



STATE OF MARYLAND

## Community Health Resources Commission

45 Calvert Street, Room 336 • Annapolis, Maryland 21401

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Larry Hogan, Governor – Boyd Rutherford, Lt. Governor  
Allan Anderson, MD, Chair – Mark Luckner, Executive Director

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### **FY 2019 Grant awards issued by the Maryland Community Health Resources Commission**

#### **Promoting delivery of essential health services: primary/preventative care, dental, and women's health services**

**Harford County Health Department (Harford County).** This project, Meaningful Environment to Gather and Nurture (MEGAN) Place, is designed to provide a supportive, non-judgmental, and restorative place to improve perinatal health outcomes and build family resiliency skills. The project would serve at-risk pregnant and postpartum women and their families, with a specific emphasis on women with substance use disorders. The project would employ evidence-based practices from existing programs, including Harford's current Healthy Families program and Helping Families Recover program.

**Family Healthcare of Hagerstown, formerly Walnut Street Health Center (Washington County).** This project would provide health care and care management services for complex patients who are chronically ill and/or discharged from the hospital. The project would employ two LPNs to provide telephone and face-to-face support for individuals before their first provider visit, to address barriers of care to the applicant upon referral, to perform lengthy medication reconciliations, and to obtain medical histories. The project would decrease patient no-show rates, thereby generating additional patient fee-for-service revenue.

**Lower Shore Clinic (Mid-Shore).** This project would expand the Lower Shore Clinic's existing Assertive Community Team (ACT) into Caroline, Dorchester, and Talbot Counties. Clients served by ACT teams are individuals with serious and persistent mental illness and often have complex co-morbid medical health conditions and are utilizers of high-cost services. The ACT team, once fully staffed, would consist of a Psychiatric Nurse Practitioner, an RN, a Substance Use Counselor, and a Vocational Counselor. An ACT team would provide behavioral health services for individuals with substance use treatment needs, assist clients in developing preventative health care skills and relationships with primary care providers, and address social determinants of health.

**Baltimore City Fire Department (Baltimore City).** This project would expand the City's existing EMS/Mobile Integrated Health program by adding a new data analytics platform and Artificial Intelligence to identify and address low acuity calls so that the City EMS can be freed up to respond to more serious calls. The data analytics would also inform home visits performed by the community paramedicine team. The project also involves an interactive, two-way patient

communication, monitoring patients for self-reported unmet needs and other risks for readmission and/or calling 911 again, thereby activating patients most at-risk for extended home visiting services.

**Health Partners (Charles).** This project would implement a new care management program at Health Partners to increase patient participation in disease management, increase preventative screenings, and reduce avoidable hospital ED visits. The applicant has provided services underserved residents in Charles County for more than 25 years, and this project would expand access to new services for its vulnerable, isolated residents. The applicant is also supported by a number of local partners including Charles County Commissioners and the University of Maryland Charles Regional Medical Center, which would provide the project with patient referrals.

**MedStar St. Mary's Hospital (St. Mary's).** This project would support the opening of a new dental practice, East Run Dental Services, in Lexington Park, which would prioritize serving Medicare and un/underinsured individuals living in the southern corridor of St. Mary's County. The dental clinic would be located in the existing East Run Medical Center, which currently provides primary and behavioral health services. CHRC funds would support the hiring of a new dentist and the costs of dental supplies, while the hospital is committed to contributing costs to fund the salaries of a dental hygienist, a dental assistant and front desk staff.

**Mosaic Community Services (Multiple).** This would expand access to dental services for the organization's highly vulnerable patients with mental illness and/or substance use disorders, many of whom are impacted by chronic diseases that include diabetes and hypertension, have poor diets, and have delayed seeking dental care. The project would provide dental services from private providers who would serve Mosaic clients in the Psychiatric Rehabilitation Program and Health Home Program in six sites in Baltimore City, Baltimore, Harford, and Carroll Counties.

**Chinese Culture and Community Service Center (Montgomery County).** This project would support a new pain management initiative that is designed to reduce reliance on opioids for chronic pain. Services would include acupuncture and psycho-social support group sessions based on the Stanford Model of Chronic Disease Self-Management Programs. The project would also work individually with patients to assess their medical and mental condition and develop a care plan to address depression, anxiety, and other psychosocial issues while simultaneously working toward the tapering of medication levels.

**Chase Brexton (Baltimore City).** This project supports community-hospital partnership between Chase Brexton and Johns Hopkins Hospital to refer individuals seeking oral health care services at the hospital ED to dental care provided at Chase Brexton. The goals of the project are to provide a permanent dental home for patients at Chase and reduce avoidable dental-related ED visits. Under the project, Chase and Hopkins will develop a formalized referral process with the Hopkins ED for patients with urgent oral health needs. The project involves providing patient transportation; financial assistance for medications; enrollment for health insurance options; health education; care coordination and outreach for missed appointments; and referrals for medical and psychosocial support services.

**Western Maryland AHEC (Allegany).** This project would expand an existing successful dental program for low-income adults in western Maryland through a community health worker model in Allegany, Garrett, and Washington Counties. The project would target individuals who are in recovery from opioids and other addictions and have delayed accessing dental services. A Community Health Worker would work with project participants to overcome the social determinants of health that stand in the way of accessing care. Participants would also be screened for somatic health and social support needs.

**Family Services (Montgomery).** This project is a multigenerational initiative utilizing a multisectoral approach to address health and social inequities focused on the families in and around the James Daley Elementary School. The Thriving Germantown Initiative utilizes a collective impact model and multiple intervention strategies to provide services to a highly diverse, low-income community in Germantown. The Initiative is currently supported with a \$250,000 two-year grant from the CHRC scheduled to end June 30, 2019 and leveraged \$1.2 million in additional private investment. A year and a half into program implementation, the program has served 236 children out of a promised 240 for the two year grant. The Initiative is envisioned to be a five-year pilot program and is in the middle of year two. This proposal requests funding for years three and four to sustain the program.

## **Addressing the heroin and opioid epidemic through behavioral health integration**

**Baltimore County Public Schools.** This project would expand access to screening and substance use treatment services in schools throughout Baltimore County. The project would develop and implement a systematic prevention, early detection, and referral program to prevent substance use. CHRC grant funds would support a contract with the Center for School Mental Health at University of Maryland School of Medicine and mini-grants to substance use treatment agencies selected via RFP on a tapering funding structure to provide Certified Addiction Counselors at participating schools at least one day per week. The program would be implemented in all high schools, and other support services staff (school counselors and social workers) would be trained on the use of the CRAFFT 2 screening tool and the brief negotiated interview. The project would also establish community partnerships between each high school and alternative programs in BCPS.

**Helping Up Mission (Baltimore City).** This project would provide an array of residential, support, vocational, and health care services for vulnerable women who are low-income, experiencing homelessness, and have substance use disorder. This project involves two new programs: (1) a 14-bed Joint Commission on Accreditation of Healthcare Organizations accredited transitional recovery housing program in partnership with Johns Hopkins Hospital Broadway Center for Addictions; and (2) a 16-bed long-term Spiritual Recovery Program that focuses on integrated modalities of care, focusing on hope, health, housing, and a sense of purpose and community. Both of these programs are modeled after success in serving adult males.

**Shepherd's Clinic (Baltimore City).** This project expands the clinical service offerings in its existing behavioral health program to include treatment for substance use disorder. The project would

integrate a primary care opioid treatment program (PCOTP) as part of the existing Behavioral Health Program, expanding services to include Medication-Assisted Therapy (MAT) for opioid use disorders, routine and special diagnostic procedures, and toxicology tests, psychiatric/psychological assessments and treatment through the clinic's Behavioral Health Program. The current Behavioral Health Program provides psychotherapy, psychiatry services, case management resources, and psychoeducation sessions.

**Associated Catholic Charities (Multiple).** This project would enhance and expand Catholic Charities' substance use treatment program to provide Integrated Dual Disorder Treatment (IDDT). The project would enable the organization to become IDDT certified, would support policy, procedure, and system of care changes, capacity building, and staff training. The ability to provide expanded, integrated substance use treatment could enhance the service offerings for as many as 1,500 clients of Catholic Charities programs and the Villa Maria Community Resources Clinics per year. These 12 clinics are located in Baltimore City and seven jurisdictions in rural, urban, and suburban settings.

**Cecil County Health Department (Cecil County).** This project would provide services to low-income pretrial detainees involved with the Office of the Public Defender County on misdemeanor or nonviolent felony charges who have a substance use disorder and lack access to appropriate treatment services in the community. The project would screen detainees and connect/serve them with treatment, support with a peer recovery specialist, and referral to other services as needed.

**Cornerstone Montgomery (Montgomery).** This project would expand access to somatic and preventative care services to an estimated 565 individuals who are living in poverty, medically frail, experience comorbid health and behavioral health disorders, and are senior citizens. The applicant would collaborate with Nexus Montgomery, a consortium of six hospitals in Montgomery County, to review data quarterly and identify individuals in need of services. The hospitals would work with the applicant to collect and track hospital utilization data.

**University of Maryland Upper Chesapeake Health (Harford).** This project would start both a new 24-hour Walk-in/Urgent Care Center and an Assertive Care Treatment (ACT) Program in Harford County. The new Walk-in/Urgent Care Center would provide 24-hour access to behavioral, mental, and addiction services. The project would provide an array of services, including: 24-hour crisis hotline; outpatient mental health; SUD treatment and MAT services; residential crisis beds; mobile crisis team; and ACT team for individuals with serious mental illness, including referrals to community providers.

**Queen Anne's County Department of Health.** This project would promote screening and access to behavioral health services for patients in the existing Mobile Integrated Health (MIH) program in Queen Anne's County. Individuals would be able to access a Peer Recovery Specialist who would perform an in-person follow-up visit. The project would also provide telehealth services which would provide Screening, Brief Intervention and Referral to Treatment (SBIRT) for disadvantaged populations in Queen Anne's County.

## **Promoting food security and addressing childhood and family obesity**

**Baltimore Medical System, Inc. (Baltimore City).** This project would provide: (1) enhanced childhood obesity and nutrition intervention in the Collington Square Elementary/Middle School school-based health center with counseling, health monitoring, and nutrition education; and (2) an all-school program at Collington Square Elementary/Middle School promoting physical activity and nutrition lessons during resource periods, which would also engage parents and guardians. The project would also implement “CATCH Kids”; a program to provide motivation interviewing, and obesity management training for BMS staff.

**Worcester County Health Department (Worcester County).** This project would address obesity prevalence among youth and adults in the jurisdiction through a number of intervention strategies that include: online education learning modules; coaching and wearable technology; community gardening projects; linkages with local food pantries; and virtual and in-person cooking demonstrations and grocery store tours. Program referrals would come from the Health Department and Chesapeake Health Care. The overall goals of the project are to promote healthier lifestyle choices (both exercise and nutrition) among the target population, weight loss, weight management, and improved food security.

**Washington County Health Department (Washington County).** This project would support the use of a mobile farmer's market to get locally grown fresh fruits and vegetables into the city of Hagerstown where there is no supermarket. The project targets vulnerable populations, and the vendor would sell the produce at Title I schools, low-income housing sites, Commission on Aging, congregate meal sites, and the senior center. The mobile farmer's market would accept food stamps/EBT, WIC vouchers, and cash. In addition, the project involves providing nutritional education, to be provided by Meritus Medical Center, the Health Department, and a local dietician.

**Somerset County Health Department (Somerset and Wicomico County).** This project would implement the Sustainable Change and Lifestyle Enhancement (SCALE) for Families project, a comprehensive weight loss and health improvement plan for low-income and uninsured adults, modeled after an evidenced-based program in West Virginia. The project would target population of women of childbearing age in Somerset and Wicomico Counties with reported BMI over 30, children under 18 at risk for obesity, and minority populations.