LOCAL HEALTH IMPROVEMENT STRATEGIC ACTION PLAN

20

through

2020

Howard County LHIC

Local Health Improvement Coalition



Howard County Local Health Improvement Coalition 2018-2020 Strategic Action Plan

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Introduction



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Introduction

The Howard County Local Health Improvement Coalition was formed in 2011 as part of the Maryland Department of Health's State Health Improvement Process. This process and its measures align with the Healthy People 2020 objectives established by the Department of Health and Human Services.

The coalition's mission is to identify and reduce health disparities and achieve health equity among Howard County residents. Using local health data and input from stakeholders from throughout the County, the coalition developed the 2018-2020 Strategic Action Plan, setting aims, goals and process objectives for four key priority areas:

- Access to Care
- Behavioral Health
- Healthy Aging
- Healthy Weight

Work groups will be maintained to implement and monitor progress in each area of the plan. Maryland Department of Health's State Health Improvement Process (SHIP) measures and Howard County Health Assessment Survey (HCHAS) data serve as the basis by which ultimate long-term change will be measured. Process objectives will serve as outcomes by which short-term change over the course of the FY 18-20 plan will be measured.

Local Health Improvement Priorities

The Howard County Local Health Improvement Coalition (HCLHIC) identified four priority areas for the 2018-2020 Action Plan:



Access to Care

Reduce Emergency Department visits for diabetes, hypertension, and asthma in Howard County and increase the number of Howard County children and adults who access dental care annually.



Behavioral Health

Reduce Emergency Department visits related to mental health conditions and addictionrelated conditions; and reduce suicide rates in Howard County.



Healthy Aging

Reduce Alzheimer's and dementia-related emergencies and reduce fall-related deaths in Howard County.



Healthy Weight

Reduce obesity in Howard County.

Priorities were selected with consideration given to:

- » Disparity related to the health outcome;
- » Population health impact;
- » Coalition capacity to impact; and,
- » Measurability of outcomes.

The following values and assumptions will be incorporated into all initiatives of the HCLHIC:

- » HCLHIC initiatives may involve multiple strategies implemented as a part of a larger initiative.
- » HCLHIC initiatives will be evidence-based and/or focused on research-supported promising practices.
- » HCLHIC initiatives will seek to address structural, cultural, and other social determinants of health.
- » Priority Populations refer to populations/groups identified as not meeting Maryland State Health Improvement Process (SHIP) measures and/or demonstrating a concerning data trend based on SHIP, Howard County Health Assessment Survey (HCHAS) or other data measures.



ORGANIZATIONAL GOALS FOR 2018-2020

The HCLHIC is Co-Chaired by the Health Officer for Howard County and the President of Howard County General Hospital. The coalition is staffed by a Director, Program Manager and two Program Coordinators. Funding for and oversight of these positions is provided by the Howard County Health Department.

For the FY 18-20 period, in addition to the goals and objectives identified for the four priority areas, two organizational aims were identified:

- 1. Strengthen HCLHIC's visibility and leadership in health promotion efforts in Howard County.
- 2. Strengthen the HCLHIC's infrastructure through member recruitment, retention, and communication.

The following pages contain the Strategic Action Plans for the four identified priority areas of the HCLHIC: Access to Care, Behavioral Health, Healthy Aging and Healthy Weight.



Access to Care

Access to Care Priority 1:

Reduce Emergency Department visits for diabetes, hypertension, and asthma in Howard County.

How Does This Affect Howard County?



of African Americans surveyed in the HCHAS were told by a health professional that they have pre- or borderline diabetes. (Source HCHAS, 2016)

Howard County (102.1) is not meeting the SHIP goal (< 186.3/100,000) for ED visits due to Diabetes among African Americans (249.4) in the county. (Source: MD HSCRC, 2014).



of African Americans surveyed in the HCHAS were told by a health professional that they have high blood pressure. (Source: HCHAS, 2016)

Howard County (112.1) is not meeting the SHIP goal (< 234/100,000) for ED visits due to Hypertension among African Americans (304.2) in the county. (Source: MD HSCRC, 2014)



of those surveyed in the HCHAS had a child in the household who had asthma. (Source: HCHAS, 2016)

Howard County (35.8) is not meeting the SHIP goal (< 62.5/100,000) for ED visit rate due to Asthma among African Americans (86.5) in the county. (Source: MD HSCRC, 2014).

How Do We Address This Problem in Howard County?

Goal 1.1a

Provide referral/linkage to diabetes/hypertension/asthma education and services through community partnerships and evidence-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.

» By June 30, 2020, participation in evidence-based Chronic Disease Self-Management and Diabetes programs for priority populations will be **increased by 20%**.

Baseline: 169 individuals participated in evidencebased CDSMP, Diabetes and Hypertension programs in Howard County in FY 2017.

 » 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.

Baseline: 9% of HCLHIC partner organizations engaged in Diabetes, Hypertension and Asthma awareness for priority populations in Howard County as of December 2017. » 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.

Baseline: There was no active coordinated community campaigns on appropriate uses of primary care, urgent care, emergency department and telemedicine in Howard County in FY 2017.

» By June 30, 2020, participation in evidenced based asthma education for priority populations will be increased by 10%.

Baseline: There were no coordinated evidencebased programs in Howard County in FY 2017.

- » Convene HCLHIC member organizations in a collaborative advisory capacity, to coordinate evidence-based diabetes and hypertension programming and services to ensure course capacities and priority populations are reached throughout Howard County.
- » Collaborate with community-based partners (CHWs, AERS, J2BH, faith-based, etc.) serving priority populations to identify, retain, engage, and re-engage individuals in evidence-based programs.
- » Convene HCLHIC member organizations in a collaborative advisory capacity, to coordinate evidence-based asthma programming and services to ensure reach to priority populations throughout Howard County.

- » Utilize CAREAPP and other referral systems to refer families for completion of asthma action plan through partner asthma education programs (Head Start, DCRS, etc.) via telemedicine or inperson.
- » Identify and implement appropriate Primary Care, Emergency Department, Urgent Care and Telemedicine usage toolkit/campaign to be used as coordinated HCLHIC communication campaign.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.

Access to Care Priority 2:

Increase the number of Howard County children and adults who access dental care annually.

How Does This Affect Howard County?



Howard County (67.4%) is not meeting the SHIP goal (>64.6%) for children receiving dental care in the last year specifically among White (60.6%) populations; African Americans (65.4%) met goal for the first time. (Source: MD Medicaid Service Utilization, 2015)

How Do We Address This Problem in Howard County?

Goal 2.1a

Provide referral/linkage to dental care and oral health education through community partnerships and evidencedbased 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.



- » By June 30, 2018, 600 adult patients will receive free/low cost clinical dental services through Chase Brexton. *Based on FY 18 Oral Disease and Injury Prevention Program deliverables in grant from Maryland Department of Health.
 Baseline: 1,179 unduplicated adult patients received free/low cost clinical dental services through Chase Brexton in Howard County in FY 2017.
- » By June 30, 2018, 250 children will receive free/ low cost clinical dental services through Chase Brexton and Smile Program with HCPSS. Baseline: 287 (on-site) and 797 (off-site) unduplicated children received free/low cost clinical dental services through Chase Brexton in Howard County in FY 2017.
- » By June 30, 2020, dental care providers providing free/low-cost community clinics and/or screening services/restorative care will be increased by 5%. Baseline: 20 dental care providers provided free/ low-cost community clinics and/or screening services/restorative care in Howard County in FY 2017.
- » By June 30, 2020, 20% 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.
 Baseline: There was no active coordinated community education through the HCLHIC on Oral Health Awareness and Free/sliding scale dental provider awareness for priority populations in Howard County in FY 2017.

- » Utilize CAREAPP and other referral system with Chase Brexton, HCC, UMSOD etc. for patients based upon need; and, implement referral system.
- » Convene a Dental Advisory group consisting of dental service providers and stakeholders to identify gaps and assist in forming connections with other dental providers in the County.
- » Establish partnerships and commitments from additional dental providers in HC to offer free/lowcost/sliding scale dental services through HCLHIC partner linkage and referral system.
- » Utilize established oral health awareness materials in coordinated HCLHIC communication campaign.
- » Collaborate with HCHD-Bureau of Acess to Healthcare and other stakeholders to develop and disseminate communication messages promoting dental providers who provide services on a free/ sliding scale for use in coordinated HCLHIC communication campaign.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.

What Partners Will be Involved in Howard County to Achieve the Access to Care Goals?

- » All HCLHIC Members and work groups
- » Howard County General Hospital, a Member of Johns Hopkins Medicine
- » Howard County Health Department
- » Howard County Department of Community and Citizen Resources
- » Chase Brexton Health Care
- » Howard County Public School System

Resources and References

http://www.ada.org/en/scienceresearch/evidence-baseddentistry

https://www.thecommunityguide. org/findings/healthcommunication-and-socialmarketing-campaigns-includemass-media-and-health-related

https://www.thecommunityguide. org/findings/asthmahome-based-multi-triggermulticomponent-environmentalinterventions-children-and

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https://health.maryland.gov/ship/ PDFs/obj%2028%20hypertension. pdf

https://www.ncbi.nlm.nih.gov/ pmc/articles/PMC3336031/

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Behavioral Health

Behavioral Health Priority 1:

Reduce Emergency Department visits related to mental health conditions in Howard County.

How Does This Affect Howard County?



Howard County (2613.8) is not meeting the SHIP goal (<3152.6/100,000) for ED visits related to mental health conditions among African Americans (3223.3) in the county. (Source: MD HSCRC, 2014)

How Do We Address This Problem in Howard County?

Goal 1.1a

Provide referral/linkage for mental health conditions-related education and services through community partnerships and evidence-based programs for priority populations.

Goal 1.1b

Engage HCLHIC member organizations in coordinated communication through social, print and other media on prevention and treatment of mental health-related conditions among priority populations.



- » By June 30, 2020, participation in education and stigma reduction programs for priority populations will be increased by 20%.
 Baseline: 300 individuals were trained through 23 Mental Health First Aid (MHFA) courses in Howard County in FY 2017. Baseline for participation/ capacity to be determined in FY 18.
- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in mental health stigma reduction and awareness for priority populations by utilizing communication action alert tool.

Baseline: 12.5% of HCLHIC partner organizations engaged in mental health stigma reduction and awareness for priority populations in Howard County as of December 2017. » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool.

Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017.

 » By June 30, 2020, 6 educational symposia/ CE opportunities for providers, other care professionals and community members working with priority populations will be provided.

- » Implement MHFA, QPR and evidence-based stigma reduction programs in faith-based and other communities serving priority population.
- Partner with HCGH, Grassroots, the Horizon Foundation, etc. to offer symposia/CE opportunities to BH providers and community members related to mental health in Howard County (depression, anxiety, etc.) annually.
- » Utilize established stigma reduction awareness materials in coordinated HCLHIC communication campaign.

- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
- » Utilize established awareness materials on appropriate uses of emergency department and crisis intervention services awareness in coordinated HCLHIC communication campaign.

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Behavioral Health Priority 2:

Reduce Emergency Department visits for addictionsrelated conditions in Howard County.

How Does This Affect Howard County?



Howard County (615.1) meets SHIP goal (<1400.9/100,000) for ED visits for addictions-related conditions and is ranked 1st in state. (Source: MD HSCRC, 2014)



Between 2008 and 2014, the number of Howard County residents who sought treatment in emergency departments for drug and alcohol related problems increased 55%.

(Source: MD HSCRC, 2014)

How Do We Address This Problem in Howard County?

Goal 2.1a

Provide referral/linkage for addictions-related education and services through community partnerships and evidence-based programs for priority populations.

Goal 2.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media to reduce stigma about prevention and treatment of addictions-related conditions among priority populations.



- » By June 30, 2020, participation in addiction awareness and stigma reduction programs for priority populations will be increased by 20%.
 Baseline for participation/capacity to be determined in FY 18.
- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in addictionsrelated stigma reduction and awareness for priority populations by utilizing communication action alert tool.

Baseline: 1.2% of HCLHIC partner organizations engaged in addictions-related stigma reduction and awareness for priority populations in Howard County as of December 2017. » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool.

Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017.

» By June 30, 2020, 6 educational symposia/ CE opportunities for providers, other care professionals and community members working with priority populations will be provided.

- » Coordinate efforts among LHIC members and stakeholders to implement evidence-based stigma reduction programs for priority populations.
- » Partner with HCGH, Grassroots, Horizon Foundation, etc. to offer symposia/CE opportunities to BH providers and community members related to addictions in Howard County (depression, anxiety, etc.) annually.
- » Utilize established stigma reduction awareness materials in coordinated HCLHIC communication campaign.

- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
- Utilize established awareness materials on appropriate uses of emergency department, and crisis intervention services awareness in coordinated HCLHIC communication campaign.

Behavioral Health Priority 3: Reduce suicide rates in Howard County.

How Does This Affect Howard County?



Howard County (7.8) is meeting the SHIP goal (<9.0/100,000) for suicide rates (Source: MD DHMH Vital Statistics Administration 2013-2015); however, 21.9% of Hispanic/Latino, 16.7% of Black and 14.1% of White high school students surveyed in Howard County reported having seriously considered suicide ever during the 12 months before the survey.

(Source: Youth Risk Behavior Survey, 2016).

How Do We Address This Problem in Howard County?

Goal 3.1a

Provide referral/linkage for suicide prevention education and services through community partnerships and evidence-based programs for priority populations.

Goal 3.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media to reduce stigma about suicide among priority populations.



 » By June 30, 2020, participation in suicide prevention programs for priority populations will be increased by 20%.
 Baseline: 359 individuals were trained through 20 Question-Persuade-Refer (QPR) courses and

20 individuals participated in Applied Suicide Intervention Skills Training (ASIST) through 2 trainings in Howard County in FY 2017. Baseline for participation/capacity to be determined in FY 18.

- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in suicide-related stigma reduction for priority populations by utilizing communication action alert tool.
 Baseline: 2.3% of HCLHIC partner organizations engaged in suicide-related stigma reduction and awareness for priority populations in Howard County as of December 2017.
- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool.

Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017.

 » By June 30, 2020, 6 educational symposia/ CE opportunities for providers, other care professionals and community members working with priority populations will be provided.

- » Implement QPR and evidence-based stigma reduction programs in faith based and other communities serving priority populations.
- » Partner with HCGH. Grassroots, the Horizon Foundation, etc. to offer symposia/CE opportunities to BH providers and community members related to suicide in Howard County (depression, anxiety, etc.) annually.
- » Utilize established suicide prevention materials in coordinated HCLHIC communication campaign.

- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
- » Utilize established awareness materials on appropriate uses of emergency department, and crisis intervention services in coordinated HCLHIC communication campaign.

What Partners Will be Involved in Howard County to Achieve the Behavioral Health Goals?

- » All HCLHIC Members and work groups
- » Howard County General Hospital, a Member of Johns Hopkins Medicine
- » Howard County Health Department
- » Grassroots
- » Horizon Foundation
- » NAMI, Howard County
- » HC DrugFree

Resources and References

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https://www.thecommunityguide. org/findings/health-communication-and-social-marketing-campaigns-include-mass-media-and-health-related

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https://health.maryland.gov/ship/ PDFs/obj%2034%20behavioral%20 health.pdf

https://health.maryland.gov/ship/ PDFs/obj%2029%20drug%20induced%20deaths.pdf

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http://nrepp.samhsa.gov/Advanced-Search.aspx

Healthy Aging

Healthy Aging Priority 1: Reduce Alzheimer's and dementia-related emergencies in Howard County.

How Does This Affect Howard County?



Howard County (183.2) is not meeting the SHIP goal (< 199.4/100,000) for hospitalization rate due to Alzheimer's or other dementias among African Americans (262.3) in the county. (Source: MD HSCRC, 2014)

How Do We Address This Problem in Howard County?

Goal 1.1a

Provide referral/linkage to brain health education, future and advanced care planning for healthy aging and aging-related services through community partnerships and outreach programs for priority populations.

Goal 1.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media on brain health education, future and advanced care planning for healthy aging and aging-related services for priority populations.



» By June 30, 2020, participation in evidence-based programs for priority populations will be increased by 20%.

Baseline: 140 individuals participated in Virtual Dementia Tours, 26 individuals participated in Powerful Tools for Caregivers, and 30 individuals participated in Memory Cafes in Howard County in FY 2017. Baseline for participation/capacity to be determined in FY 18.

» By June 30, 2020, 20% of HCLHIC partner organizations will provide Alzheimer's and dementia-related resources for priority populations.

Baseline: Criteria for engagement of member organizations in integrating Alzheimer's/Dementia related resources into standard screening/educational services provided for older adults will be determined in FY 18.

- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in communicating education/future planning messages for priority populations by utilizing communication action alert tool.
 Baseline: 4.5% of HCLHIC partner organizations engaged in education/future planning messaging for priority populations in Howard County as of December 2017.
- » By June 30, 2020, 4 educational symposia/CE opportunities for providers and other care professionals working with priority populations will be provided.
- » By June 30, 2020, 6 educational symposia/CE opportunities for caregivers to priority populations will be provided.

- » Implement Alzheimer's/Dementia-related EBPs for patients, caregivers and providers and identify organizations that can offer/increase the offering of these programs.
- » Partner with community stakeholders (Alzheimer's' Association, OAI, etc.) to offer Alzheimer's/Dementiarelated programs in locations/for populations with known increased hospitalizations for/rates of Alzheimer's and other dementias.
- » Partner with community stakeholders (Alzheimer's' Association, OAI, etc.) to expand symposia/CE opportunities (communication, early detection, etc.) offered to PC and BH providers and community members annually.
- » Develop standards for integration of Alzheimer's and Dementia related resources and services into screening/educational services for older adults.

- » Train Primary Care and provider stakeholders (CMP, One World Health, Chase Brexton, etc.) on utilization of CAREAPP and other referral systems for patients in need of: brain health, future planning and aging related services.
- » Identify and implement future planning education campaign to use as coordinated HCLHIC communication campaign.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
- » Partner with community stakeholders (Alzheimer's' Association, OAI, Horizon Foundation, etc.) to expand symposia/CE opportunities (planning for the future, Speak(easy), Powerful Tools for Caregivers) offered to caregivers on an annual basis.

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Healthy Aging Priority 2: Reduce fall-related deaths in Howard County.

How Does This Affect Howard County?



Howard County (7.8) is not meeting the SHIP goal (<7.7/100,000) for fall-related death rates; saw an increase from (7.1) to (7.8); and went from being ranked 3rd in Maryland to being ranked 4th in Maryland (Source: MD DHMH Vital Statistics Administration, 2013-2015). Updated demographic breakdown was not available at the time of this report.

How Do We Address This Problem in Howard County?

Goal 2.1a

Provide referral/linkage to fall prevention, adaptive device resources and awareness services through community partnerships and evidence-based education programs for priority populations.

Goal 2.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media on fall prevention, adaptive device resources and awareness services for priority populations.



» By June 30, 2020, participation in evidence-based programs for priority populations will be increased by 20%.

Baseline: 54 individuals participated in Stepping On and 1,368 individuals participated in Fire and Fall Safety Presentations in Howard County in FY 2017. Baseline for participation/capacity to be determined in FY 18.

- » By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in communicating falls prevention, adaptive device resources and awareness of services for priority populations by utilizing communication action alert tool.
 Baseline: 0% of HCLHIC partner organizations engaged in falls prevention, adaptive device resources and awareness of services messaging for priority populations in Howard County as of December 2017.
- » By June 30, 2020, 20% of HCLHIC partner organizations will integrate fall prevention practices in standard operations.
 Baseline: Criteria for engagement of member organizations in integrating fall prevention practices into standard screening/educational services provided for older adults will be determined in FY 18.
- » By June 30, 2020, 4 educational symposia/ CE opportunities for providers and other care professionals working with priority populations will be provided.
- » By June 30, 2020, 6 educational symposia/CE opportunities for caregivers to priority populations will be provided.

- » Implement evidence-based falls prevention programs in locations/for populations with known increased falls risk.
- » Increase number of chronic pain and arthritis EBPs offered to communities as a means of reducing fall risk.
- » Partner with LHIC member organizations and stakeholders (OAI, HCDFRS, AERS, etc. to expand symposia/CE opportunities (Stepping On, Better Balance, etc.) offered to primary care and other stakeholders on an annual basis.
- » Partner with the HCDFRS, AERS etc. to expand symposia/CE opportunities (Remembering When, home assessment, fall risk, balance programs.) offered to caregivers on an annual basis.

- » Develop standards for integration of falls prevention related messaging and services into their screening processes for older adults.
- » Train Primary Care and provider stakeholders (CMP, Chase Brexton, etc.) on utilization of CAREAPP and other referral systems for patients in need of falls prevention related services.
- » Identify and implement evidence-based falls prevention, adaptive device resources, and service awareness campaign to use as coordinated HCLHIC communication campaign.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.

What Partners Will be Involved in Howard County to Achieve the Healthy Aging Goals?

- » All HCLHIC Members and work groups
- » Howard County General Hospital, a Member of Johns Hopkins Medicine
- » Howard County Health Department
- » Horizon Foundation
- » Howard County Department of Community and Citizen Resources

Resources and References

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https://www.thecommunityguide. org/findings/health-communication-and-social-marketing-campaigns-include-mass-media-and-health-related

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https://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-programs-for-older-adultsdle/10665.1/5497/978929061 4623_eng.pdf

http://www.jhsph.edu/research/ centers-and-institutes/ research-to-prevention/publications/peereducation.pdf

http://nrepp.samhsa.gov/AdvancedSearch.aspx

Healthy Weight

Healthy Weight Priority 1: Reduce obesity in Howard County.

How Does This Affect Howard County?



Howard County (63.4%) is meeting the SHIP goal (> 50.4%) for increasing physical activity.

Previously, Howard County did not meet the SHIP goal among Hispanics (31.1%) and females (46.7%) in the county; however, updated demographic breakdown was not available at the time of this report. (Source: MD BRFSS, 2015) Howard County (7.5%) is not meeting the SHIP goal (<10.7%) for adolescents who have obesity among African Americans (12.5%) in the county and barely met the goal for males (10.5%).

12.5%

The number of adolescents who have obesity is trending upward (up from 5.9% in 2013). (Source: MD BRFSS, 2015)



Howard County (32.8%) is not meeting the SHIP goal (> 36.6%) for adults who are not overweight or obese. (Source: MD BRFSS, 2015)

32% of all those surveyed in the HCHAS were advised by a doctor in the last 5 years to lose weight (Source: HCHAS, 2016). Previously, Howard County did not meet the SHIP goal among African Americans (15.8%) in the county however updated demographic breakdown was not available at the time of this report. (Source: MD BRFSS, 2015)

How Do We Address This Problem in Howard County?

Goal 1.1a	Provide referral/linkage for free/low-cost resources for physical activity through community partnerships and evidence-based programs for priority populations.
Goal 1.1b	Engage HCLHIC member organizations in coordinated communication through social, print and other media to educate priority populations.
Goal 1.2a	Provide referral/linkage to free/low-cost nutrition education and services through community partnerships and evidence-based programs for priority populations.
Goal 1.2b	Engage HCLHIC member organizations in coordinated communication through social, print and other media to educate priority populations.

What Do We Expect to See in Howard County as a Result of Our Efforts?

 » By June 30, 2020, participation in free/low-cost physical activity programs for priority populations will be increased by 20%. (Baseline to be established in FY 2018)

Baseline: Horizon Foundation research on free/low cost physical activity programs serve as baseline to be established in FY18.

» By June 30, 2020, 20% of HCLHIC member organizations will be engaged in a coordinated point of decision campaign to promote physical activity for priority populations.

Baseline: There was no coordinated community-wide point of decision campaign in Howard County in FY 2017. Campaign to be developed and engagement measures to be established in FY 2018.

 » By June 30, 2020, 20% of HCLHIC partner organizations engaged in targeted education on walking and biking awareness, safety and community infrastructure by utilizing communication action alert tool.
 Baseline: 5.7% of HCLHIC partner organizations engaged in walking and biking awareness, safety and community infrastructure messaging for priority populations in Howard County as of December 2017. » By June 30, 2020, participation in free/low-cost nutrition education/services for priority populations will be increased by 20%.

Baseline: 650 individuals participated in Adult and Youth Food Supplement Nutrition Education in Howard County in FY 2017. Four programs to address weekend/ summer food insecurity were implemented in Howard County in FY 17. Baseline for participation/capacity to be determined in FY 18.

By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in a coordinated communication effort to reduce consumption of sugary, sweetened beverages and increase healthy food choices for priority populations by utilizing communication action alert tool.

Baseline: 2.3% of HCLHIC partner organizations engaged in messaging to reduce consumption of sugary and sweetened beverages and increase healthy food choices for priority populations in Howard County as of December 2017.

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- » Convene an advisory group (HCRP, We Promote Health, Ellicott City Fitness, CA, YMCA, Lifetime, etc.) to examine current program offerings and recommend expanding existing offerings.
- Partner with HCLHIC member organizations (HCRP, We Promote Health, Ellicott City Fitness, Horizon Foundation, etc.) to offer free/low cost quarterly after school sports programs targeted toward priority populations.
- » Partner with Higher Education institutions and recruit graduate student intern(s); and conduct research on Point of Decision (POD) campaigns, specifically focusing on those with highest impact, and their strategies.
- Convene action group to coordinate campaign. Develop; pilot test with select community stakeholders; adjust for best results as needed. Roll out to all HCLHIC members and community stakeholders.

- » Utilize existing walking/biking safety campaigns and expand to reach target populations.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
- » Convene an advisory group (J2BH, UMD Extension, Giant, etc.) to examine current program offerings and recommend expanding existing offerings.
- » Partner with HCLHIC member organizations (J2BH, UMD Extension, Giant, etc.) to offer free/ low-cost ongoing nutrition programs targeted toward priority populations.
- Utilize existing campaigns to educate sport groups, parents, etc. of priority populations on healthier beverage and snack options.
- » Utilize Action Alert tool to send targeted awareness materials to HCLHIC members during appropriate awareness months.
What Partners Will be Involved in Howard County to Achieve the Healthy Weight Goals?

- » All HCLHIC Members and work groups
- » Howard County General Hospital, a Member of Johns Hopkins Medicine
- » Howard County Health Department
- » Horizon Foundation
- » Howard County Recreation and Parks
- » Howard County Public School System

Resources and References

https://www.thecommunityguide. org/findings/health-communication-and-social-marketing-campaigns-include-mass-media-and-health-related

https://www.thecommunityguide.org/findings/ mental-health-and-mental-illness-interventions-reduce-depression-among-older-adults-clinic

https://www.thecommunityguide. org/findings/physical-activity-point-decision-prompts-encourage-use-stairs

https://www.thecommunityguide. org/findings/physical-activity-community-wide-campaigns

https://www.thecommunityguide. org/findings/physical-activity-social-support-interventions-community-settings

https://www.thecommunityguide. org/findings/physical-activity-family-based-interventions

https://health.maryland.gov/ship/ PDFs/obj%2030%20adult%20 healthy%20weight.pdf

http://www.johnshopkinshealthreview.com/issues/spring-summer-2017/articles/food-and-faith

Appendix

APPENDIX 1.1

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

Goal 1.1a

Provide referral/linkage to diabetes/hypertension/asthma education and services through community partnerships and evidence-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.

		Outcome measurements	
Process Objectives	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2020, participation in evidence-based Chronic Disease Self-Management programs for priority populations will be increased by 20%. Baseline: 169 individuals participated in evidence-based CDSMP, Diabetes and Hypertension programs in Howard County in FY 2017.	EBPs participation increased by 5%	EBPs participation increased by 10%	EBPs participation increased by 10%
By June 30, 2020, participation in evidenced based asthma education for priority populations will be increased by 10%. Baseline: There were no coordinated evidence-based programs in Howard County in FY 2017.	EBPs participation baseline established	EBPs participation increased by 5%	EBPs participation increased by 10%
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. Baseline: There was no active coordinated community campaign on appropriate community uses of primary care, urgent care, emergency department and telemedicine in Howard County in FY 2017.	Appropriate uses of primary care, urgent care, emergency department, and telemedicine awareness- related messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group	Appropriate uses of primary care, urgent care, emergency department, and telemedicine awareness- related messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group	Appropriate uses of primary care, urgent care, emergency department, and telemedicine awareness- related messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group

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. Baseline: 9% of HCLHIC partner organizations engaged in Diabetes, Hypertension and Asthma awareness for priority populations in Howard County as of December 2017.	Diabetes-related services/ awareness messages included in 2 action alerts. Hypertension-related services/awareness messages included in 2 action alerts. Asthma-related services/ awareness messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Diabetes-related services/ awareness messages included in 4 action alerts. Hypertension-related services/awareness messages included in 4 action alerts. Asthma-related services/ awareness messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Diabetes-related services/ awareness messages included in 6 action alerts. Hypertension-related services/awareness messages included in 6 action alerts. Asthma-related services/ awareness messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.
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APPENDIX 1.2

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

Goal 2.1a

Provide referral/linkage to dental care and oral health education through community partnerships and evidence-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.

Process Objectives	Outcome measurements		
	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2018, 600 adult patients will receive free/low cost clinical dental services through Chase Brexton. *Based on FY 18 Oral Disease and Injury Prevention Program deliverables in grant from Maryland Department of Health. Baseline: 1,179 unduplicated adult patients received free/low cost clinical dental services through Chase Brexton in Howard County in FY 2017.	600 adult received free/low cost clinical dental services	To Be Determined as funding allows	To Be Determined as funding allows

By June 30, 2018, 250 children will receive free/low cost clinical dental services through Chase Brexton and Smile Program with HCPSS. Baseline: 287 (on-site) and 797 (off- site) unduplicated children received free/low cost clinical dental services through Chase Brexton in Howard County in FY 2017.	250 children received free/ low cost clinical dental services	To Be Determined as funding allows	To Be Determined as funding allows
By June 30, 2020, dental care providers providing free/low-cost community clinics and/or screening services/restorative care will be increased by 5%. Baseline: 20 dental care providers provided free/low-cost community clinics and/or screening services/ restorative care in Howard County in FY 2017.	Dental care providers providing free/low-cost community clinics and/ or screening services/ restorative care services increased by 1.25%	Dental care providers providing free/low-cost community clinics and/ or screening services/ restorative care services increased by 2.5%	Dental care providers providing free/low-cost community clinics and/ or screening services/ restorative care services increased by 5%
By June 30, 2020, 20% 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. Baseline: There was no active coordinated community education on Oral Health Awareness and Free/sliding scale dental provider awareness for priority populations in Howard County in FY 2017.	Oral Health awareness messages included in 2 action alerts. Free/sliding scale dental provider awareness messages included in 2 action alerts. 5% of HCLHIC member organizations used social media materials provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually	Oral Health awareness messages included in 4 action alerts. Free/sliding scale dental provider awareness messages included in 4 action alerts. 10% of HCLHIC member organizations used social media materials provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually	Oral Health awareness messages included in 6 action alerts. Free/sliding scale dental provider awareness messages included in 6 action alerts. 20% of HCLHIC member organizations used social media materials provided in monthly action tool or other HCLHIC Calls to Action. ATC-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually

APPENDIX 2.1

Behavioral Health Priority 1: Reduce Emergency Department visits related to mental health conditions in Howard County.

Goal 1.1a

Provide referral/linkage for mental health conditions-related education and services through community partnerships and evidence-based programs for priority populations.

Goal 1.1b

Engage HCLHIC member organizations in coordinated communication through social, print and other media on prevention and treatment of mental health-related conditions among priority populations.

		Outcome measurements	
Process Objectives	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2020, participation in education and stigma reduction programs for priority populations will be increased by 20%. Baseline: 300 individuals were trained through 23 Mental Health First Aid (MHFA) courses in Howard County in FY 2017. Baseline for participation/capacity to be determined in FY 18.	Stigma reduction program participation increased by 5%.	Stigma reduction program participation increased by 10%.	Stigma reduction program participation increased by 20%.
By June 30, 2020, 6 educational symposia/CE opportunities for providers, other care professionals and community members working	BH-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually 1-Provider symposia/CE	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 2-Provider symposia/CE	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 3-Provider symposia/CE opportunity held
with priority populations will be provided.	opportunity held 1 community-based presentation/training held	opportunity held 2 community-based presentation/training held	3 community-based presentation/training held annually
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in mental health stigma reduction and awareness for priority populations by utilizing communication action alert tool. Baseline: 12.5% of HCLHIC partner organizations engaged in mental health stigma reduction and awareness for priority populations in Howard County as of December 2017.	Mental health awareness and stigma reduction- related messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Mental health awareness and stigma reduction- related messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Mental health awareness and stigma reduction- related messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool. Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 4 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 6 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.

APPENDIX 2.2

Behavioral Health Priority 2: Reduce Emergency Department visits for addictions-related conditions in Howard County.

Goal 2.1a

Provide referral/linkage for addictions-related education and services through community partnerships and evidence-based programs for priority populations.

Goal 2.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media to reduce stigma about prevention and treatment of addictions-related conditions among priority populations.

		Outcome measurements		
Process Objectives	Short Term FY 18	Mid Term FY 19	Full Term FY 20	
By June 30, 2020, participation in addiction awareness and stigma reduction programs for priority populations will be increased by 20%. Baseline for participation/capacity to be determined in FY 18.	Stigma reduction program participation increased by 5%.	Stigma reduction program participation increased by 10%.	Stigma reduction program participation increased by 20%.	
By June 30, 2020, 6 educational symposia/CE opportunities for providers, other care professionals and community members working with priority populations will be provided.	BH-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually 1-Provider symposia/CE opportunity held 1 community-based presentation/training held	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 2-Provider symposia/CE opportunity held 2 community-based presentation/training held	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 3-Provider symposia/CE opportunity held 3 community-based presentation/training held annually	
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in addictions-related stigma reduction and awareness for priority populations by utilizing communication action alert tool. Baseline: 1.2% of HCLHIC partner organizations engaged in addictions-related stigma reduction and awareness for priority populations in Howard County as of December 2017.	Addiction awareness and stigma reduction-related messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Addiction awareness and stigma reduction-related messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Addiction awareness and stigma reduction-related messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	

By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool.

Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017. Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 2 action alerts.

5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 4 action alerts.

5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 6 action alerts.

5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.

APPENDIX 2.3

Behavioral Health Priority 3: Reduce suicide rates in Howard County.

Goal 3.1a

Provide referral/linkage for suicide prevention education and services through community partnerships and evidence-based programs for priority populations.

Goal 3.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media to reduce stigma about suicide among priority populations.

Process Objectives	Outcome measurements		
	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in suicide-related stigma reduction and awareness for priority populations by utilizing communication action alert tool. Baseline: 2.3% of HCLHIC partner organizations engaged in suicide- related stigma reduction and awareness for priority populations in Howard County as of December 2017.	Suicide prevention and stigma reduction messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action	Suicide prevention and stigma reduction messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Suicide prevention and stigma reduction messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.
By June 30, 2020, 6 educational symposia/CE opportunities for providers, other care professionals and community members working with priority populations will be provided.	BH-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually 1-Provider symposia/CE opportunity held 1 community-based presentation/training held	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 2-Provider symposia/CE opportunity held 2 community-based presentation/training held	BH-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 3-Provider symposia/CE opportunity held 3 community-based presentation/training held annually

By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in targeted education on appropriate uses of emergency department and crisis intervention services for priority populations by utilizing communication action alert tool. Baseline: There was no coordinated targeted community education on appropriate uses of emergency department and crisis intervention in Howard County in FY 2017.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 4 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.	Appropriate uses of emergency department and crisis intervention services awareness-related messages included in 6 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action.
By June 30, 2020, participation in suicide prevention programs for priority populations will be increased by 20%. Baseline: 359 individuals were trained through 20 Question- Persuade-Refer (QPR) courses and 20 individuals participated in Applied Suicide Intervention Skills Training (ASIST) through 2 trainings in Howard County in FY 2017. Baseline for participation/capacity to be determined in FY 18.	Stigma reduction program participation increased by 5%.	Stigma reduction program participation increased by 10%.	Stigma reduction program participation increased by 20%.

APPENDIX 3.1

Healthy Aging Priority 1: Reduce Alzheimer's and dementia-related emergencies in Howard County.

Goal 1.1a

Provide referral/linkage to brain health education, future and advanced care planning for healthy aging and aging-related services through community partnerships and outreach programs for priority populations.

Goal 1.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media on brain health education, future and advanced care planning for healthy aging and aging-related services for priority populations.

Process Objectives		Outcome measurements	
	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2020, 6 educational symposia/CE opportunities for caregivers to priority populations will be provided.	2 presentation/training opportunities for caregivers to priority populations community held	4 presentation/training opportunities for caregivers to priority populations community held	6 presentation/training opportunities for caregivers to priority populations community held

By June 30, 2020, participation in evidence-based programs for priority populations will be increased by 20%. Baseline: 140 individuals participated in Virtual Dementia Tours, 26 individuals participated in Powerful Tools for Caregivers, and 30 individuals participated in Memory Cafes in Howard County in FY 2017.Baseline for participation/ capacity to be determined in FY 18.	EBPs participation increased by 5%	EBPs participation increased by 10%	EBPs participation increased by 20%
By June 30, 2020, 4 educational symposia/CE opportunities for providers and other care professionals working with priority populations will be provided.	HA-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually 1-Provider symposia/CE opportunity held 1 community-based presentation/training held	HA-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 2-Provider symposia/CE opportunity held 2 community-based presentation/training held	HA-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 3-Provider symposia/CE opportunity held 3 community-based presentation/training held
By June 30, 2020, 20% of HCLHIC partner organizations will provide Alzheimer's and dementia-related resources for priority populations. Baseline: Criteria for engagement of member organizations in integrating Alzheimer's/Dementia related resources into standard screening/ educational services provided for older adults will be determined in FY 18.	5% of HCLHIC member organizations with Alzheimer's/Dementia related resources integrated into standard screening/ educational services for older adults	10% of HCLHIC member organizations with Alzheimer's/Dementia related resources integrated into standard screening/ educational services for older adults	20% of HCLHIC member organizations with Alzheimer's/Dementia related resources integrated into standard screening/ educational services for older adults
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in communicating education/future planning messages for priority populations by utilizing communication action alert tool. Baseline: 4.5% of HCLHIC partner organizations engaged in education/ future planning messaging for priority populations in Howard County as of December 2017.	Brain health education, future and advanced care planning for healthy aging and aging-related services messages included in 2 action alerts. 5% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. Healthy Aging specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	Brain health education, future and advanced care planning for healthy aging and aging-related services messages included in 4 action alerts. 10% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. Healthy Aging specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	Brain health education, future and advanced care planning for healthy aging and aging-related services messages included in 6 action alerts. 20% of HCLHIC member organizations use messages/resources provided in monthly action tool or other HCLHIC Calls to Action. Healthy Aging specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually

APPENDIX 3.2

Healthy Aging Priority 2: Reduce fall-related deaths in Howard County.

Goal 2.1a

Provide referral/linkage to fall prevention, adaptive device resources and awareness services through community partnerships and evidence-based education programs for priority populations.

Goal 2.1b

Engage HCLHIC member organizations in coordinated communication efforts through social, print and other media on fall prevention, adaptive device resources and awareness services for priority populations.

		Outcome measurements	
Process Objectives	Short Term FY 18	Mid Term FY 19	Full Term FY 20
By June 30, 2020, participation in evidence-based programs for priority populations will be increased by 20%. Baseline: 54 individuals participated in Stepping On and 1,368 individuals participated in Fire and Fall Safety Presentations in Howard County in FY 2017. Baseline for participation/ capacity to be determined in FY 18.	EBPs participation increased by 5%	EBPs participation increased by 10%	EBPs participation increased by 20%
By June 30, 2020, 4 educational symposia/CE opportunities for providers and other care professionals working with priority populations will be provided.	HA-specific presentation/ training held during 1 full LHIC meeting /1 work group meeting annually 1-Provider symposia/CE opportunity held 1 community-based presentation/training held	HA-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 2-Provider symposia/CE opportunity held 2 community-based presentation/training held	HA-specific presentation/ training held during 1 full LHIC meeting/1 work group meeting annually 3-Provider symposia/CE opportunity held 3 community-based presentation/training held
By June 30, 2020, 6 educational symposia/CE opportunities for caregivers to priority populations will be provided.	2 presentation/training opportunities for caregivers to priority populations community held	4 presentation/training opportunities for caregivers to priority populations community held	6 presentation/training opportunities for caregivers to priority populations community held
By June 30, 2020, 20% of HCLHIC partner organizations will integrate fall prevention practices in standard operations. Baseline: Criteria for engagement of member organizations in integrating fall prevention practices into standard screening/educational services provided for older adults will be determined in FY 18.	5% of HCLHIC member organizations with falls prevention practices integrated into standard screening/educational services for older adults	10% of HCLHIC member organizations with falls prevention practices integrated into standard screening/educational services for older adults	20% of HCLHIC member organizations with falls prevention practices integrated into standard screening/educational services for older adults

Fall Prevention-related Fall Prevention-related Fall Prevention-related By June 30, 2020, 20% of HCLHIC messages included in 2 messages included in 4 messages included in 6 partner organizations will be action alerts. action alerts. action alerts. engaged in communicating falls prevention, adaptive device 5% of HCLHIC member 10% of HCLHIC member 20% of HCLHIC member resources and awareness of organizations use organizations use organizations use services for priority populations by messages/resources messages/resources messages/resources utilizing communication action alert provided in monthly action provided in monthly action provided in monthly action tool. tool or other HCLHIC Calls to tool or other HCLHIC Calls to tool or other HCLHIC Calls to Baseline: 0% of HCLHIC partner Action. Action. Action. organizations engaged in falls prevention, adaptive device Healthy Aging specific Healthy Aging specific Healthy Aging specific resources and awareness of presentation/training held presentation/training held presentation/training held services messaging for priority during 1 full HCLHIC meeting during 1 full HCLHIC meeting during 1 full HCLHIC meeting populations in Howard County as of /1 work group meeting /1 work group meeting /1 work group meeting December 2017. annually annually annually

APPENDIX 4.1

Healthy Weight Priority 1: Reduce obesity in Howard County.

	Provide referral/linkage for free/low-cost resources for physical activity through community			
Goal 1.1a	partnerships and evidence-based programs for priority populations.			
Goal 1.1b	Engage HCLHIC member organizations in coordinated communication through social, print and other media to educate priority populations.			
Goal 1.2a	Provide referral/linkage to free/low-cost nutrition education and services through community partnerships and evidence-based programs for priority populations.			
Goal 1.2b	Engage HCLHIC member organizations in coordinated communication through social, print and other media to educate priority populations.			

Process Objectives	Outcome measurements			
	Short Term FY 18	Mid Term FY 19	Full Term FY 20	
By June 30, 2020, 20% of HCLHIC member organizations will be engaged in a coordinated point of decision campaign to promote physical activity for priority populations. Baseline: There was no coordinated community-wide point of decision campaign in Howard County in FY 2017. Campaign to be developed and engagement measures to be established in FY 2018.	POD campaign to promote physical activity established.	10% of HCLHIC member organizations use messages/resources provided in POD campaign to promote physical activity.	20% of HCLHIC member organizations use messages/resources provided in POD campaign to promote physical activity.	

By June 30, 2020, participation in free/low-cost physical activity programs for priority populations will be increased by 20%. (Baseline to be established in FY 2018) Baseline: Horizon Foundation research on free/low cost physical activity programs serve as baseline to be established in FY18.	Participation in free/ low-cost physical activity programs for priority populations increased by 5%.	Participation in free/ low-cost physical activity programs for priority populations increased by 10%.	Participation in free/ low-cost physical activity programs for priority populations increased by 20%.
By June 30, 2020, 20% of HCLHIC partner organizations engaged in targeted education on walking and biking awareness, safety and community infrastructure by utilizing communication action alert tool. Baseline: 5.7% of HCLHIC partner organizations engaged in walking and biking awareness, safety and community infrastructure	Walking and biking awareness, safety and community infrastructure messages included in 2 action alerts. 5% of HCLHIC partner organizations engaged in targeted education on walking and biking awareness, safety and community infrastructure. Healthy Weight specific	Walking and biking awareness, safety and community infrastructure messages included in 4 action alerts. 10% of HCLHIC partner organizations engaged in targeted education on walking and biking awareness, safety and community infrastructure. Healthy Weight specific	Walking and biking awareness, safety and community infrastructure messages included in 6 action alerts. 20% of HCLHIC partner organizations engaged in targeted education on walking and biking awareness, safety and community infrastructure. Healthy Weight specific
messaging for priority populations in Howard County as of December 2017.	presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually
By June 30, 2020, participation in free/low-cost nutrition education/ services for priority populations will be increased by 20%. Baseline: 650 individuals participated in Adult and Youth Food Supplement Nutrition Education in Howard County in FY 2017. Four programs to address weekend/ summer food insecurity were implemented in Howard County in FY 17. Baseline for participation/ capacity to be determined in FY 18.	Participation in free/low- cost nutrition education/ services for priority populations increased by 5%	Participation in free/low- cost nutrition education/ services for priority populations increased by 10%	Participation in free/low- cost nutrition education/ services for priority populations increased by 20%
By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in a coordinated communication effort to reduce consumption of sugary, sweetened beverages and increase healthy food choices for priority populations by utilizing communication action alert tool. Baseline: 2.3% of HCLHIC partner organizations engaged in	Healthy Beverage and snack option messages included in 2 action alerts. 5% of HCLHIC partner organizations engaged in targeted education to reduce consumption of sugary and sweetened beverages and increase healthy food choices.	Healthy Beverage and snack option messages included in 4 action alerts. 10% of HCLHIC partner organizations engaged in targeted education to reduce consumption of sugary and sweetened beverages and increase healthy food choices.	Healthy Beverage and snack option messages included in 6 action alerts. 20% of HCLHIC partner organizations engaged in targeted education to reduce consumption of sugary and sweetened beverages and increase healthy food choices.
messaging to reduce consumption of sugary and sweetened beverages and increase healthy food choices for priority populations in Howard County as of December 2017.	Healthy Weight specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	Healthy Weight specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually	Healthy Weight specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually

Notes

Howard County LHIC

Local Health Improvement Coalition



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