# MARYLAND ADVISORY COUNCIL ON HEALTH AND WELLNESS PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT

### **PUBLIC HEARING MEETING**

**MINUTES** 

APRIL 21, 2021, 4:05 - 4:45 P.M.

#### I. Welcome and Open Public Hearing

At 4:05 pm, Ms. Kiel, the Chair of the Maryland Health and Wellness Council transitioned the meeting to Ms. Pier after opening the second advisory council meeting with a welcome and roll call of council members present. The Health and Wellness council was created in 2017 and assumes the responsibilities of the State Advisory Council on Arthritis and Related Diseases, Heart Disease and Stroke, Diabetes and Physical Fitness. The Council promotes evidence-based programs for developing healthy lifestyles, and for the prevention, early detection, and treatment of chronic diseases and makes recommendations on chronic disease prevention, health, and wellness to the Maryland Department of Health.

Ms. Pier opened the Preventive Health and Health Services (PHHS) Block Grant Public Hearing Meeting at 4:06 pm with a welcome of the council members and members of the public. She stated that the Health and Wellness Council is the designated Advisory Committee for the PHHS Block Grant, a mandatory federal requirement for every recipient. The purpose of the PHHS Block Grant is to allow states, tribes, territories, and D.C. to address unique public health needs and challenges.

Olubukola Alonge, MD, MPH, the Program Team Manager (and coordinator for the PHHS Block Grant) provided a detailed presentation on the Federal Fiscal Year (FFY) 2020 (October 1, 2020 – September 30, 2021) program outcomes/progress and presented the FFY 2021 work plan and budget for feedback/approval.

#### Summary of the FFY 20 PHHS Block Grant Funding and Outcomes:

- The FFY 2020 PHHS Block Grant allocation for Maryland was \$2,976,600.
- The mandatory sexual offence funding is \$138,813.
- In FFY 20, Maryland funded nine programs aligned with the Healthy People 2020 objectives.

#### D-3: Reduce Diabetes Deaths

- Hired three staff members to support the statewide diabetes initiatives.
- Convened the Diabetes Clinical Quality Taskforce on March 31, 2021, with 65 participants.

- Two Requests for Proposals (RfPs) are in progress to select a Patient Advisory Group Contractor and provide employer education to increase knowledge and understanding of the implications of diabetes in the workplace.
- The Horowitz Center at the University of Maryland is providing ongoing technical assistance to the 20 local health improvement coalitions to build new and strengthen existing infrastructure.
- Ongoing marketing and communications campaign to increase both the awareness and screening for prediabetes.
- Implementing two initiatives to improve diabetes control and management by enhancing the knowledge and skills of diabetes providers through offering training and educational opportunities.

#### **HDS-2: Coronary Heart Disease Deaths**

- Maintaining two Mobile Integrated Community Health projects to reduce high healthcare utilization.
- Conducted four skill-building training opportunities for primary care providers to better identify people with or at risk of hypertension and elevated cholesterol.
- Plans to implement a media campaign on hypertension self-monitoring are underway.
- Implementing two quality improvement projects to improve cholesterol and hypertension control rates.

#### **C-1: Reduce Overall Cancer Deaths**

- Conducted the 27th Annual State Council on Cancer Control Cancer Conference in November 2020. Visit <a href="https://phpa.health.maryland.gov/cancer/Pages/2020">https://phpa.health.maryland.gov/cancer/Pages/2020</a> Cancer Conference1125-2282.aspx for archived materials.
- Identified two community-based organizations to establish referral systems to link uninsured and underinsured low-income individuals to preventative cancer screening in their region(s).
- Conducting virtual stakeholder meetings to promote the 2021-2025 Maryland Comprehensive Cancer Control Plan.

#### **NWS-8: Healthy Weight in Adults**

- The State Center Farmers market was cancelled due to the COVID-19 pandemic.
- The Healthy Weight in Women of Childbearing Age campaign was postponed to FFY 21.
- A vendor has been selected to implement a strategic process and collaborate on healthy weight activities for three selected centers in the Cancer and Chronic Disease Bureau.
- Several additional projects are underway:
  - Statewide farmers market,
  - o Eastern Shore Farm stand EBT Access project,
  - Statewide walking initiative, and

• The Charles County Community Supported Agriculture project.

#### **NWS-10: Obesity in Children and Adolescents**

- Early childhood education activities still underway.
- Safe Routes to School (SRTS) project expanded to two additional counties, totaling three programs.
- RFP released to secure two community-based organizations to implement the SRTS project in two additional counties.
- Recruitment underway for Program Coordinator.

#### **PHI-13: Epidemiology Services**

- Ongoing support of the online Behavioral Risk Factor Surveillance System (BRFSS) system by providing funds to Inner City Fund Inc. (ICF) and Software Technology Group, Inc. (STG); both contracted vendors. ICF has completed 7,385 surveys between October 1, 2020 and April 19, 2021, and STG continues to support the Maryland Indicator Based Information System (MD-IBIS) website; https://ibis.health.maryland.gov/.
- Evaluation staff support the projects in PHHS, as well as disabilities and other chronic disease programs.
- Continued provision of population-level data as needed.

#### **Environmental Health FS-1: Reduce Infections Caused by Listeria Monocytogenes**

- Supports two 0.5 full time equivalent (FTE) Sanitarian positions.
- Developing one fact sheet on Listeria to be targeted for produce processors and the public/customers.
- Developed one training targeted to dairy plant employees and one training targeted for crab meat picking operators.
- Conducted three individual, firm-specific trainings across Maryland for food manufacturers, to increase both knowledge of Listeria infections, and understanding of mitigation strategies.

#### IVP-40: Sexual Violence (Rape Prevention)

- Planning to provide training for sexual assault health care professionals statewide.
- Identified one member organization of RISEMD, Heartly House of Frederick County, to disseminate materials developed previously.
- Victim-centered advocacy and trauma informed services are being provided to survivors of sexual assault.

#### PHI-6: Associate Degrees and Certificate Programs in Public Health

• Supports an administrative specialist to oversee the program.

- Curriculum on Community Health Worker (CHW) Core Competencies related to diabetes management and control for community colleges is now being funded from an alternate source.
- Increased the number of 2-year colleges that offer certificate programs from 0 to 1.

Dr. Alonge thereafter provided the attendees with a summary of the approved FFY2021 PHHS funding, proposed work plan and budgetary allocations aligned with the new Healthy People 2030 Objectives.

## Summary of the FFY 21 PHHS Block Grant Approved Funding, Proposed work plan and budgetary allocations:

- The FFY 2021 PHHS Block Grant allocation for Maryland was \$2,895,436; a \$81,164 reduction from the prior year.
- The mandatory sexual offence funding is \$138,813.
- Healthy People 2030 was launched in August 2020 and is the fifth and current iteration of the Healthy People initiative.
- In FFY 21, Maryland proposes to fund ten programs aligned with the Healthy People 2030 objectives.
- Nine of the objectives were a revision of the prior HP 2020 Objectives with one new objective focused on disability inclusion.

Dr. Alonge highlighted the activities that were different from the current year on the similar objectives.

#### D-09: Reduce the rate of death from any cause in adults with diabetes (\$801,338)

Diabetes is a State Priority which has significantly impacted the funding allocation for increased prediabetes/diabetes related initiatives.

- Implement a project on barrier reduction for employee access to diabetes prevention and control.
- Support 1.6 FTE staff for communication and Diabetes Clinical Quality Task Force efforts.
- Launch a multi-year multimedia campaign utilizing television, radio, social media, and paid digital advertising on prediabetes awareness.
- Continue efforts of the statewide Diabetes Clinical Quality Task Force and a new Diabetes Patient, Family, and Caregiver Advisory Council.
- Support Diabetes Self-Management Education (DSMES) and National Diabetes
  Prevention Program (DPP) providers through regular network meetings and skillbuilding training opportunities.
- Enhance the operation of Workshop Wizard and its associated public website, BeHealthyMaryland.org by supporting the PAC Software.

- Support implementation of the CDC's Modified Interim Value-Based Payment DPP Model by two Local Health Departments (LHDs).
- Contract with the University of Maryland Horowitz Center to continue to provide technical assistance and expand the infrastructure development of the 20 local health improvement coalitions.
- Contract with a vendor to engage clinical providers and teams to improve identification and referral of people with prediabetes to evidence-based programs.
- Collaborate with a school of pharmacy to improve adherence to diabetes medications.

#### HDS-02: Reduce coronary heart disease deaths (\$371,331)

- Implement skill-building training opportunities for primary care providers to increase identification of people with or at risk of hypertension.
- Establish a blood pressure self-monitoring initiative.
- Create a statewide hypertension strategic plan using the Surgeon General's Call to Action on Hypertension as a guide.
- Expand previous oral health hypertension screening and referral project.
- Support 0.75 FTE staffing (new) for coronary heart disease related initiatives.

#### C-01: Comprehensive Cancer Control (\$140,000)

- Increase screening and linkage for referral of uninsured/underinsured adults to no-cost screening provided by the Maryland Breast and Cervical Cancer Program.
- Update and translate existing written materials to support screening and recruitment.
- Increase stakeholder engagement in Cancer Prevention and Control programs.

#### NWS-03: Reduce the proportion of adults with obesity (\$454,005)

- Expand statewide farmers markets and community supported agriculture models to increase access to healthy food alternatives.
- Continued implementation of the Eastern Shore Farm stand EBT Access project.
- Develop/implement a media campaign to address healthy weight in women across the lifespan.
- Support statewide walking initiatives to increase physical activity among Maryland adults.
- Provide funding to Healthiest Maryland Businesses (HMB) to adopt workplace health promotion policies consistent with CDC recommendations through a competitive process.
- Support HMB training and recognition at the Statewide Wellness Conference.
- Support 2.0 FTE staffing for adult healthy weight related initiatives.

#### NWS-04: Reduce the proportion of children and adolescents with obesity (\$210,162)

- Support the implementation of the Safe Routes to School program in at least four jurisdictions.
- Support 1.5 FTE staffing for childhood/adolescent obesity reduction related initiatives.

#### PHI-R06: Enhance the use and capabilities of informatics in public health (\$282,639)

- Provide ongoing support of the online Behavioral Risk Factor Surveillance System (BRFSS) system by providing funds to ICF and STG.
- Support 1.0 FTE staffing (new) for projects in PHHS, as well as disabilities and other chronic disease programs.
- Continued provision of population-level data as needed.

#### FS-03: Reduce infections caused by Listeria (\$107,446)

- Conduct environmental and product sampling at previously trained plants to determine progress with Listeria mitigation efforts.
- Collect samples for testing during outbreaks and provide guidance in collaboration with LHD outbreaks teams.
- Work with food processing plants providing firm-specific education and training to high-risk food processing plants.
- Support 1.0 FTE staffing for all activities related to this objective.

#### IVP-D05: Reduce contact sexual violence (\$138,813)

- Enhancement of the capacity of a rape crisis and recovery center to meet the needs of populations identified in a recent needs assessment.
- Forensic nurse capacity-building in two rural Maryland counties.

#### PHI-R05: Monitor the education of the public health workforce (\$91,676)

- Provide assistance to certified and prospective CHWs as well as CHW training programs to increase CHW certifications and CHW training program accreditations.
- Contract with a vendor to create a CHW specialty certification in mental and behavioral health including substance use disorders.
- Support 1.0 FTE staffing for all activities related to this objective.

## DH-R02 (new): Increase the proportion of state and DC health departments with programs aimed at improving health in people with disabilities.

- Increase the number of programs implementing inclusive evidence-based programs using the NCHPAD's inclusive Community Implementation Process (NiCIP)model.
- Provide resources to programs to assist in provision of required disability accommodations.

 Provide 1.0 FTE staffing support to oversee inclusion of disadvantaged populations in public health programs.

Ms. Pier opened the floor for questions or comments from Council members as well as the public. In response to questions tendered, Ms. Pier and Dr. Alonge clarified the following points:

- Gary Gerstenblith, M.D., asked how performance was assessed against the chosen objectives. Dr. Alonge explained performance measurement is central to the proposed work plan. Performance measurement includes both short-term metrics included in each work plan activity and longer-term analysis of Behavioral Risk Factor Surveillance System and Vital Statistics data.
- Dr. Gerstenblith asked whether additional funds could be requested. Ms. Pier
  clarified that CDC allocates a certain amount of PHHS funding based on
  population. However, the programs funded through PHHS usually receive other
  state and federal funds. In most cases, PHHS complements these other funding
  sources and helps fill in gaps in needed public health programming.
- Mychelle Farmer, M.D., asked whether the specific counties funded through PHHS are the areas most likely to have impact. Ms. Pier explained MDH works closely with the local health departments on several projects due to their capacity to impact change at the jurisdictional levels. The Center provides some of this funding through competitive grant processes. Local Health Departments decide to apply.
- Salliann Alborn inquired about the extent of the Maternal and Child Health
  work described in the presentation. Dr. Alonge and Ms. Pier clarified Maryland
  PHHS grant will support only the Women of Childbearing Age project since the
  Maternal and Child Health Bureau receives the Maternal and Child Health (MCH)
  Block Grant and other funds to support several maternal and child health related
  initiatives.
- Rachel Pigott suggested that the draft PHHS Work Plans should be shared in
  advance of the public hearing where votes are taken in the future. She also
  requested information on existing areas of strength within the Maryland
  Department of Health be provided to the Council. Ms. Pier appreciated the
  feedback and responded that the October Council meeting was an opportunity
  for council members to provide input on the work plan objectives/ activities
  ahead of the voting/ submission timeline. However, we look forward to working
  collaboratively together to improve the process.
- Mary Pat Bertacchi expressed concern that recent progress on child obesity
  may be eroding following the COVID-19 pandemic. Ms. Pier responded that
  existing MCH Block Grant funding supports child wellness work, but nutrition
  security may be a gap. We will continue to improve efforts that support healthy
  nutrition for all populations statewide while also working collaboratively with
  partners such as the MCH Bureau, colleges, etc. to ensure the needs of children
  to ensure a reduction in the obesity trend are met.

There were 2 public members in attendance, however no questions were received from the public. Ms. Pier called a vote to approve the proposed FY 2021 Workplan and Budget. Quorum was established with 27 members present and all members voted to approve the proposed FY 21 work plan and budget.

#### MEMBERS PRESENT

#### MEMBERS NOT PRESENT

**MDH STAFF PRESENT** 

Amanda Klein

Salliann Alborn **Afton Thomas** Mary Backley Lois A. Freeman Summit Bassi, M.D. Namisa Kramer Mary Pat Bertacchi, RDN Vivienne Rose, M.D. Jonathan Dayton Geeta Sharma

Angela Deal

Linda Kline

Jennifer Eastman

Mychelle Farmer, M.D.

Gary Gerstenblith, M.D.

Roger Harrel Olubukola Alonge, M.D., MPH

Jessica Kiel, RDN Kathleen Graham

Seth Martin, M.D. Larry McNeely

Kristi Pier Julie Maneen Seth Martin, M.D. Sue Vaeth Aruna Nathan, M.D. John Welby

Titilayo Ogunmakinwa **Debony Hughes Rachel Pigott** Chad Perman

Cameron Pollock

Vaple Robinson, Ph.D., R.N.

Jason Semanoff

Teresa Titus-Howard, Ph.D.

Sara Vazer, M.D. MEMBERS OF THE PUBLIC PRESENT

Kristin Watson, Pharm.D. Eric Colchamiro

Pamela Williams

Vanina Wolf

Pamela Xenakis, RDN

Aarti Arun

#### **COUNCIL VOTES**

#### On Approval of the Proposed PHHS FY 2021 Workplan and Budget

#### Members Voting to Approve:

Salliann Alborn

Mary Backley

Summit Bassi, M.D.

Mary Pat Bertacchi, RDN

Jonathan Dayton

Angela Deal

Jennifer Eastman

Mychelle Farmer, M.D.

Gary Gerstenblith, M.D.

Roger Harrel

Jessica Kiel, RDN

Linda Kline

Seth Martin, M.D.

Julie Maneen

Seth Martin, M.D.

Aruna Nathan, M.D.

Titilayo Ogunmakinwa

**Rachel Pigott** 

Cameron Pollock

Vaple Robinson, Ph.D., R.N.

Jason Semanoff

Teresa Titus-Howard, Ph.D.

Sara Vazer, M.D.

Kristin Watson, Pharm.D.

Pamela Williams

Vanina Wolf

Pamela Xenakis, RDN

Ms. Pier then thanked everyone for participating in the PHHS Block Grant Public Hearing and closed the meeting to the public at 4:45 pm.

# Preventive Health and Health Services (PHHS) Block Grant Public Hearing Meeting Agenda

APRIL 21, 2021 4:05 – 4:45 PM

## **Virtual Meeting**

**Zoom Meeting** 

or

Phone: 1-301-715-8592 Meeting ID: 995 7073 8978 Passcode: 472819

l.	Welcome and Open Public Hearing Kristi Pier, MHS, Director, Center for Chronic Disease Prevention a	<b>4:05 PM</b> nd Control
II.	Preventive Health and Health Services (PHHS) Block Grant Olubukola Alonge, MD, MPH, Program Team Manager Center for Chronic Disease Prevention and Control  • FY 2020 Outcomes and Progress Review  • FY 2021 Workplan and Budget Review	4:05 PM
III.	Questions and Council Comments and Feedback	4:30 PM

Vote for Approval of PHHS FY21 Workplan and Budget

**Close PHHS Advisory Council Public Hearing** 

IV.

V.

4:40 PM

4:45 PM