

FY15 REPORT (7/1/14-6/30/15)

			<p>WMHS supporting consistent use of PERC for written materials which is third to seventh grade reading level</p> <p>41 receiving emergency assistance to address social determinants of health via Healthy Allegany (MHSO and WMHS Patient Assistance not included)</p>
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Strategy B: Early Childhood Development

ACTION	WHO	WHEN-Phases	MEASURES- FY15
1. Establish home visiting program for high risk families	ACHD-Heather , LMB, YMCA, DSS, Bd of Ed, HRDC	Phase 1-3	<p>1 Family Assessment Worker and 2 Family Service Workers were hired by the Home Visiting Program. Staff completed multiple trainings to prepare for the launch of the program.</p> <p>41 forms and 1 program brochure were developed.</p> <p>The Healthy Families America home visiting program did outreach at: School Health Nurses meeting, WIC, Department of Social Services, methadone clinics, Addictions Clinic, School Readiness Fair, Community Baby Shower, YMCA Family Center, OB-GYN offices, Coalition meeting, Infant and Toddlers Program, First Way Pregnancy Center, and HRDC.</p> <p>Jan-June, there were 103 referrals to the program and attempts were made to contact every referred family.</p> <p>10 families assisted by home visiting program (enrolled)</p>
2. Assess food needs and refer to appropriate organizations for food security	Comm. Health Wkrs., (Jenelle) , County United Way, DSS, WMHS, Providers, Cumb Ministerial, ACHD, Assoc. Ch WMD Foodbank	Phase 1-2	<p>3 organizations interested in doing food security assessment (WMHS, Chapman, TSCHC)</p> <p>3,668 assisted by DSS/Assoc. Charities for food</p> <p>3 new food resources offered in community (Community Wellness Coalition Double Bucks at Farmers Market, WMHS Community Garden, South Cumberland Farmers Market)</p>

Best Practices underway in the community which may contribute to achievement of these goals. See last page for Status.

- Mountain Health Alliance- efforts to increase dental access especially for adults, as well as provider recruitment and rural medical education. (Susan)
- Housing initiatives of the Homeless Resource Board and various Housing Authorities. (Courtney)
- Early Childhood Advisory Council- various projects to improve school readiness, recently received grant support (Jenn)
- Appalachian Mountain MD Innovative Readiness Training (DOD)-10 day event from August 13-22 providing dental, vision, pain management, medical assessment and veterinary services at the Allegany County Fairgrounds (Fred)
- Mental Health First Aid Trainings- Trainings to reduce stigma associated with mental health and to improve community response to those in need of support until professional help arrives (Lesa)

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Strategy B: Violence Intervention Programs			
ACTION	WHO	WHEN-Phases	MEASURES- FY15
1. Increase awareness of domestic violence and determine gaps in service. (Reference Access/SE-Action B1)	DSS-John, WMHS, Family Violence Council , Family Crisis Resource Center, Child Abuse Task Force, Jane’s Place, CASA	Ongoing	7 education and awareness efforts- October Focus of Month, FCRC-Outreach event at ACM Career Ctr. video, Jane’s Place display at Healthy Kids Day, Father’s Day ad in newspaper –FCRC, Facebook posting-No More, and ACM Human Service Class. <u>List of identified resources and gaps –</u> <ul style="list-style-type: none"> • Planning Domestic Violence Awareness Forum • Increased access to youth in schools for education about domestic violence • Advocacy support- Maryland Network calls and letters • Outreach to worksites, movie ads, etc. • Staff or volunteer time to help develop outreach and education • Funding for materials
2. Promote development of positive, non-abusive relationships for improved health.	Coalition-Nancy	Phase 2, 4, 6	3 new initiatives to promote development of positive, non-abusive relationships (Family Junction-Incredible Years, Md. Coalition of Families-Active Parenting and CASA) 91 supported participants

Best Practices underway in the community which may contribute to achievement of these goals. See last page for Status.

- Tobacco assessment tools (4P’s Plus and cessation programs) by Allegany County Health Department and partners. (Chris)
- Tracking BMI of elementary school students via school health nurses. (Jenn)
- School Based Violence Reduction efforts with Board of Education, Health Department and other partners. (Kristi)

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Priority: Disease Management

Behavioral Health Diabetes Heart Disease Hypertension Asthma
 (Refer to data table for baseline and goals.)

Strategies:

- A. Disease management targeting individuals with multiple conditions, in conjunction with primary care provider
- B. Increase availability of behavioral health services

Actions

Phase 1:July-Dec 2014 **Phase 2:**Jan-June 2015 **Phase 3:**July-Dec 2015 **Phase 4:**Jan-June 2016 **Phase 5:**July-Dec 2016 **Phase 6:** Jan-June 2017 **Ongoing**

Strategy A: Disease management targeting individuals with multiple conditions, in conjunction with primary care provider			
ACTION	WHO	WHEN-Phases	MEASURES- FY15
1. Support coordination of disease management programs, especially those for diabetes, heart disease and asthma.	WMHS-Nancy , ACHD, Tri-State CHC	Ongoing	2 cross agency disease management initiatives (CDSMP and National Diabetes Prevention Program-prediabetes) Exploring more collaboration with 1422 and regional transformation planning grants. Gained verbal agreement from 42 community partners and providers in support of the Regional Planning Grant, which will address the triple aim and improve population health through collaboration across the continuum List of tools or processes accepted by area providers for coordination of care- Referral to Center for Clinical Resources
2. Implement educational interventions to focus on prevention and self management of chronic diseases.	WMHS-Nancy , ACHD, Tri-State CHC, AHEC	Ongoing	6 education interventions (Cancer Forum-37 participants, Lung Disease-60 participants, Health Fairs-HRDC, Back to School and Hunter Douglas-1330 participants, Cancer Prevention Forum-60 participants, Live Well Feel Well- Chronic Kidney-3people, Colorectal Cancer Awareness Event-47 people) 2 self-mgmt. program implemented (Diabetes Self Management Program WMHS- 133 participants, Chronic Disease Self Management Program HRDC-4 participants) Unknown % of participants who report confidence in decision making about disease management
Strategy B: Increase availability of behavioral health services			
ACTION	WHO	WHEN-Phases	MEASURES- FY15
1. Establish a behavioral health learning collaborative	MHSO-Lesa , Behavioral Health Providers, AHEC	Phase 1-2	Behavioral health providers were surveyed to determine where they were in the accreditation process. 1 training was provided, an Accreditation Boot Camp for Mental Health and Addictions providers, as

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			part of the learning collaborative. Collaborative established and met monthly through March 2015 21+11 participants active in collaborative
2. Implement screening process for depression and anxiety including referral source for Providers when needed.	WMHS, ACHD, Tri-State CHC & Private Providers, MHSO-Lesa	Phase 1-2	0 providers implementing a depression/anxiety screening WMHS has a screening process in place for suicide. A positive screen results in a full evaluation that screens for depression and anxiety. WMHS does not have a standardized screening tool for depression and anxiety that is used with primary care providers and currently there are no development plans. We are working with the behavioral health unit to utilize the urgent care slots we have created. 23 individuals subsequently referred for an Urgent Care Appointment with a psychiatrist or to another appropriate level of (44 slots available)

Best Practices underway in the community which may contribute to achievement of these goals. See last page for Status.

- Prescriber education, prescription drug use screening, and enhanced coordination is being overseen by the Overdose Prevention Task Force.(Becky)
- Center for Clinical Resources of WMHS focuses on Diabetes, CHF, COPD, anticoagulation, and may be expanding to kidney disease. (Nancy)

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Best Practices underway in the community which contribute to achievement of Local Health Action Plan (Status: FY15)

- **Mountain Health Alliance-** a Network of agencies and providers that works to increase access to dental and behavioral health services through the use of Community Health Workers, works to broaden the network of oral health providers willing to work with low income populations, and works to increase provider recruitment through pipeline programs and rural clinical education. **(Susan)**
 - 59 primary care providers from 18 practice sites trained by network dental professionals on how to conduct an evidence-based oral health exam
 - 67 primary care providers sent information on online training
 - 5 cultural competency and oral health trainings were conducted with 76 health professions students
 - 3 focus groups with 34 participants from the targeted population were moderated during the no-cost extension
 - 2 Full time Community Health Worker hired and trained via 160-hour Texas AHEC East Coastal Region Community Health Worker Certification Program and the oral health portion of the Central Massachusetts AHEC to not only assist clients in finding health care services, but to work with clients to alter behaviors to affect more positive health care outcomes.
 - Dr. William Ludwick, a private practitioner in Keyser, WV, agreed to treat MHA-referred dental patients at a rate of \$150 per hour. Patients from western Allegany County can be referred to Dr. Ludwick for treatment.
 - Began discussions with Kathy Whitacre, Clinical Manager, and Jeff O’Neal, Director of Behavioral Health at Western Maryland Health System regarding the role CHWs can play in supporting behavioral health patients. Considered creating an Emergency Department referral program for some behavioral health patients, to reduce visits to the ED, as well as providing support services once a patient leaves WMHS’s inpatient program.

- **Housing initiatives of the Homeless Resource Board and various Housing Authorities. (Courtney)**

- Homeless Resource Day took place at the end of September 2014 and 64 individuals were served.
- Local rapid rehousing program implemented in July 2014, through County United Way support has continued. The program provides individuals and families that are either homeless or at-risk for homelessness \$200 per month in housing support for up to 10 months. Nine families have received assistance through the program. The program will continue in FY16 through CUW funding.
- The Section 8 Housing Voucher Program re-opened its waitlist in February 2015. Currently 156 households are being served through the County Program and 360 through the City of Cumberland’s Program. The County waitlist stands at 32 households and 386 for the City. By closing the waitlist and re-issuing available vouchers, the program was able to substantially reduce the waitlist but the average wait time to receive a voucher still exceeds a year. It is important to note that there is a local resident preference on the voucher program and current residents of the City and County are placed before individuals outside of the area.
- HRDC is the recipient of 15 new VASH Vouchers effective July 1, 2015. This brings the total number of available VASH vouchers for the County to 18.
- The Cold Weather Shelter, funded through the support of County United Way, area churches, and the Western Maryland Health System’s Employee fund operated from January 2- March 31, 2015. Fifty-five individuals (36 male, 19 female) were provided two hundred and seventy bed nights and 810 meals.
- A total of \$809,617 was awarded for homeless programs in Allegany County through the HUD Continuum of Care application. One new program was funded: HRDC’s Rapid Re-Housing Project.
- The January- 2015 Point-in-Time survey to collect data on area homelessness identified the following:

Homeless Total (PIT Count)	2012	2013	2015
living outdoors / in car	12	11	19
in hotel / motel	21	9	27
w/family_friends	200	134	80
Total Individuals	233	154	126

At Risk of Becoming Homeless Total (PIT Survey)			
incarcerated or in hospital	5	4	4

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has eviction notice	39	0	13
Total Individuals	44	4	17
Receiving Homeless Services (HIC count)			
Transitional Housing	45	44	41
Emergency Shelter	51	20	36
Rapid Rehousing	7	0	17
Perm Supportive Hsg	82	99	88
Shelter + Care	30	35	30
Total Individuals	215	198	212
Unduplicated Total	492	356	355

• **Early Childhood Advisory Council- various projects to improve school readiness, recently received grant support (Jenn)**

- HRDC and The Judy Center received funding to expand services for the 2015-2016 school year. HRDC will open a new full day Pre-K program at West Side School in the fall. The program will provide services to 20 children. Priority placement will be given to children whose household incomes are at or below 200% of federal poverty. The Judy Center will hire an additional service coordinator to provide services at South Penn Elementary.
- HRDC is moving two Head Start classrooms (a morning and afternoon session) to Mount Savage Middle School for the 2015-2016 school year to better accommodate income eligible families from the lower LaVale, Corriganville, and Mount Savage areas.
- The School Readiness Scores for the State of Maryland have been released and Allegany County, like the rest of Maryland, saw a substantial decrease in students meeting full school readiness. Kindergarten Readiness Assessment (KRA) scores, were lower (as for Language and Literacy (44%), Math (43%), Social Development (54%) and Physical Development (53%) and Arts and Science were not scored. This was the first year utilizing the KRA and the Maryland State Board of Education is looking at additional training for staff that administer the assessment.
- The Summer Camp for Beall and South Penn runs June 29th – July 30th, from 8:30-1:30, Monday – Thursday. Transportation to Beall/South Penn’s Summer Camp is free for IEP students.
- Dr. Susan Nuber of Children’s Medical Group shared with the ECAC the new Doctor-to-Doctor consultation, in which CMG Pediatricians can call to discuss any mental health issues they have with their patients. They have also recruited a Pediatric Psychologist who will be coming into the office on a regular scheduled basis to meet with patients and/or families.
- Through ECAC funding the Allegany County Library has purchased digital technology including Apple TVs and screens, iPads, Apps and E-Books for all six libraries.

• **Appalachian Mountain Innovative Readiness Training (DOD)- August 13-21 providing dental, vision, pain management, medical assessment and veterinary services at the Allegany County Fairgrounds (Fred)**

- 93 servicemen from 15 military units provided care at IRT, with help from 282 volunteers who donated 3,264 hours
- 1,102 Patients served
- 7,700 Medical services - Assessment, Pain Management/ Consultation and Dietitian Consultation
- 2,279 Dental services - Hygiene and Surgery
- 5,113 Vision services - Assessment of visual acuity, glaucoma and other diseases and manufacture of eye ware
- 767 Follow up - Referrals for ongoing care to dental, medical including Veterans Medical Care, Community Health Workers, Affordable Care Act Navigators, DSS, Health Department, etc.
- 1,647 Veterinary services - Spaying, neutering and vaccines
- An estimated economic value for the services provided by the IRT: \$82,066 from hours worked by volunteers, \$955,247 for professional healthcare services, \$19,878 for medications supplied to patients and \$2,535 for miscellaneous expenses.

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- **Mental Health First Aid Trainings- Trainings to reduce stigma associated with mental health and to improve community response to those in need of support until professional help arrives (Lesa)**
 - 194 people trained in MHFA. (121 core(of which 44 law enforcement) 69 youth, 4-TA)
- **Tobacco assessment tools (4P's Plus and cessation programs) by Allegany County Health Department and partners. (Chris)**
 - 511 4 P's Assessments- Dec-26% of pregnant women are using tobacco and June-22.3% of pregnant women are using tobacco
 - 12 of referred women to cessation program and 5 of women participated in cessation
 - 10 programs offered with nicotine replacement,
 - 156 people participated in cessation program, 24 people quit through cessation program and 46 repeated cessation program
 - 297 youth and 402 adults educated about dangers of cigar use and industry marketing
- **Tracking BMI of elementary school students via school health nurses. (Jenn)**

	2014-15
Underweight (<5%ile)	2.5%(92)
Healthy Weight (5-84%ile)	63.5% (2355)
Overweight (85-94%ile)	15.2% (562)
Obese (95%ile & over)	18.8% (697)
Total # students	3706

- **School Based Violence Reduction efforts with Board of Education, Health Department and other partners. (Kristi)**
 - Mental Health Enhancement time was instituted in the Allegany County Public Schools.
 - We have licensed workers/certified nurses in all of the schools in Allegany County.
 - We have increased our availability and now provide approximately 34 hours per week (combined) for consultation, questions, updates, etc. from the school staff.
 - Utilization rates have increased for the past school year.
- **Prescriber education, prescription drug use screening, and enhanced coordination is being overseen by the Overdose Prevention Task Force.(Becky)**
 - Requested funds to provide training for SBIRT to partner with a community provider and also funds for training of clinicians and prescribers similar to the REMS training that was held in March 2014. The areas we would like to cover in the training are, addiction and the use of the Prescription Drug Monitoring Program
 - Allegany County Health Department -Behavioral Health Prevention Program received grant dollars for the Opioid Misuse Prevention Program.
 - We were able to partner with the Western Maryland Health System to provide a training on May 2, 2015, that addressed Addiction and the Use of the Prescription Drug Monitoring Program. SBIRT was discussed and encouraged during the training. There were a total of 49 attendees and 36 were prescribers.
- **Center for Clinical Resources of WMHS focuses on Diabetes, CHF, COPD, anticoagulation, and may be expanding to kidney disease. (Nancy)**
 - CCR celebrated one year anniversary in November 2014.
 - 64% decrease in all hospital visits for OPAC (anticoagulation)
 - Diabetes-11.5% decrease in Admission and 16% reduction in emergency department visits.
 - CHF-27% decrease in admissions
 - COPD has the highest rates of no shows in the CCR and also a high admission and readmission rate.
 - Planning for a graduation process and referral to community health programs.

CHNA & LHAP approved FY14 implement FY 15-17 --- Next CHNA start in Fall 2016 approve CHNA & LHAP in FY17 implement FY18-20