

# HOWARD COUNTY LOCAL HEALTH IMPROVEMENT COALITION

August 27, 2019

Kelly Kesler, Director  
Howard County Local Health Improvement Coalition

Shanika Cooper, Delegate  
Howard County Health Department

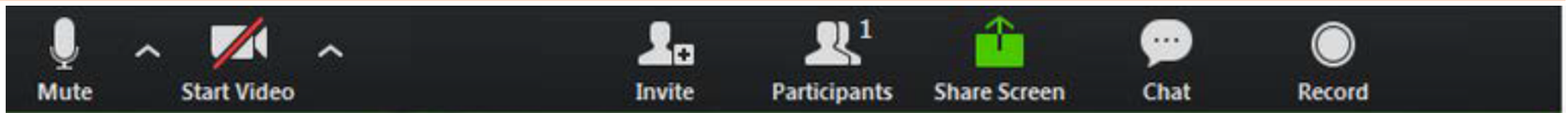
Tara Butler, Delegate  
Howard County General Hospital

## Howard County LHIC

Local Health Improvement Coalition



# INSTRUCTIONS – HYBRID MEETING



## Computer/ Video: Participant controls in the lower left corner of the Zoom screen

Using the icons in the lower left corner of the Zoom screen, you can:

- Mute/Unmute your microphone (far left on computer); Mute/Unmute button on phone
- **All lines will be muted to minimize background noise**
- **Lines will be unmuted at the end for discussion/questions**
- **Please mute yourself during discussion/questions if not speaking**
- View Participant list on computer– opens a pop-out screen that includes a “Raise Hand” icon that you may use to raise a virtual hand
- **Please raise your virtual hand to ask question or make a comment during the discussion**
- **Question/ comment can also be added to the chat box throughout the meeting**

❖ *Not a Video Call...you cannot see us and we cannot see you...we can only hear you.*

## PURPOSE & AGENDA

GOAL: By the end of this meeting, work group members will discuss 2018 Howard County Health Assessment Survey data as related to work group priorities and generate tactics for increasing host-sites and referrals to DMSPs in Howard County.

AGENDA:

- A. Member Announcements
- B. HCHAS Data
- C. FY 19 Year End Outcomes
- D. CDSMP/DSMP Needs

# RECAP OF LAST MEETING – JUNE 2019 ANNOUNCEMENTS

## From June:

- Adult Dental Waiver
  - MDAC Letter
  - Provider Meetings
- BLSA
  - April 30<sup>th</sup> Full Coalition Event

## Current Announcements:

- YMCA Open Doors
- Alzheimer's and Dementia Community Forum
- Out of the Darkness Walk
- Walk to End Alzheimer's
- NAACP Elder Empowerment Summit
- Other

## OPEN TO ALL

As a cause-driven, charitable organization, we value the practice of inclusion for all.

If you are unable to participate in Y membership, programs or services due to financial hardship, we encourage you to apply for our Open Doors financial assistance program\*.

Go to [ymaryland.org/opendoors](http://ymaryland.org/opendoors) to get started.



\*The Y is deeply committed to raising the funds necessary to remove income as a barrier to meaningful Y experiences. The availability of Open Doors funds is dependent on charitable donations. Please give if you can at [ymaryland.org](http://ymaryland.org).

The Y.™ For a better us.

Promote. Preserve. Protect.

[www.hclhic.org](http://www.hclhic.org)

@hclhic  

# WALK MARYLAND DAY 2018 OUTCOMES & 2019 PLANNING



**WALK  
MARYLAND  
DAY IS OCT. 2**

Want to participate? You can either:

- 1) Become a Walking Leader by registering at <http://bit.ly/WalkMDDay>
- 2) Host a walk by registering at <http://bit.ly/WalkMDDay>
- 3) Walk on your own or with a friend
- 4) Join a walking event listed on the Walk Maryland Day website at <http://bit.ly/WalkMaryland>

To learn about Walk Maryland Day visit <http://bit.ly/WalkMaryland>

Co-sponsored by:  
Maryland Department of Health  
Maryland Department of Aging  
Prince George's County Planning Department  
CalvertHealth



## 2018

- 10- Howard County Walking Leaders registered including the following Coalition groups- HCHD, HCGH, Columbia Association, UMD Extension, Local Children's Board, East Columbia 50+ Center, Winter Growth, Inc.-Columbia
- Statewide there were over 100 registered walking leaders and walks, over 80 schools, and more than 4,000 walkers
- HCLHIC Virtual Walk- 33 Individuals signed up with a total of 269,616 steps /127.66 miles reported
  - SB Team: 93,422 steps / 44.23 miles
  - LW Team : 176, 194 steps / 83.43 miles
- The total steps for the Health Department on Walk MD Day were 584,949 steps/276.96 miles and total of 1954 miles in 7 days. That equals walking almost to Salt Lake City, Utah!!!!

## 2019

- Virtual Coalition Event
- Redefining walking for inclusivity

Promote. Preserve. Protect.

[www.hclhic.org](http://www.hclhic.org)

@hclhic  

# HCLHIC STRATEGIC GOALS FOR ACCESS TO CARE

**FY 18-20 Priority 1:** Reduce emergency department visits for diabetes, hypertension and asthma in Howard County

**FY 18-20 Goals:**

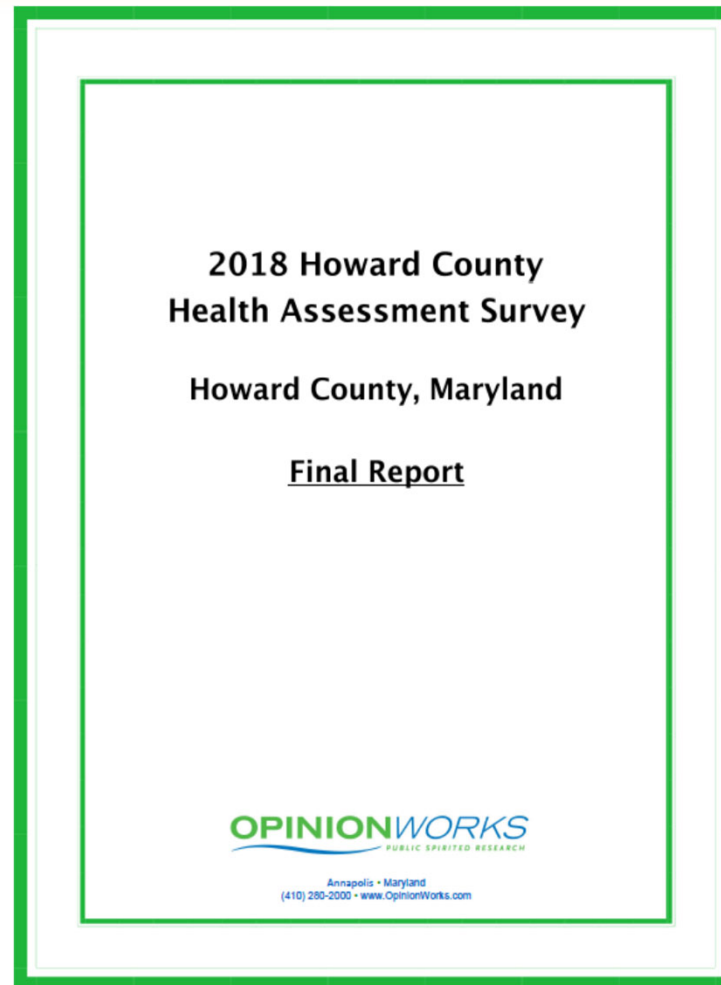
By June 30, 2020, participation in evidence-based CDSMP, Diabetes and Hypertension programs will be increased by 20%.

*Year Two progress: 19.3% increase in participation to capacity over FY 17 baseline of 56.1% (combined programs)*

By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in Diabetes, Hypertension and Asthma awareness for priority populations.

*27.7% of HCLHIC partner organizations (37/130) engaged in Diabetes, Hypertension and Asthma Awareness for Priority Populations in Howard County in FY 2019. (18.7% increase over baseline 9% baseline)*

# 2018 HCHAS DATA



<https://www.howardcountymd.gov/Departments/Health/Reports-Data>

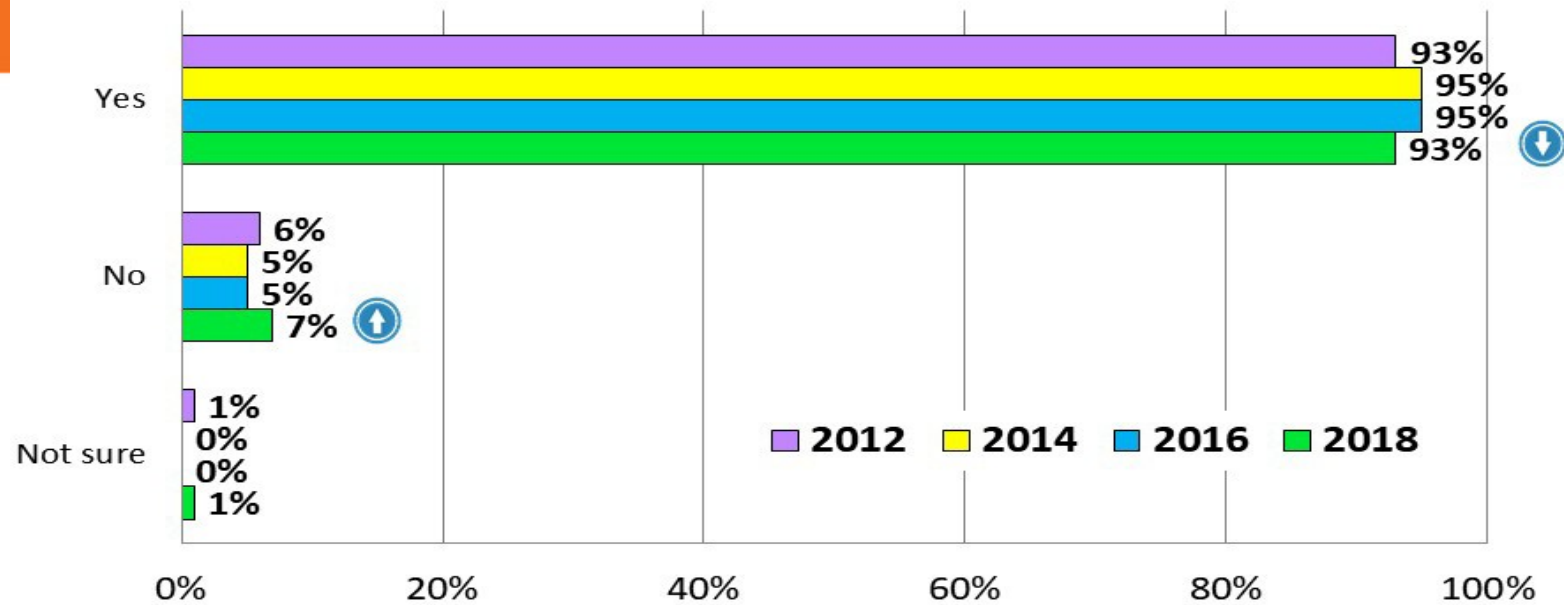
Promote. Preserve. Protect.

[www.hclhic.org](http://www.hclhic.org)

@hclhic  

## Health Care Coverage

*Asked of all respondents*



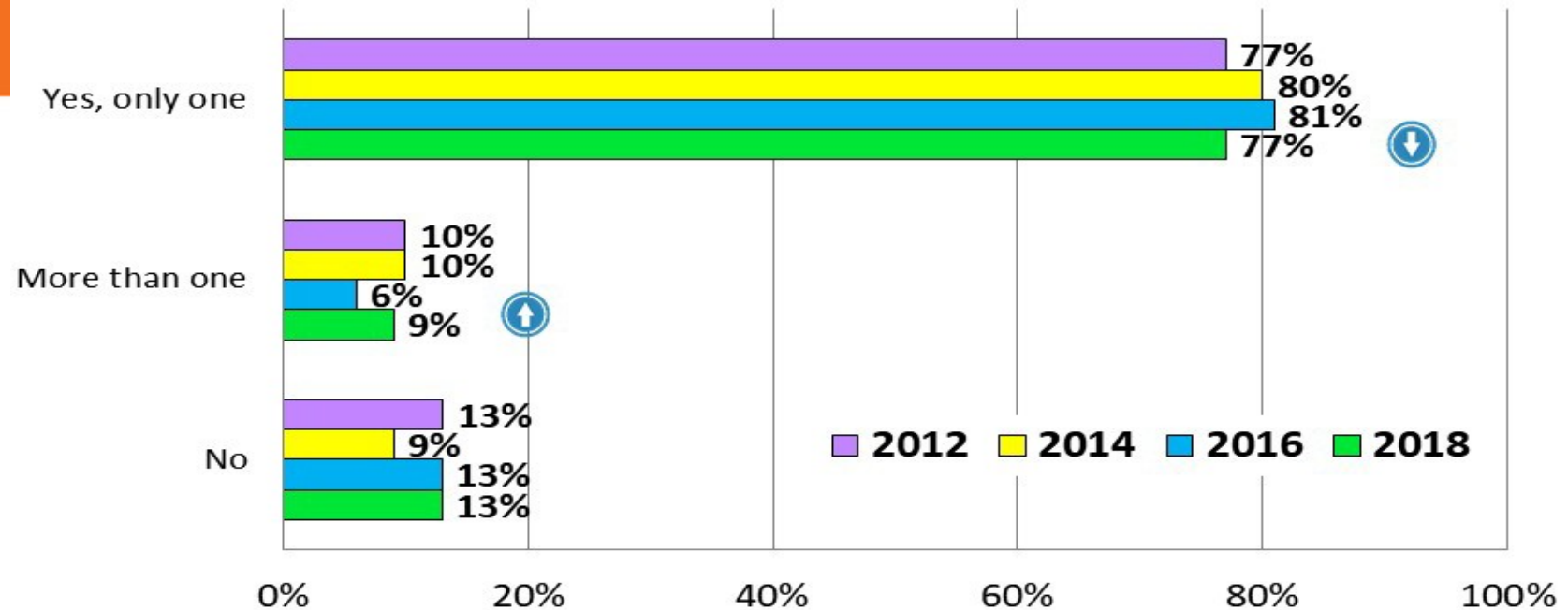
**Q3.1. Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare or Indian Health Services?**

- 93% of Howard County adult residents have health care coverage in 2018. This represents a slight decrease from the levels measured in 2016 and 2014, and equals the 93% coverage measured in 2012.
- Residents are less likely to have health care coverage if they are younger, Hispanic, lower-income, or less- educated.



## Personal Health Care Provider

*Asked of all respondents*



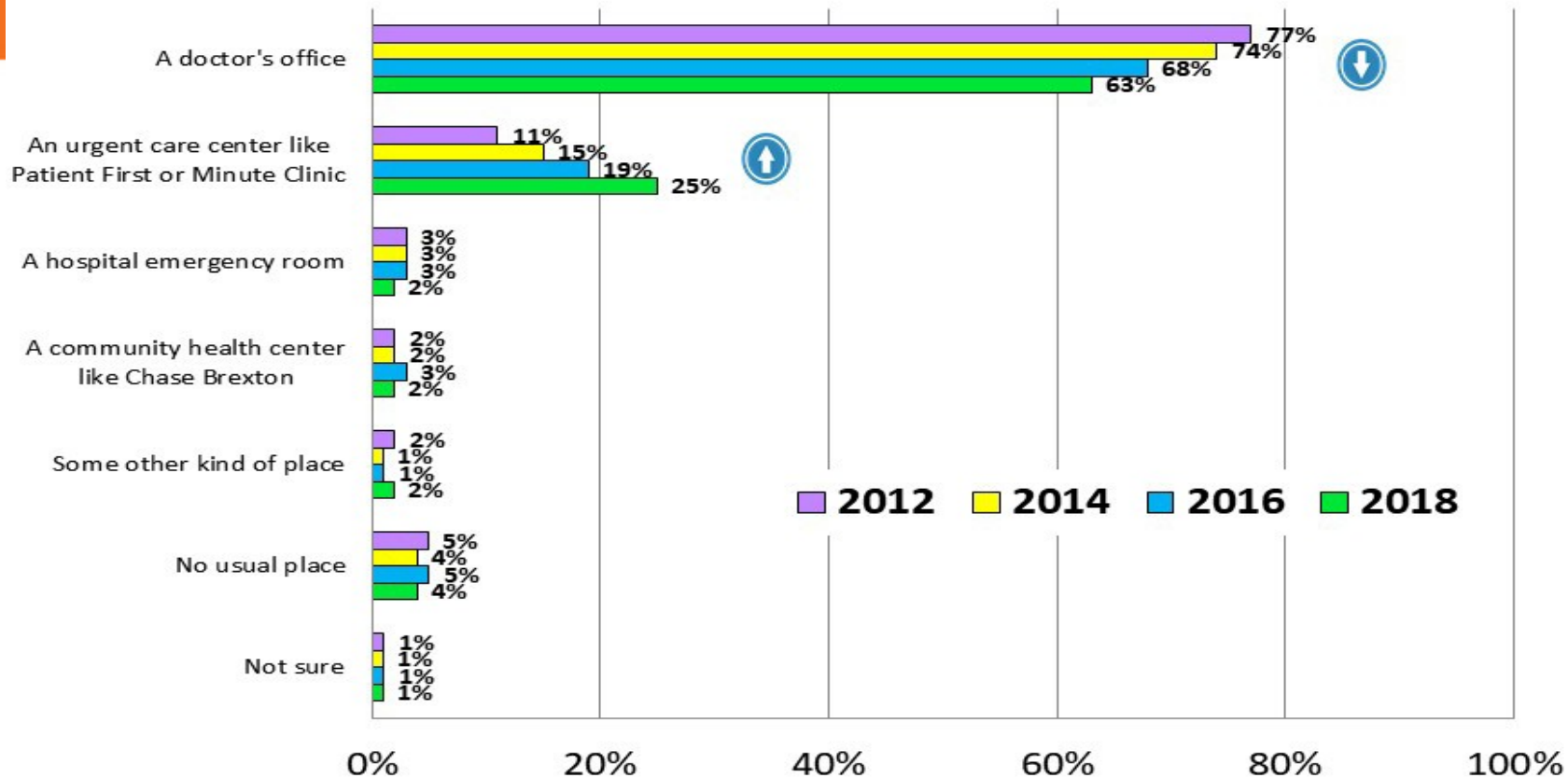
**Q3.2. Do you have one person you think of as your personal doctor or health care provider? (If No): Is there more than one, or is there no person who you think of as your personal doctor or health care provider?**

- 86% of Howard County residents have at least one person that they think of as their personal doctor or health care provider. This overall number is virtually unchanged from prior years.
- Residents are less likely to have a personal doctor or health care provider if they are younger, self-employed or unemployed, or never married.

2018 Howard County Health Assessment Survey Report of Findings

# Typical Health Care Provider

Asked of all respondents



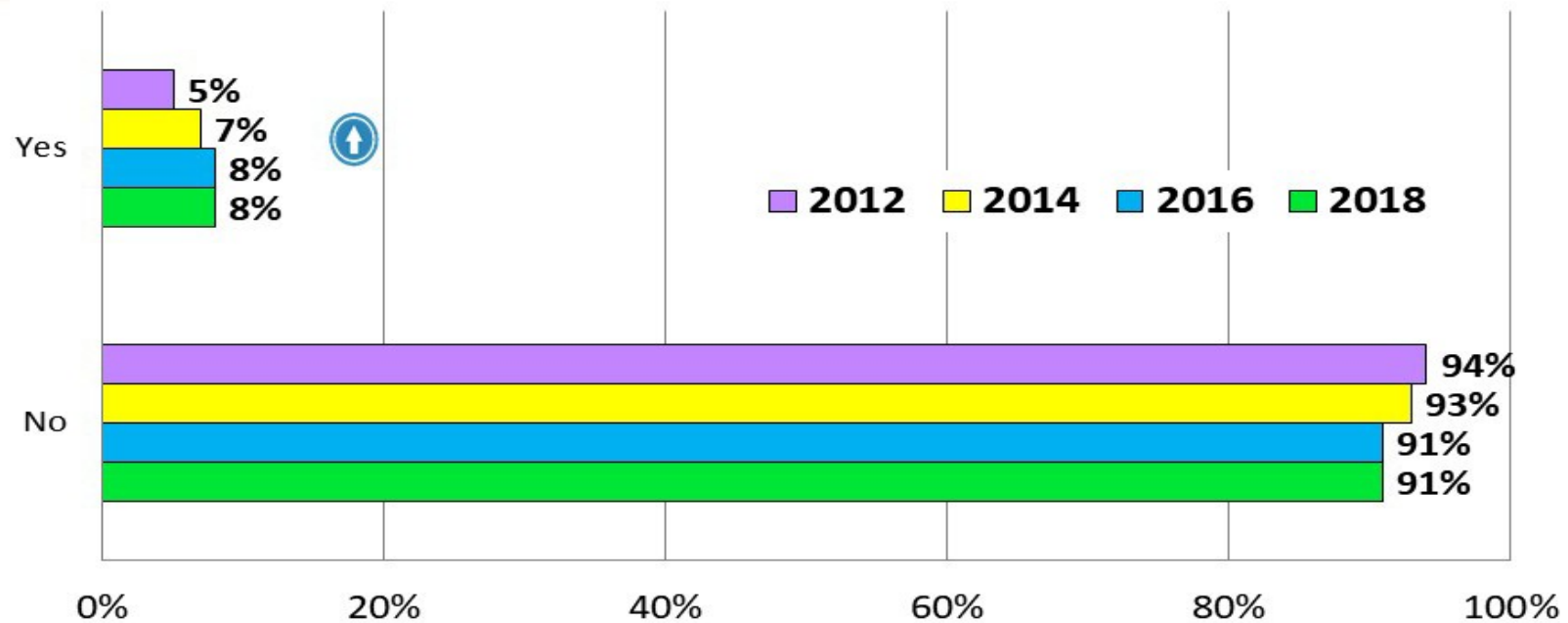
**Q3.3A. When you are sick or need medical attention, to which one of the following places do you usually go?**

- There is a notable migration to urgent care centers, which have increased their share as the place that residents *usually* go when they are sick or need medical attention from 11% in 2012 to 25% of residents in 2018.

2018 Howard County Health Assessment Survey Report of Findings

## Emergency Room Visit in Lieu of Doctor Appointment

*Asked of all respondents*

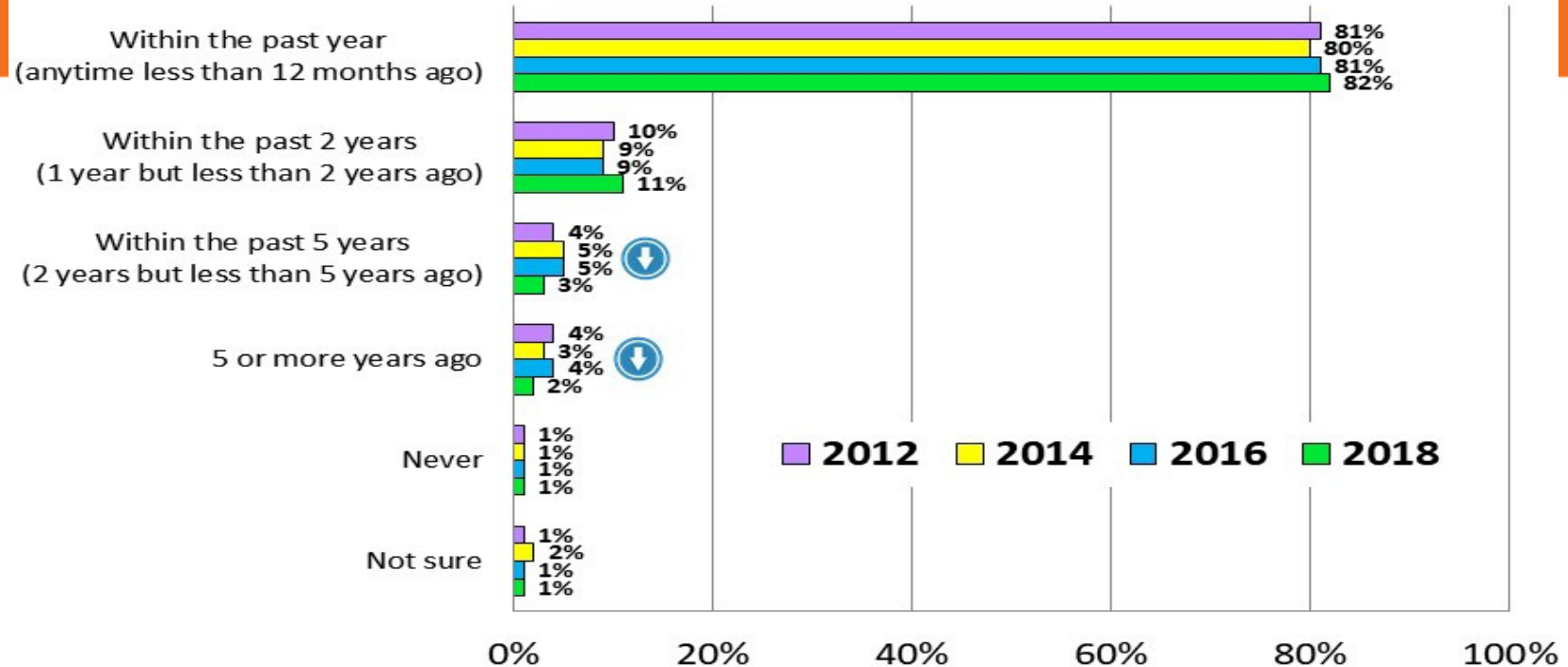


**Q3.3C. Was there a time in the past 12 months when you needed to go to the emergency room because you could not get a timely appointment with a doctor?**

- 2% said a hospital emergency room is their usual site of care, 2% usually visit a community health center, and 2% said they usually visit “some other kind of place.” 4% said there is no usual place they go.
- Use of an emergency room in lieu of a doctor is greater among lower income groups, as well as among residents with less than a four-year college degree.

## Time Since Last Dental Visit

*Asked of all respondents*



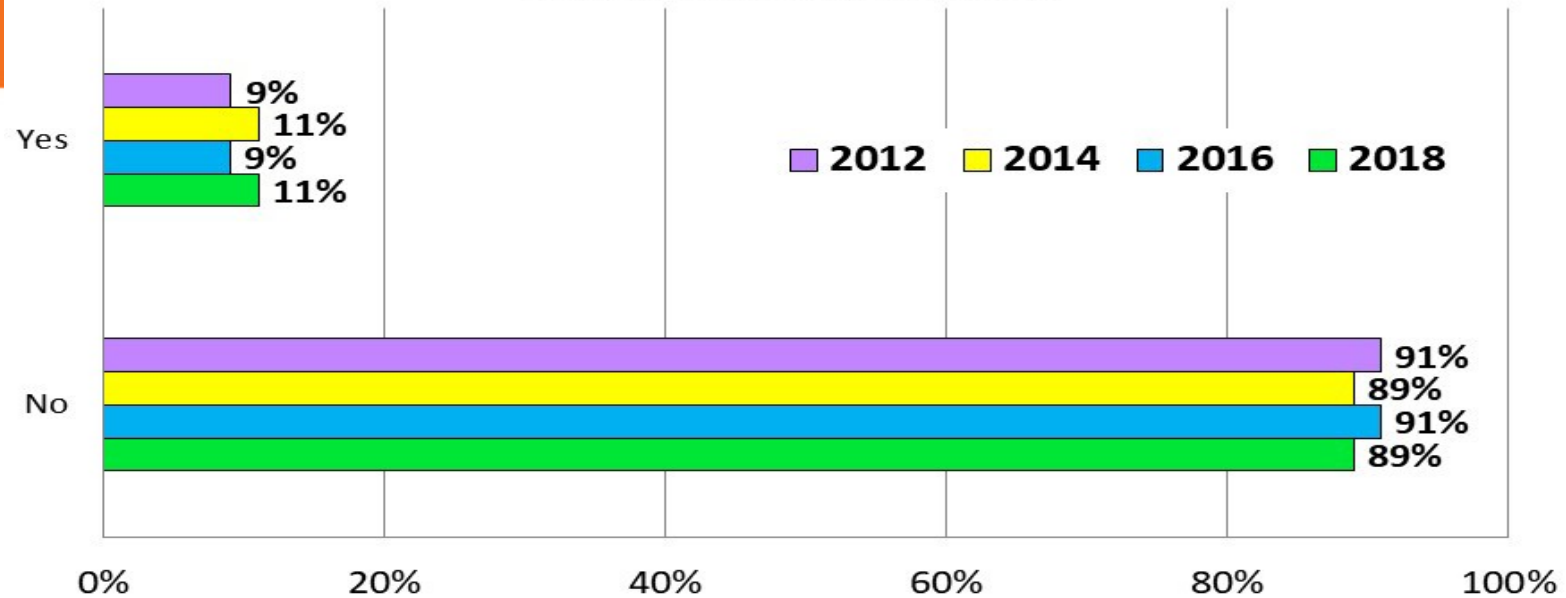
**ORAL1. How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists.**

- 82% of Howard County residents in the 2018 survey have visited a dentist or dental clinic within the last 12 months. This is on a par with prior reporting periods; 2% said their most recent dental visit was more than five years ago, and 1% said they have never had a dental visit.
- Residents are less likely to have had a dental visit in the past 12 months if they live in ElkrIDGE, earn less than \$50,000, or have less than a four-year college degree.

2018 Howard County Health Assessment Survey Report of Findings

## Did Not Get Dental Care

Asked of all respondents



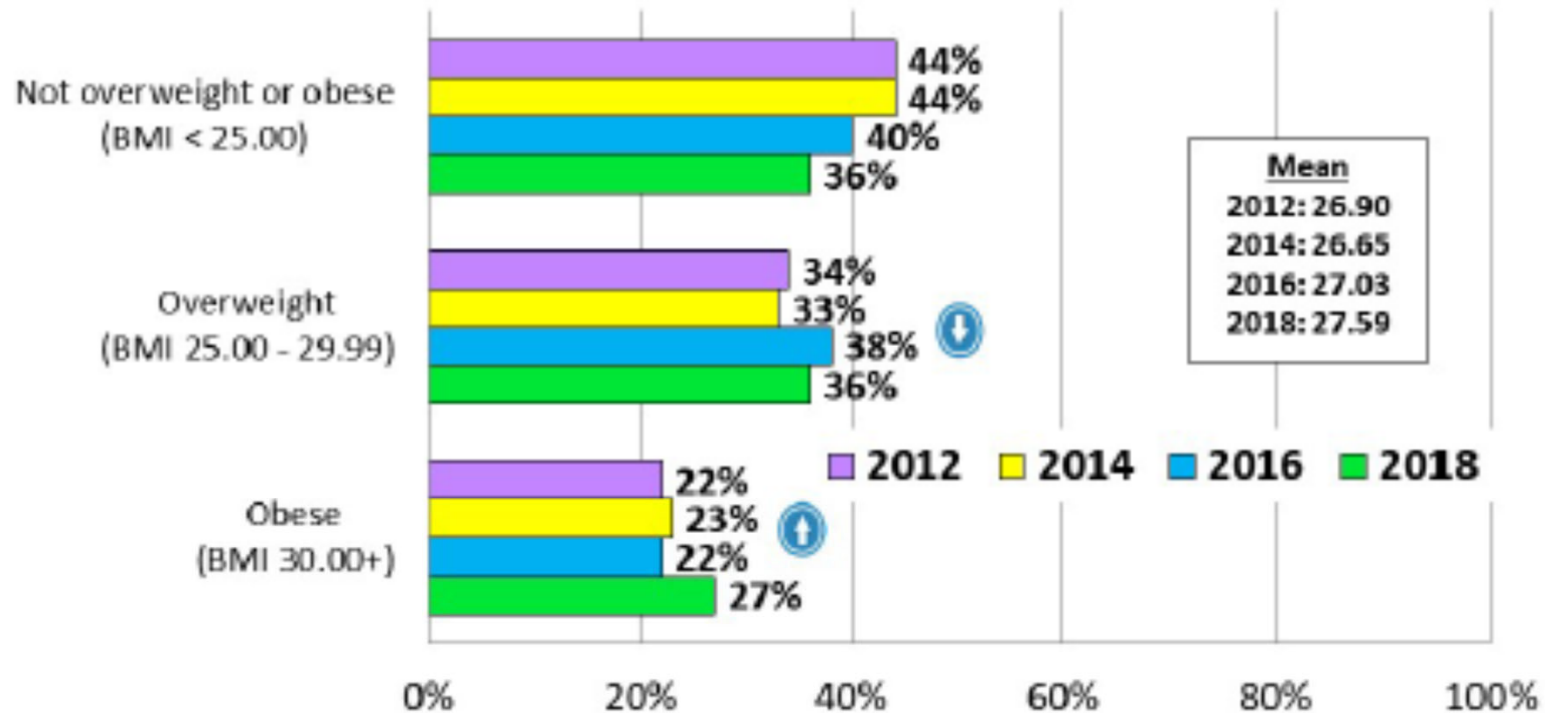
**ORAL2. During the last 12 months, have you had a dental problem which you would have liked to see a dentist about but you didn't see the dentist?**

- 11% of residents said they had a dental problem in the prior 12 months where they would have liked to have seen a dentist but did not do so. This is an increase from the 9% reported in 2016, but on a par with the number reported in 2014.
- Residents are more likely to have put off seeing a dentist if they live in the Columbia Planning District, are younger than 35, are Hispanic, earn less than \$50,000, or are self-employed or unemployed.

2018 Howard County Health Assessment Survey Report of Findings

# BMI

Asked of all respondents



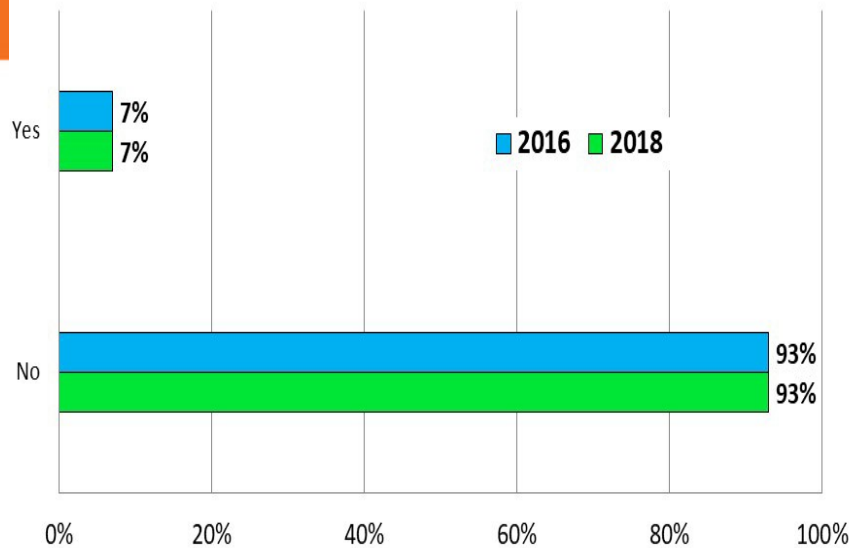
Body Mass Index Calculation based on Q8.11 (weight) and Q8.12 (height).

- Based on survey questions about residents' height and weight, together, 63% of the County's adult population is overweight or obese, which is up from 60% in 2016 and 56% in both 2012 and 2014.
- The average BMI for the County is 27.59, which has also increased from 2014 and 2016.

2018 Howard County Health Assessment Survey Report of Findings

### Told Child Should Lose Weight

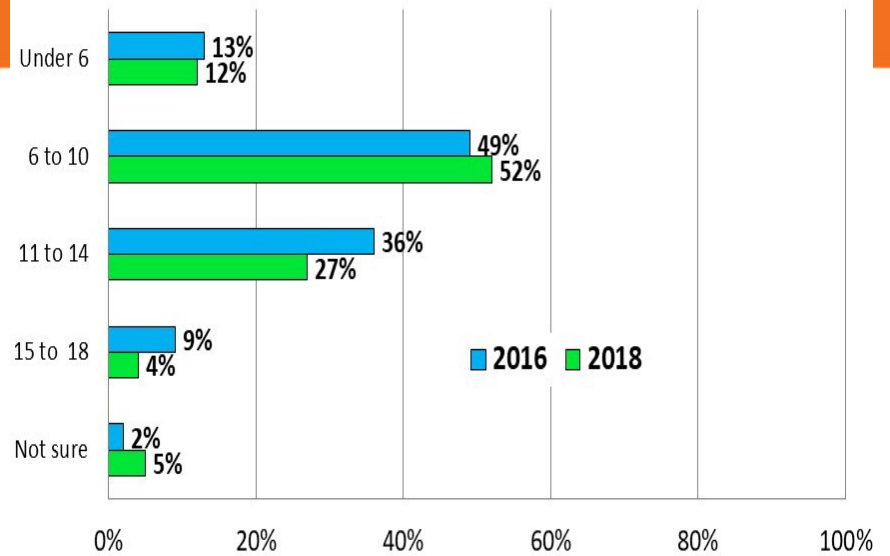
Asked if respondent has children in home



Q8.7A. Have you ever been told by a health care professional that your child should lose weight?  
(Not asked in 2012 and 2014)

### Age of Child Needing to Lose Weight

Asked if respondent has been told by doctor that their child needs to lose weight

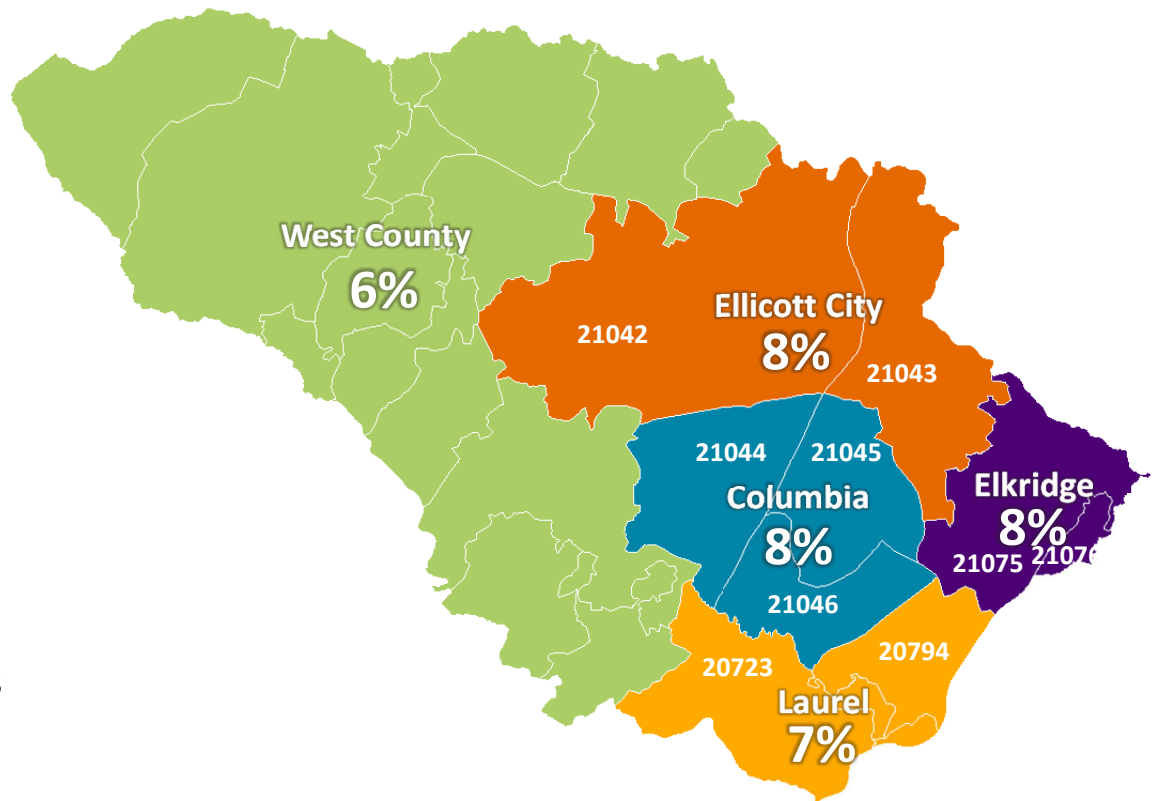


Q8.7B. What age were they at the time?  
(Not asked in 2012 and 2014)

- For those respondents with at least one child at home, 7% in 2018 said they had been told by a health care professional that their child should lose weight. This is unchanged from 2016.
- Of those children needing to lose weight, 52% were between the ages of 6 and 10, and 27% were between the ages of 11 and 14.

## DIABETES: Survey respondents reporting having been told by a doctor, nurse, or other health professional that they have diabetes\* [Overall: 8%]

- Residents are more likely to have been told they have **diabetes** if they are age 55 or above, have no children in the household, or are retired.
- Residents are more likely to have been told they have **pre-diabetes** or borderline diabetes if they are age 55 or above, or are obese.
- Those earning less than \$50,000 were the most likely to have been told they have diabetes prior to the age of 30, though the median age of diagnosis is near 50 for all income groups.
- Those earning between \$100,000 - \$149,999 were more likely than others to be taking insulin or other medication to help with their diabetes.



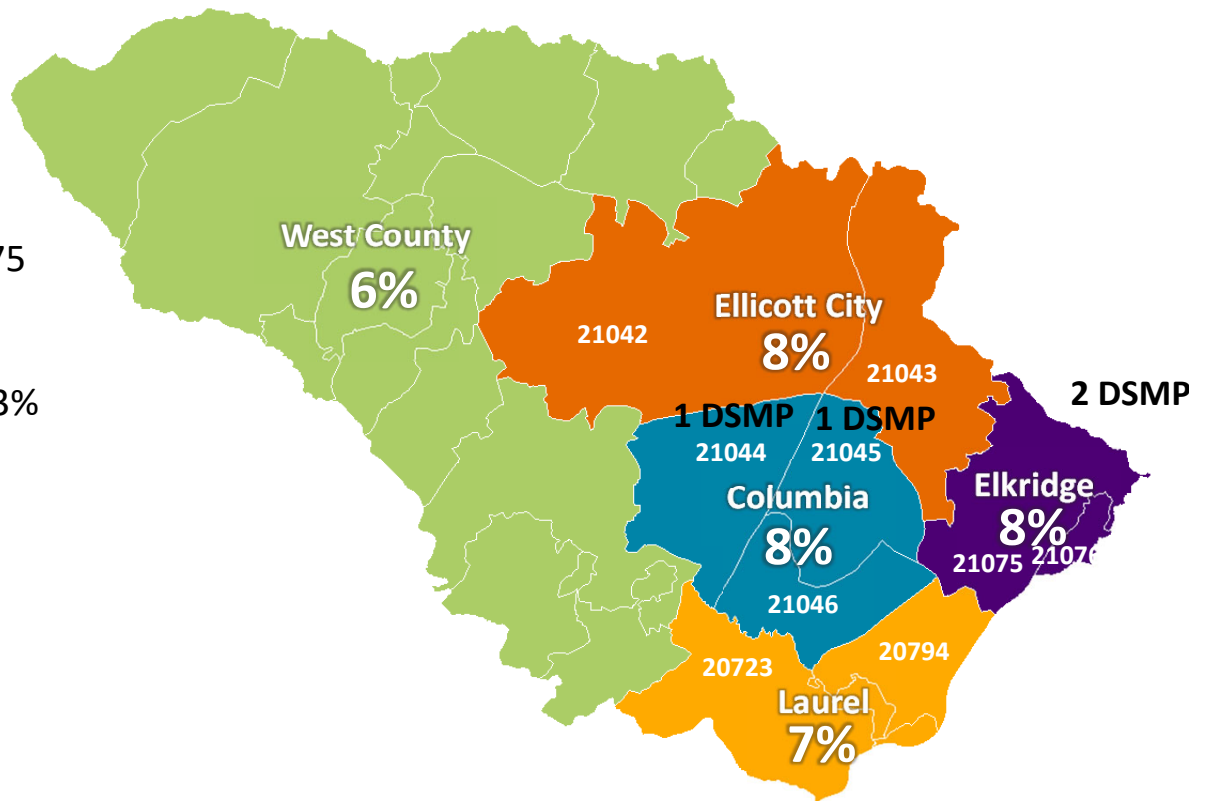
Data Source: Howard County Health Assessment Survey, 2018. \*Excludes females told only during pregnancy.



# Living Well with Diabetes- DSMP

DSMP (4 classes) – 21044, 21045, 21075

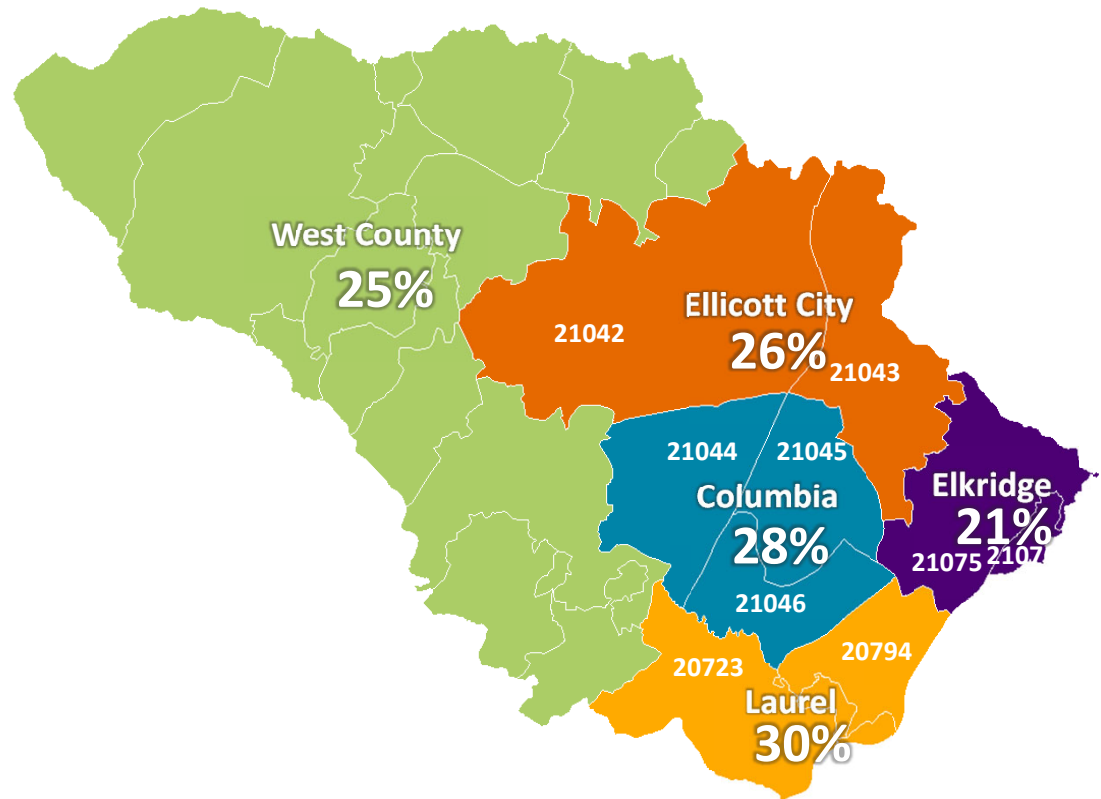
- Majority Female - 75.7% Female  
\*estimates based classes reporting
- 33.3% Asian; 36.3% Caucasian; 30.3% Black; .01% Hispanic \*estimates based classes reporting
- Percent capacity reached: 64.3%



Data Source: Howard County Health Assessment Survey, 2018. \*Excludes females told only during pregnancy.

## HYPERTENSION: Survey respondents reporting having been told by a doctor, nurse or other health professional that they have high blood pressure [Overall: 27%]

- Residents are more likely to have been told by a medical professional that they have high blood pressure if they are over age 55 or if they are retired.
- Residents who have been told they have high blood pressure are more likely to take medication the older they are, or if they are married or widowed.
- Residents are more likely to have been told their blood cholesterol is high if they are male, over age 55, or have no children in their household.
- Those less likely to be taking cholesterol medication are under age 45, identify as Hispanic or Asian, or have children in their household.

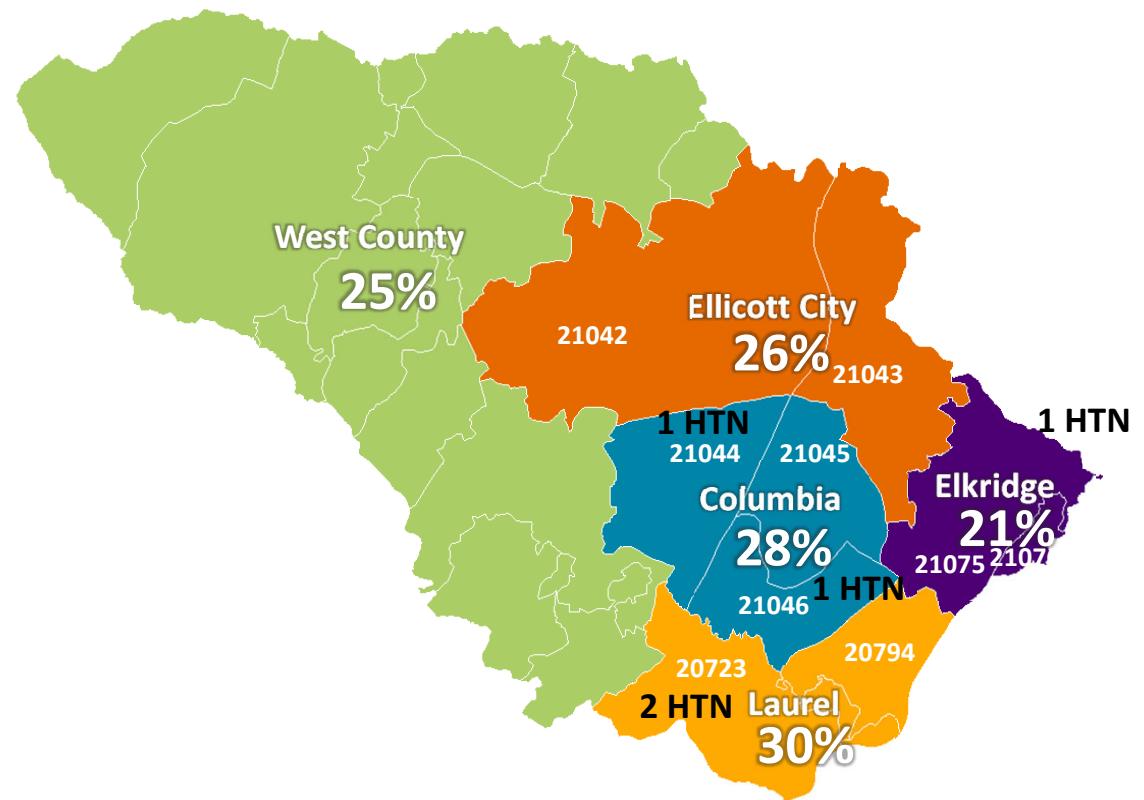


Data Source: Howard County Health Assessment Survey, 2018. \*Excludes females told only during pregnancy.

# Living Well with Hypertension

HTN (5 classes) – 20723 (2), 21044, 21046, 21075

- Majority Female - 78.4% Female  
\*estimates based classes reporting
- 47.6% Black; 21.6% Caucasian; 28% Asian; .2.8% Hawaiian/Native PI  
\*estimates based classes reporting
- Percent capacity reached: 51.4%
- Western Area class offered but cancelled due to low enrollment
- Additional Eastern Area class (Elkridge 50+) offered but cancelled due to low enrollment

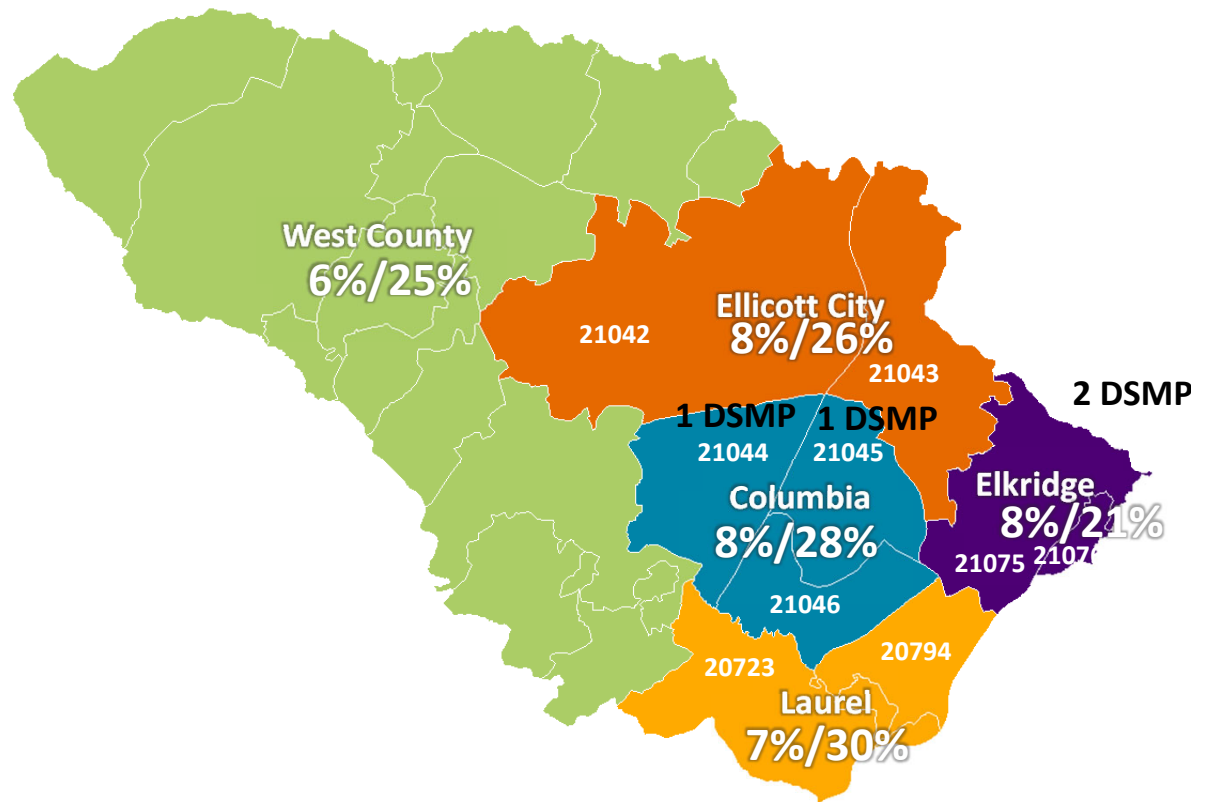


Data Source: Howard County Health Assessment Survey, 2018. \*Excludes females told only during pregnancy.

# CDSMP

CDSMP (6 classes) – 21042 (2), 21044, 21046, 21045, 21075

- Demographics unavailable at this time
- Percent capacity reached: 70.8%
- 4 additional classes offered but cancelled due to low enrollment
  - 21045 – Spanish
  - 21075 – 50+
  - 21046 – Urgent Care



Data Source: Howard County Health Assessment Survey, 2018. \*Excludes females told only during pregnancy.

# SUMMARY - NEEDS

## Key points:

- Continued effort to increase participation to capacity
- Host-site and facilitator recruitment
- Referrals

# DISCUSSION QUESTIONS

## Questions – Host Sites:

1. How do we increase diversity among host-sites in Howard County?
2. How do we inform and engage community members in programs?

## WRAP UP AND NEXT STEPS

### FULL HCLHIC MEETING

09/26/2019

8:30 - 10:30am

Non-Profit Collaborative of Howard County

### ACCESS TO CARE WORK GROUP MEETING

11/21/2019

9:00 - 10:30am

Barton A & B