STATE ADVISORY COUNCIL ON HEALTH AND WELLNESS:
ARTHRITIS COMMITTEE
MINUTES
January 16, 2019
5:00 PM

Maryland Department of Health
201 West Preston St, Room Rm L3
Baltimore, MD 21201

Committee Members Present	**Committee Members Absent**
Rachel Pigott	Jody Marshall (chair)
Margaret Gwaltney	Rebecca Manno
Donna Nordstrom (by phone)	Linda Kline

Sadie Peters
Erin Ashinghurst

Minutes respectfully submitted by: Erin Ashinghurst

Introductions
- The meeting was called to order at 5:07pm by Sadie Peters.
- Committee members introduced themselves.
- The group reviewed the objectives for the meeting:
    - Approve minutes from October 18, 2018 meeting
    - Review committee goal statements from October 18, 2018
    - Complete priorities/activities for Goal Statements
    - Complete the Action Plan Template
    - Assign initial Action Steps and Due Dates
    - Determine date of follow up call before next meeting

Minutes
- Dr. Peters asked if there were any changes to the August 1, 2018 meeting minutes. As there were no changes, following a motion to approve by Ms. Gwaltney, which was then seconded by Rachel Pigott, all Committee members voted in favor of approving the August 1, 2018 minutes. Jody Marshall had approved the August minutes in a previous email. There was not a quorum to approve the October 18, 2019 minutes, so the meeting minutes will be circulated and the committee will vote to approve or revise the minutes.

Co-chair
- Ms. Pigott remains co-chair for the Committee.

Committee Goal Statements
- Dr. Peters presented a revised version of the draft workplan for discussion.
- The Committee reviewed the goal statements and decided on

- o **Goal A: Increase the utilization of evidence-based programs/interventions to decrease the burden of arthritis in Maryland.**
- o **Goal B: By 2022, increase the number of evidence-based programs addressing arthritis prevention and management in the community to 5-10%**
- o **Goal C: By 2020, increase health practitioner referrals to evidence-based programs for arthritis prevention and management in the community by some percent to be determined.**
- o **Goal D: By 2020, increase by a number to be determined (percent) of adults (older adults and people with disabilities) with arthritis participating in evidence-based programs.**
  - Steps Include: (1) Identifying how many evidence based programs for people of all ages are provided in each county in Maryland by working through Area Agencies on Aging and expanding the network to other types of community organizations and agencies (i.e. Department of Natural Resources, Parks Services); (2) Identifying resources for establishing the baseline data; and (3) Reaching out to the Arthritis Foundation (Maryland) to seek representation on our committee.

Discussion
- The group discussed the proposed objectives and activities and debated ideas for revisions of each.
- There was general consensus in regards to strategy one under Objective C, that while convening a focus group with health care providers would give us qualitative data and possibly lead to a new directive, working with the health systems in gathering specific quantitative data they are already collecting through EMRs may be more efficient. If we were to determine to convene a focus group, Physician's Assistants or other mid-level providers could be a more accessible and may contribute to the data collection more readily than physicians. The group will resume this discussion at the next meeting.
- The group discussed the opportunity to utilize topics presented at meetings (eg. ACE's study presented at today's Wellness Council meeting) to inform the Committee's work and to help think about policy initiatives and legislation to which the group might contribute.

Priority Setting
Discussion
- After discussion, the members agreed to work individually on the Objectives and Strategies, but share input and contributions in an online communication on Google Documents.
- Ms. Gwaltney and Ms. Pigott led discussion about making sure that our efforts were measureable and making sure we determine a baseline of programs, community partners, program/resources, and current participation.
- The group discussed updating Objective C to the following: By 2020, increase the number of people with arthritis referred to evidence based programs for arthritis prevention and management.

- The groups discussed updating Strategy One under Objective C to: Developing a partnership with three healthcare provider systems (i.e. Med Star and Hopkins) and establishing a baseline for data collection.
  - Activities would include: (1) Developing questions; (2) Identifying contacts; (3) Conducting meetings; and (4) Collaborating a plan for establishing a baseline and ongoing sharing of data.

Next Steps
- Committee members agreed to use Google docs to share documents in this planning process.
- Rachel Pigott will revise the Workplan template on Google ocs notify Ms. Gwaltney once completed so she can review for accuracy.
- This group will meet once weekly via phone conference to develop an action plan. Rachel will send an email invitation to the team to determine the days and times of this recurring meeting.
- Erin Ashinghurst to follow up with staffer responsible for the Health and Wellness committee regarding process for addition of members and exploring contacts and resources at the arthritis foundation as a means to recruit future new members.
- The group plans to identify a concrete timeline to complete work plan and assign action items by the end of 2019.
- At each of the following meetings the group will address five objectives.
- Sadie Peters will resend the google documents sharing invitation to members and notify members when these are sent so they can check their spam folder if the invitation does not appear in their inbox.

Adjournment
- Erin Ashinghurst reminded the group that the next in-person meeting will occur on April 17.
- Ms. Pigott moved to adjourn the meeting, and Erin Ashinghurst seconded the motion. The meeting was adjourned at 6:02 pm.