### MARYLAND ADVISORY COUNCIL ON HEALTH AND WELLNESS **MINUTES** October 16, 2019 4:00 p.m.

The Maryland State Advisory Council on Health and Wellness held a public meeting on 10/16/2019, beginning at 4:00 p.m. at the following location:

Maryland Department of Health 201 West Preston Street, Room L-3 Baltimore, MD 21201

#### **Members Present**

Mary Backley Sumit Bassi Angela Deal Mychelle Farmer Gary Gerstenblith Donna Gugel Margaret Gwaltney Roger Harrell Jessica Kiel (Chair)

Linda Kline Julie Maneen Seth Martin Aruna Nathan Rachel Pigott Cameron Pollock

Kristin Watson Vanina Wolf Pamela Xenakis

Jason Semanoff

Vivienne Rose

#### **Members Not Present**

Jennifer Eastman James Ebeling Lois Freeman Namisa Kramer Jody Marshall David McShea Johnel Metcalf Michael Miller Donna Nordstrom Joanne Ogaitis Joanne Roberts Anne Williams

## **Guests Present**

Kim Bennardi Amber Starn

#### Maryland Department of Health (MDH) Staff Present

Erin Ashinghurst

Melissa Beasley

Linda Carter

Amanda Klein

Mia Matthews

Maya Nirmalraj

Kristi Pier

Sue Vaeth

Pamela Williams

#### 1. New Business

Transition of Leadership of Health and Wellness Council Dr. Vivienne Rose thanked the council for the opportunity to serve and transitioned leadership to Jessica Kiel.

#### 2. Open Maryland Advisory Council on Health and Wellness

Ms. Kiel called the Maryland Advisory Council on Health and Wellness meeting to order at 4:08 PM and held roll call. New members introduced themselves to the council.

#### 3. Approve Council Minutes

Rachel Pigott moved to accept the July 17, 2019 meeting minutes and Cameron Pollock seconded the motion. The minutes were approved unanimously.

#### 4. Council Updates

Ms. Kiel reviewed the council's goals, attendance requirements, and emphasized the importance of attending meetings in person. She stated that she will be encouraging intercommittee collaboration. She will be scheduling meetings with committee chairs soon.

#### 5. Best Practice Spotlight

# MDH Diabetes Action Plan, Kristi Pier, Director of the Center for Chronic Disease Prevention and Control

- Ms. Pier introduced the Draft Diabetes Action Plan, requested council members to read the plan, think about their role in the plan, and provide feedback. Ms. Pier stated that Diabetes is the focus of the Maryland Primary Care Program's first big improvement goal and is also the leading cause of preventable death and disability. There is an increasing prevalence of diabetes reflecting significant racial, ethnic, and economic disparities. Evidence-based programs (EBPs) can prevent or delay onset and improve outcomes. The Diabetes Action Plan was an intense 90-day effort to establish the foundation for a broad public campaign. It consists of four sections:
  - o Section I: The Burden and Consequences of Diabetes
  - Section II: Determinants and Risk Factors for Diabetes
  - Section III: Intervention Strategies and Action Steps for Diabetes Prevention and Control
  - Section IV: Inventory of Diabetes-Related Resources

The plan is structured on a Diabetes Risk Continuum with a focus on 4 populations:

- Healthy Population in Maryland: (32%)
- Overweight and Obese in Maryland: (66.2%)
- Prediabetes in Maryland: (33.9%)
- Diagnosed Diabetes and Diabetes with Complications in Maryland: (10.5%)
- Ms. Kiel thanked Ms. Pier and the Action Plan team for all their hard work. She asked, "How long is the open comment period?"

- Ms. Gugel answered, "The comment period is open for 30 days. Staff is looking at it every 2 days and some feedback has already been incorporated. We are grateful for the comments that have already been received."
- Ms. Kiel asked, "Can the link to the plan can be sent to share within council members' respective organizations?"
  - Ms. Pier answered, "Yes, definitely. Action plans are only useful if they are implemented. If there are action steps that are important for your organization to be part of, please tell us where you want to be working collaboratively."
- The Maryland Diabetes Action plan is available at: https://phpa.health.maryland.gov/ccdpc/Pages/diabetes-action-plan.aspx.

# 6. Charles County Mobile Integrated Healthcare (MIH): Paving the Way to a Healthier Community, Amber Starn, Epidemiologist and Manager of the Charles County MIH Program

- Ms. Starn introduced the MIH Program, a free, voluntary, patient-centered program
  with mobile resources and personalized care coordination in Charles County. The MIH
  team helps community residents manage their healthcare needs without frequent use
  of the 911 system and the Emergency Department (ED). The team's goals are to:
  - o Decrease the percentage of ED visits and 911 calls among participants by 25%.
  - o Increase the number of participants who visit their primary care provider twice a year for routine care.
  - Increase health literacy by educating participants on prevention/management of their disease processes.
  - Make at least one referral per participant to a needed community, health, or social service.
  - Give people the tools to self-manage their disease processes.

To enroll, candidates must be 18 years or older, a Charles County resident, and have one or more chronic health condition. The program's strengths include their partners and community agencies to refer patients for services, and their good reputation and trust with participants resulting in patient compliance. The program's barriers include transportation, mental health needs, long waiting lists for community programs, complicated patients that affect the hospital readmission and high utilization rates but are not necessarily appropriate for MIH services, cost of medications, and the reduction of food stamp allowance since many clients have strict nutritional needs.

- Question from Dr. Nathan, "The reduction in emergency department visits are very impressive at nearly 60%, is that of the number of patients enrolled in the program?"
  - o Ms. Starn answered, "Yes, we are able to go through the hospital's medical records because of our Business Associate Agreement with the hospital.

#### 7. Close

Ms. Kiel adjourned the meeting and reminded members of the room to attend their Committee's breakout session. The meeting adjourned at 5:02 PM.

Next meeting: Wednesday, January 15, 2019 from 4:00-6:00 PM