to better determine what next steps were indicated for subsequent DPHIP work.

Structural and Operational changes, including updates in membership:

The Executive Committee continues to approach individuals from specific sectors, organizations and geographic areas to invite them to join the DCC.

The Council elected one new member at the May full Council meeting, a representative from incumbent organization MaineHealth Maine Medical Center CarePartners Program, Kate Herrick. Ms. Herrick is also standing for a position on the Executive Committee – which will be voted upon at the next full council meeting.

In-district or multi-district collaborations:

The Cumberland DL is participating in the Community Engagement Advisory Group for the Maine SCHNA.

Other topics of interest for SCC members:
N/A

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Statewide Coordinating Council for Public Health
District Coordinating Council Update

Template updated 03/2015 (CTG section removed)

District: Down East	Date: September 21, 2017

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/district7/index.shtml

District Public Health Council Meetings
July 28 at Cooperative Extension (Ellsworth) and Cooperative Extension (Machias) with fifteen participants (eleven in Ellsworth, three in Machias, and one by telephone).
The agenda action items:

- Deeper Dive: Hanley Intern Presented on Lung Cancer Project
- Year in Review of DPHIP Projects
- District Council Moving Forward
- Breast Cancer Screening Initiative

2017 Meetings: 1/27, 3/24, 5/26, 7/28, 9/22 and 11/17

Executive Committee Meetings
August 25 by conference call

- Finance Committee Minutes
- Executive Committee Retreat Action Steps
- DPHIP Priorities: Moving Forward
- District Council Meetings: Site, Timeframe, Agenda

June 30 in Milbridge Strategic Planning Retreat

- Resiliency
- District Priorities Focusing
- Evaluation of Year
- Priority Successes; Challenges
- Downeast Public Health Council Value

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[1]**Section 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
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Statewide Coordinating Council for Public Health
District Coordinating Council Update

Ongoing or upcoming district projects or priority issues:

- Emergency Preparedness Related
  - Medical Reserve Corp formation
  - Points of Dispensing Sites: Update MOUs, Site Plans, Exercises
  - Disaster Behavioral Health Team formation

Progress with District Public Health Improvement Plan:

- Overview of funded projects presented at July DEPHC meeting
- Finance Committee and Executive Committee ask that we focus on a few strategies during Year 2
- Some work being planned with resources for cancer prevention

Structural and Operational changes, including updates in membership:

- Council Meeting Evaluation and Value
- Executive Committee Retreat on Leadership

In-district or multi-district collaborations:

- Thriving in Place / Aging Task Force / Aging Population / Housing/Transportation/Services
- Drug/Alcohol Use: Downeast Substance Treatment Network and Washington County Substance Use Response Collaborative
- Food Security Networks (both counties)
- National Diabetes Prevention Program Lifestyle Coaching Program
- Stanford Chronic Disease Self-Management and Chronic Pain Self-Management Programs

Maine Community Health Needs Assessment (Maine CHNA):

- Name change from Shared Health Needs Assessment and Planning Process (SHNAPP)
- Set of data indicators have been prioritized for next assessment in 2019

Questions/Comments for SCC:

None at this time.

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Statewide Coordinating Council for Public Health - District Coordinating Council Update

Public Health
Prevent. Promote. Protect.

Template updated 03/2015 (CTG Section Removed)

District: Midcoast Date: September 21, 2017

Brief review of decisions and outcomes from Steering Committee and District Coordinating Council (DCC) meetings held since last Statewide Coordinating Council (SCC) meeting. For agendas and copies of minutes, please see District's website at: http://www.maine.gov/dhhs/mecdc/public-health-systems/lphd/district4/index.shtml

Steering Committee Meeting – August 8, 2017 – LincolnHealth Education Center, Damariscotta, ME

- *Reviewed and accepted District Assessment Reports in Youth & Adult Mental Health, Elevated Lead Levels, and Chronic Disease Self-Management Programs*
- *Reviewed the ten (10) mini grants completed to increase use, usability and awareness of low-to-no-cost-physical activity per District Public Health Improvement Plan (DPHIP) strategies*
- *Reviewed membership gap analysis and identified current Council vacancies*
- *Discussed impact of FY 18/19 funding cuts on the Council and its functions, and on public health work in the District*
- *Developed questions to be forwarded to Maine Center for Disease Control (Maine CDC) concerning funding cuts and the role of district councils*

District Coordinating Council (DCC) Meeting – September 12, 2017 at the Knox County Emergency Management Agency (EMA), Rockland

- *Discussed District funding cuts for FY 18/19, and identified potential strategies to continue work on the DPHIP*
- *Reviewed District Assessments completed by Medical Care Development Inc. concerning District DPHIP priorities of Youth, and Adult, Mental Health, Elevated Blood Lead Levels in one-to-three year olds, and Obesity (Chronic Disease Self-Management Programs).*
- *Received presentations from five of the ten mini grant recipients about work accomplished in the District concerning increased use, usability, and awareness of low-to-no-cost physical activity opportunities.*
- *Received updates from District Prevention Services partners.*
- *Reviewed membership gap analysis with intent to solicit membership in identified sectors.*

Remaining Meetings for 2017 - *Steering Committee – October 10th; DCC - November 14th*

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Statewide Coordinating Council for Public Health - District Coordinating Council Update

Public Health
Prevent. Promote. Protect.

District: Midcoast Date: September 21, 2017

Ongoing or upcoming projects or priority issues:

- *Develop strategies for implementing Assessment Reports' recommendations.*

Progress with District Public Health Improvement Plan:

- *Assessment Reports completed and accepted*
- *Priority Oversight Committees to meet and map out strategies for implementation given the new funding environment*

Structural and Operational changes, including updates in membership.

- *Council Leadership, and the District Liaison are working together to ensure that Council functions continue given defunding of the Council's Lead Fiscal Agent and District Coordinator at the end of FY 17*
- *Council members have been engaged to identify new members to fill positions as identified in the gap analysis.*

In-district or multi-district collaborations

- *Collaboration opportunities are a standing DCC agenda item*.

Other topics of interest, or questions for SCC members: *None at this time*

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Statewide Coordinating Council for Public Health
District Coordinating Council Update

Template updated 03/2012

District: Penquis District	**Date: September 8, 2017**

Brief review of decisions and outcomes from Steering Committee and DCC meetings held since last SCC meeting.

Lead Fiscal Agent DCC workplan updates:
The final quarterly reports were submitted to the State to close out the grant. Final payments were made to the grant sub-recipients of the priority areas identified in the Penquis DPHIP.

District Public Health Improvement Plan (DPHIP) Implementation:
The steering committee and DCC has been working on an eco-mapping activity that will help identify programming at the local level and map it in the DCC region. The DCC is at the initial phases of the work and hopes that it will allow the communities to share promising practices. The steering committee is also reworking the DPHIP to weave in the poverty strategies to the other three priority areas of substance misuse, behavioral health and obesity

In March, the 5 initiatives funded through the Penquis DCC began; all were completed on time and within budget:

1. Sebasticook Valley Health: Edible School & Community Education/Garden project:

SVH collaborated with established school, community, and worksite garden partners to construct modular greenhouses and integrate an evidence-based gardening curriculum within Penobscot county. The project focused on food insecure populations in Penobscot County.

2. Sebasticook Valley Health: Resource Guide:

Sebasticook Valley Health increased education on and access to behavioral health resources by creating a behavioral health resource guide for the Sebasticook Valley region.

3. Food AND Medicine: Raised Vegetable Gardens

Food AND Medicine constructed three raised vegetable gardens in strategic partner locations where the population is low-income and food insecure; supported committees of affected community members to lead and tend to each garden; organized workshops to teach skills associated with gardening, cooking/preserving, and shopping for healthy food on a fixed budget; developed leadership at each garden site so that each garden can sustainably continue and be more autonomous.

4. National Alliance on Mental Illness: Mental Health First Aid

NAMI Maine offered Mental Health First Aid Trainings in order to increase awareness and deliver concrete skill-building opportunities to the residents of Penobscot and Piscataquis Counties. The project aimed to certify residents in a national, evidence-based training and included the provision of both the Adult and Youth models.

5. Penobscot Community Health Care: Giving Hope Garden

PCHC, in collaboration with Hope House Health and Living Center, managed and sustained the Giving Hope Garden, a 15-raised bed organic garden in Bangor, Maine. The project provided nutritious produce and food security to vulnerable populations in the broader Bangor community.

Ongoing or upcoming projects or priority issues:

- Complete deliverables as outlined in DCC work plan.

- Continue eco-mapping work

Structural and Operational changes, including updates in membership.
The Steering Committee has welcomed a new member Daniel Hineman, in June.
New members: Daniel Hineman, United Way

In-district or multi-district collaborations:

- Partnership to Improve Community Health grant with EMHS, multi-district
- Community Health Leadership Board, Greater Bangor
- Thriving in Place (MeHAF Grant Initiative), Millinocket, Old Town, Orono, Veazie, Dover-Foxcroft,
- Healthy Communities (MeHAF Grant Initiative), Dover-Foxcroft, Bangor

Other topics of interest for SCC members:
None to report

District Coordinating Council Update

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

District: Western	September 21, 2017

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:

July 14, 2017 DCC Meeting - Presentations by Not Here Justice in Action and Healthy Community of Greater Franklin County who were contracted to complete year one DCC work. Announcement of budget gaps and uncertainty of LFA and DC funding at this time. Not Here Justice stated they would be moving forward with work regardless of funding.

August 11, 2017 DCC Meeting Cancelled.

September 8, 2017 DCC Meeting – DCC developed questions that SCC Rep, Erin Guay, will be bringing to the SCC in order for the DCC to move forward.

Ongoing or upcoming projects or priority issues:

There have been no changes made to current DPHIP at this time; work has been "tabled." Discussion at last DCC meeting to share work that is being done district wide with other partners to see how best to collaborate on this work, example provided was the Preventative Health Services Substance Abuse work.

Progress with District Public Health Improvement Plan:

This work is currently on hold until the DCC decides how to move forward based on recent funding changes to the DCC.

Structural and Operational changes, including updates in membership:

Michele McCormick needs to step down from DCC chair role; DCC is currently taking nominations for this position.

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 tribe and tribal health department or health clinic

Statewide Coordinating Council for Public Health

District Coordinating Council Update

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

District: York District	Date: 09/21/2017

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 full council meeting on 9/11/2017 focused on mapping out the ten essential public health services based on council members and attendees contributions and organizational initiatives in each area. It was a robust discussion with the end result being the need to focus on personalized recruitment for key players and agencies named in the mapping exercise. Also it will be important to ensure a good overall understanding of what public health is and how they interact within.

Ongoing or upcoming projects or priority issues:

Final reports for district vendors arrived on time and were reviewed by the executive committee.

Progress with District Public Health Improvement Plan:

Due to changes in funding the council is no longer using vendors to carry out the DPHIP work. The priority areas remain unchanged as of September. District Public Health Improvement plan priority areas are Oral Health, Substance Misuse, Nutrition/ Obesity. The council members are looking at ways to continue working in these areas and others in a resource effective manner. The executive committee is also reviewing data from SHNAPP to see what other work can be under taken to improve the health and wellness of residents in York County.

Structural and Operational changes, including updates in membership:

Jane May from York Hospital has joined the executive committee.

In-district or multi-district collaborations:

ME CDC is working in partnership with the York District Coordinating Council, University of New England, the Medical Reserve Corps, and others to plan an Alternate Care Site functional exercise. The exercise is schedule for October 20th 2017. The event will take place at the University of New England Gymnasium. The University will provide vaccine for faculty, staff, and students. Walgreens will provide vaccine for first responders of York County. This year College of Medicine Students will be placed alongside Students from the College of Pharmacy as vaccination teams. This will provide a valuable opportunity for the two disciplines of medicine to work together during a simulated emergency response. For more information please contact adam.hartwig@maine.gov

Other topics of interest for SCC members:

Members of the executive committee are also looking at leveraging transportation work to improve public health opportunities in York County. A large meeting with key stakeholders is currently in the planning phase.

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SCC Meeting Evaluation
September 2017

1. Please indicate your member/participation status by checking a category below:

   ☐ SCC Member (Voting Member)
   ☐ Key Stakeholder (Identified by Letter of Invitation from MCDC)
   ☐ Interested Party (All Others)

2. What worked well for you at today's meeting (process, agenda content, facilities, etc)?

3. What could be improved?

4. Did the format of the meeting allow you to participate and feel engaged in the discussion and presentations?

Very engaged	Somewhat engaged	Not engaged
☐	☐	☐

   In what ways:

5. What public health-related topics or content would you like to discuss at upcoming SCC meetings?

Thank you!