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Howard County Local Health Improvement Coalition

Access to Care Work Group Delegate Report
April 26, 2018

FY 18-20 Access to Care Priority 1: Reduce Emergency Department visits for diabetes, hypertension, and asthma in Howard County.

FY 18-20 Access to Care Priority 2: Increase the number of Howard County children and adults who access dental care annually.

FY 18-20 Access to Care Goals:

- **Goal 1.1a:** Provide referral/linkage to diabetes/hypertension/asthma education and services through community partnerships and evidenced-based programs for priority populations.
- **Goal 1.1b:** Engage HCLHIC member organizations in coordinated communication through social, print and other media on disease prevention and awareness for priority populations.
- **Goal 2.1a:** Provide referral/linkage to dental care and oral health education through community partnerships and evidenced-based programs for priority populations.
- **Goal 2.1b:** Engage HCLHIC member organizations in coordinated communication through social, print and other media on disease prevention and oral health awareness for priority populations.

FY 18-20 Access to Care Process Objectives:

- By June 30, 2020, participation in evidence-based Chronic Disease Self-Management and Diabetes programs for priority populations will be increased by 20%.
- By June 30, 2020, participation in evidenced based asthma education for priority populations will be increased by 10%.
- By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in Diabetes, Hypertension and Asthma awareness for priority populations by utilizing communication action alert tool.
- By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of primary care, urgent care, emergency department and telemedicine by utilizing communication action alert tool.
- By June 30, 2018, 600 adult patients will receive free/low cost clinical dental services through Chase Brexton. *targets to be set annually
- By June 30, 2018, 250 children will receive free/low cost clinical dental services through Chase Brexton and Smile Program with HCPSS. *targets to be set annually

- By June 30, 2020, dental care providers providing free/low-cost community clinics and/or screening services/restorative care will be increased by 5%.
- By June 30, 2020, 10% of HCLHIC partner organizations will be engaged in Oral Health Awareness and Free/sliding scale dental provider awareness for priority populations by utilizing communication action alert tool.

FY 18-20 Q3 Progress Report

	Discussion		
List the action item (s) that this	The action items this group will complete by June 2018 are as follows:		
work group will complete by June			
2018.	A. Increase evidence-based diabetes and hypertension program		
	participation for priority populations by 5%		
	B. Establish a baseline for participation in asthma education program		
	participation by priority populations.		
	C. Access to Care specific presentation/training held during 1 full HCLHIC		
	meeting /1 work group meeting annually		
	D. Include diabetes; hypertension; asthma; appropriate uses of primary		
	care, urgent care, and emergency department and telemedicine; oral		
	health; and, free/sliding scale dental provider awareness-related		
	awareness actions/messages in a minimum of 2 HCLHIC Action Alert		
	Tools per topic		
	E. Engage a minimum of 5% of HCLHIC member organizations in		
	diabetes; hypertension; asthma; appropriate uses of primary care,		
	urgent care, and emergency department and telemedicine; oral		
	health; and, free/sliding scale dental provider awareness-related		
	awareness actions/messages through the HCLHIC Action Alert Tool F. Provide free/low cost clinical dental services to 600 adults		
	·		
	G. Provide free/low cost clinical dental services to 250 children H. Increase dental care providers providing free/low-cost community		
	clinics and/or screening services/restorative care services by 1.25%		
What is the current status of the			
action item (s) above during this	The current status of the action items are as follows:		
month?	A. Second CDSMP action group consisting of leadership from MAC Inc.,		
	Howard County General Hospital/Journey to Better Health, Office on		
	Aging and Independence and HCLHIC staff will be held in April 2018		
	based upon group's agreement to convene quarterly to review		
	participation and capacity issues. Additionally, HCLHIC Coordinator		
	was trained as Living Well Lay Leader through Journey to Better		
	Health's Living Well Volunteer Training.		
	B. Through referral by Howard County General Hospital Population		
	Health staff, potential asthma program for implementation in Howard		
	County (AsthME Remote Monitoring Program through Johns Hopkins		
	Home Care) was identified. A possible early adopter organization for		
	increased asthma education activities (Head Start) was identified		
	following presentation to and recommendation by Access to Care		

- work group in March 2018. HCLHIC staff is working with JHHC to draft a program and budget proposal to position coalition to seek funding resources for AsthME program. C. Designated September Full Coalition meeting as Access to Care focus for specific presentation. D. Completed for FY18 E. Completed for FY18 F. Through HCLHIC management of Howard County Oral Disease and Injury Prevention (HCODIP) grant partnership with Chase Brexton Health Services, 961 adult dental patients have been seen (886 aged 21-64 years; 75 aged 65+) through 1,693 clinical visits; 54 adult patients received emergency treatment; 190 (19.77%) of adult patients received restorative care services. G. HCLHIC member, Chase Brexton has seen 209 children (11 aged 0-2 years; 25 aged 3-5 years; 56 aged 6-12 years; 117 aged 13-20 years). These pediatric dental service numbers currently include Chase Brexton only; HCPSS data from the Smile Maryland dental program piloted by the system during the 2017-18 school year will be available for 4th Quarter report.
 - H. One new dental care provider identified and completing process to accept Medicaid; HCPSS presented to ATC workgroup on the new Smile Maryland dental program piloted by the system during the 2017-18 school year; an initial draft of dental referral process and algorithm has been drafted and agreement has been made with Chase Brexton to accept referrals using the tool.

What are the next steps and projected timelines for the next month to accomplish the action item (s) above?

The next steps in order to accomplish the action items are as follows:

- A. Data collection for FY 2018 program outcomes to be completed in Q4. An assessment of participation and capacity will be completed for the Q4 CDSMP Action Group meeting.
- B. HCLHIC staff will finalize program proposal (internal tool) and follow through with internal proposal approval process. Once complete, HCLHIC staff, in collaboration with Johns Hopkins Home Care proposes to seek grant support to potentially implement the AsthME program in Howard County. Additionally, a follow-up meeting will be scheduled with the AsthME team and other potential community partners in order to discuss other evidence-based asthma resources that can be implemented in Howard County.
- C. Speaker/Topic for fall 2018 Full HCLHIC presentation to be

	ident	ified/secured in Q4.
	deter	with over-arching HCLHIC Communications action group to mine FY 19 approaches using action alert tool and coordinated nunications.
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	conti	IC staff has submitted a 25K funding request for FY 19 to MDH to nue HC Oral Disease and Injury Prevention collaboration with Brexton. Funding outcome expected in May 2018.
	progr	with HCPSS to discuss outcome data for Smile Maryland dental am piloted by the system during the 2017-18 school year and se expansion ideas that support both HCPSS and HCLHIC ties.
	Chase	ze draft of dental referral process and algorithm for use with Brexton. Convene action group to discuss strategies for itment of potential additional free/low cost providers.
List specific action(s) needed from	The specific action	ns that are needed from HCLHIC members are as follows:
HCLHIC members; specific work	-	
group(s); leadership; and/or	1. Partio	cipation in action groups
others to successfully implement	2. Prom	otion, hosting, facilitation of CDSMP classes
next steps for the month ahead.	3. Enga	gement in Action Alert Tool calls to action

Respectfully submitted by
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Sharif Braxton (Program Coordinator)
Howard County Local Health Improvement Coalition