

Local Health Agencies create new program to move Charles County Healthcare forward

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Sen. Thomas "Mac" Middleton signs a \$550,000 check made out to the Charles County Department of Health after the introduction of the county's new Mobile Integrated Healthcare program.

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Charles County Health Officer Dianna Abney speaks with Del. Susie Proctor (D-Charles, Prince George's) about the role of the Mobile Integrated Healthcare program.

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Dr. Howard Haft of the Department of Health and Mental Hygiene discusses the potential benefits of the Mobile Integrated Healthcare program with Dianna Abney and Del. Susie Proctor.

The main focuses in healthcare are shifting all across the country. Rather than being reactionary, public health officials and supporters are looking into creating more proactive and preventative policies.

Charles County is doing just that with its newly-formed mobile integrated healthcare program funded by a \$550,000 grant from the state's Community Health Resource Commission and funding from the county government, University of Maryland Charles Regional Medical Center and the Charles County Health Department.

Dianna Abney, a health officer with the county's health department, said they went "all over the world" applying for grants for the program. The process is two years in the making, according to John Filer, the chief of Charles County's Department of Emergency Services.

With this new program, Filer said, the county will be able to get out into areas such as Nanjemoy, Cobb Neck and Newburg that have been underserved over the years.

There is a similar program in Queen Anne's County and also one in Phoenix, Ariz., Filer said. The data returned from those programs has been "remarkable" and is part of what encouraged Charles County to make a push to start their own.

"We're excited to get into the program," Filer said. "We're committed to the underserved communities in this county, because that's really who we're talking about. Those people and those families who don't have access readily available for public health. We're trying to reach them and serve."

Filer said there will be a unit consisting of nurse practitioner, paramedic and community health agent making visits to those who frequently call 911. The people the county is looking to service must volunteer, but the incentive of attempting to find solutions to their health problems may open more people up to the service.

The unit will be able to go around and follow up on physician recommendations made during hospital visits, identify issues that could lead to potential health complications and find ways to solve other issues they may be presented within a patient's home.

This effort should lead to less 911 calls from those who call frequently and better health for those patients as well, Filer said. Previous data has shown the county has readmitted some patients into the county hospital as many as nine times in one week, he said, which is problematic. But it is because they lack the means for proper healthcare coverage.

"When they become scared and when they don't have means to follow up on their health, they call 911 again and the cycle starts over," he said.

This initiative is to improve healthcare, Abney said, and there are too many people in the county frequently visiting the emergency room. The county wants to "improve their quality of life" by reducing their visits, but they will also improve the county's economics because it will be less expensive and more comfortable.

"It'll help a whole lot of people," Abney said.

Mark Luckner, the executive director of Maryland's Community Health Resources Commission, said the process

of securing the grant for Charles County was not easy.

There were multiple projects with good ideas, he said, but ultimately Charles County's idea had the most depth and had been vetted thoroughly so they received the state's grant.

The process will be revisited in three years, Luckner said, and the project will be evaluated to see how health care quality has improved within the county.

"Generally, I'll have data pulled every six months and we'll evaluate the numbers from there," Luckner said. "Then, after the three years, we'll decide if we want to continue for a fourth year, a fifth year and so on."

Sen. Thomas "Mac" Middleton (D-Charles) said he and Luckner "go back a long way" with Middleton being an advocate for the commission at its inception in 2004. This new program is just another project they worked on together with Middleton backing Charles County and helping push the application forward, he said.

"I knew what it meant. Providing resources in rural communities, underserved communities and underprivileged communities," Middleton said. "This is going to be so very important."

Ultimately, Filer said, the more people the county can reach the better. This will take time to implement and to get people to enroll in the program, but it will be worth it.

This is not a new strategy, Filer said. Doctors made house calls "frequently" in the past, but healthcare providers stopped that service. But with this, Filer said, he hopes the county can provide a similar preventative service to those who need it.

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