

Howard County Local Health Improvement Coalition
Access to Care Work Group FY19 Mid-Year Delegate Report
January 10, 2019

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 19 Q1 Progress Report

	Discussion
<p>List the action item (s) that this work group will complete by June 2018.</p>	<p>The action items this group will complete by June 2019 are as follows:</p> <ul style="list-style-type: none"> A. Increase evidence-based diabetes and hypertension program participation for priority populations by 10% B. Increase evidence-based asthma program participation for priority populations by 5% 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 10% 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 2.5%
<p>What is the current status of the action item (s) above during this month?</p>	<p>The current status of the action items are as follows:</p> <ul style="list-style-type: none"> A. Second quarter 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 was held in November 2018 based upon group’s agreement to convene quarterly to review participation and capacity issues. Q3 CDSME action group meeting is tentatively scheduled for the end of January. <p>Mid-year data collection for FY 19 is being completed for CDSME courses. Data reporting to date:</p>

B. In October Access to Care Work Group, County Primary Care Physicians and Pediatricians were invited and engaged to review modified Asthma Action Plan which included new case management release. The Asthma Action Group met in November. In this meeting, Action Group members identified children enrolled in the HCPSS telehealth sites who have an Asthma Diagnosis and those who have a Standing Order for Asthma Medication in School as the initial target population. In tandem with targeting the specified children and their parents, pediatricians within Howard County will also be engaged in this initiative.

AsthME program, LHIC staff, HCPSS Health Coordinator and the HCHD School-Based Wellness Center staff met to discuss the AsthME program and the possibility for collaboration in patient case management and physician engagement.

C. FY 19 Q1 Full Coalition meeting was CDSME focused. Coalition members were engaged to: increase referrals into CDSME, serve as host sites, embed leaders within programs, volunteer as lay leaders and support chronic pain initiatives.

February Access to Care Work Group meeting will have the Executive Director of the Maryland Dental Action Coalition speak on MDAC's initiatives and access to oral health care, the adult dental waiver program and actions on key legislative issues that may be addressed during the 2019 session of the Maryland General Assembly.

D. Targeted communication messages have begun being sent out to coalition members through Action Alerts, Digest articles and ad hoc calls to action.

E. Targeted communication messages have begun being sent out to coalition members through Action Alerts, Digest articles and ad hoc calls to action.

F. HCLHIC managed grant in collaboration with Chase Brexton is continuing to support dental services. Grant funding is meant to serve 600 adults annually.

G. HCPSS students are continuing to receive dental services through the Maryland Smiles Program piloted in collaboration with the Howard County Public School System.

H. Health Officer at the Howard County Health Department represented the HCLHIC at the Howard County Dental Association's December meeting to discuss possibilities for collaboration in dental provider recruitment for MA,

	<p>dental provider recruitment for advisory input and access to HCDA to plan LHIC-relevant CE opportunities.</p>
<p>What are the next steps and projected timelines for the next month to accomplish the action item (s) above?</p>	<p>The next steps in order to accomplish the action items are as follows:</p> <p>A. FY 19 Q3 CDSME meeting will be held at the end of January to review mid-year data of CDSME classes, discuss next steps in facilitating partnerships held at the Full LHIC and strategies to overcome barriers related to class venues</p> <p>B. HCHD staff will work to identify children within Howard County elementary schools that fit initiative criteria (asthma diagnosis, standing order, enrolled in telehealth program). The physicians of these children will be engaged</p> <p>Partnering physician will provide an draft of key engagement points to include when conducting outreach to physicians.</p> <p>School Health staff will put together a document outlining support and clinical services school nurses can provide as a resource to physicians.</p> <p>AsthME will provide information on offering a demo of the AsthME app to Asthma Action Group members and offer a per patient/per model cost estimate for the two delivery methods.</p> <p>C. Following February work group meeting, this item will be completed for FY 19.</p> <p>D. Work with over-arching HCLHIC Communications action group to determine FY 19 approaches using action alert tool and coordinated communications. Further development of awareness month-specific messaging will occur.</p> <p>E. Work with over-arching HCLHIC Communications action group to determine FY 19 approaches using action alert tool and coordinated communications.</p> <p>F. HCLHIC management of HCODIP grant will continue throughout FY 19.</p> <p>G. Work with HCPSS to identify strategies for supporting Smile Maryland dental program expansion in 2019.</p> <p>H. HCLHIC staff will work with HCDA to:</p> <ul style="list-style-type: none"> • Speak with the CE Director about working with the LHIC to develop a CE event in the 2019 calendar year to present the process of accepting MA within dental practices.

Howard County LHIC

Local Health Improvement Coalition

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	<ul style="list-style-type: none">• Develop a FAQs document related to the process of accepting MA within dental practices.• Engage dental providers that have voiced interest in being part of the advisory group and seek to identify and engage more.• Put together preliminary ideas for a presentation at an upcoming Healthy Aging meeting, re: providing dental screenings for aging population in residential centers.
List specific action(s) needed from HCLHIC members; specific work group(s); leadership; and/or others to successfully implement next steps for the month ahead.	The specific actions that are needed from HCLHIC members are as follows: <ol style="list-style-type: none">1. Participation in action groups2. Promotion, hosting, facilitation of CDSME classes3. Identification of potential dental providers4. Engagement in Action Alert Tool calls to action

Respectfully submitted by
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