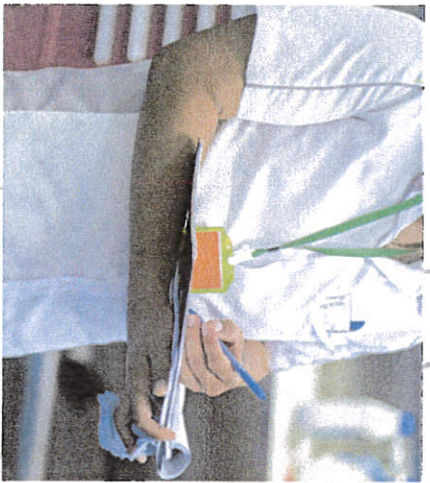


Health Department Overview



March 20, 2019
Presentation to County Council
Dr. Ernest Carter, Acting Health Officer

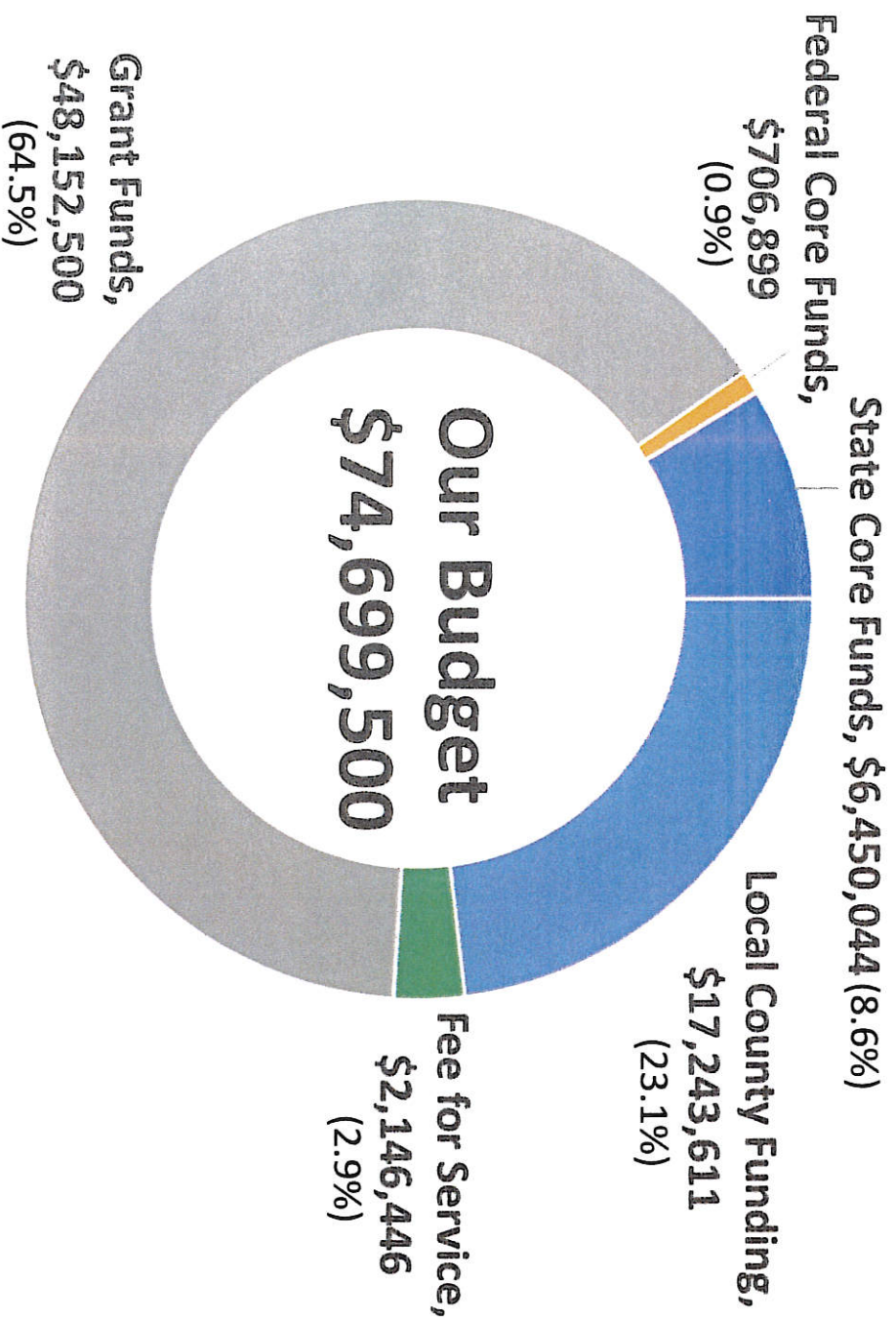


Background

- Public Health is “The science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, public and private communities, and individuals.” – CEA Winslow
- The mission of Prince George's County Health Department is to:
 - **Protect** the public's health
 - **Assure** availability of and access to quality health care services
 - **Promote** individual and community responsibility for the prevention of disease, injury and disability

<https://www.cdc.gov/publichealth101/documents/introduction-to-public-health.pdf>

Health Department FY 19 Budget



Prince George's Healthcare Action Coalition (PGHAC)

- Health is a shared responsibility – PGHAC is the voice of the community
- No one agency or organization can fully address health
- The Vision: a county that elevates the health and well-being of our residents, visitors and communities

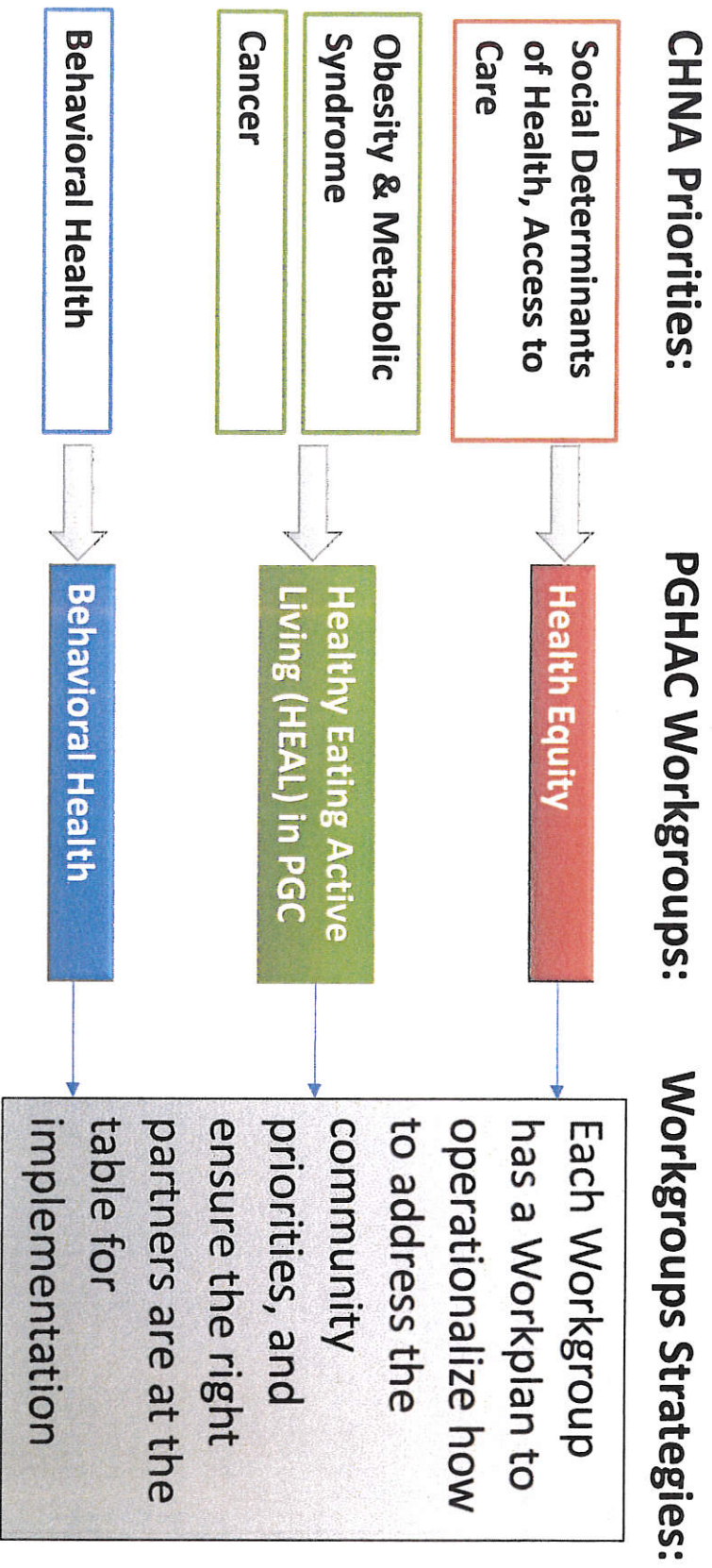


PRINCE GEORGES
HEALTHCARE
ACTION COALITION
COMMUNITY-POWERED

THE COALITION IS A COLLABORATION

- 300+ members
- 200 agencies, organizations, communities
- Conducts the Community Health Needs Assessment (CHNA)
- Develops and Implements the Community Health Improvement Plan (CHIP)

Community Health Priorities



Our Impact (FY18)

Environmental Health/Disease Control

2,088 Disease Cases Investigated
1,393 Potential rabies investigations
4,469 Food Service Inspections
761 Pool Inspections

Family Health Services

7,701 Sexually Transmitted Infections Investigated
217,884 Family Health clinical Services provided
183,480 Nutrition and Lactation Support Visits
1,946 Dental Care Visits
16,372 Vaccinations given

Behavioral Health

13,611 Mental Health and Substance Use Visits
1,578 Naloxone Doses Provided to Community
1,002 Mobile Crisis Team Dispatches
984 Tobacco Underage Sales Checks

Health and Wellness

65,580 Medical Appointments Kept by
Providing Transportation
18,664 Enrolled/recertified in the Maryland
Children's Health Program
190 Served in the Dine & Learn Program

Health Department Successes

Grants Supporting At-Risk Populations

- Assistance in Community Integration Services (ACIS) – pilot for housing and support services for at risk populations (\$634,500)
- PreventionLink - CDC cooperative agreement to prevent diabetes (\$12M)
- System of Care - developing a system to support Behavioral Health needs for youth and young adults (\$3,990,825)

Health Outcomes

- 30% Reduction in overdoses occurring in the County from 2017 to 2018.
- The infant mortality rate declined by 16% from 2008-2012 to 2013-2017
- Heart Disease mortality rates declined from 193.1 (2011-2013) to 168.9 (2015-2017)
- High school tobacco use decreased from 23% percent of students in 2014 to 16.6% in 2016

Programs/Special Projects

- Step Forward - Behavioral Health Anti-Stigma Campaign
- Food Protection Training Program for Chronic Offenders & Food Operators
- Langley Park Multi-Service Center
- PGHAC Expansion
- Health Enterprise Zone Pilot demonstrated a significant reduction in hospital utilization and charges

Health Department Challenges & Opportunities

- Lack of Housing in the County – ACIS clients are unable to be placed.
- Lack of Federally Negotiated Indirect Rate
- Need for Health Equity Education for Cohesive Approach to the Improvement of Health in the County
- Spending Less Than Neighboring Jurisdictions on Health
- Majority of HD Programs are restricted to the grant requirements of our funders, which does not allow us the flexibility to be responsive to public health issues/needs as they arise.

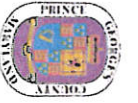


Challenges & Opportunities

Social Determinants	Range for County Census Tracts	
Median Household Income	\$32,045	\$172,061
No high school degree (25 years+)	0.1%	74.6%
No college degree (25 years+)	24.1%	97.3%
Limited English Speaking Households	0%	67%
Unemployment	1.0%	30.4%

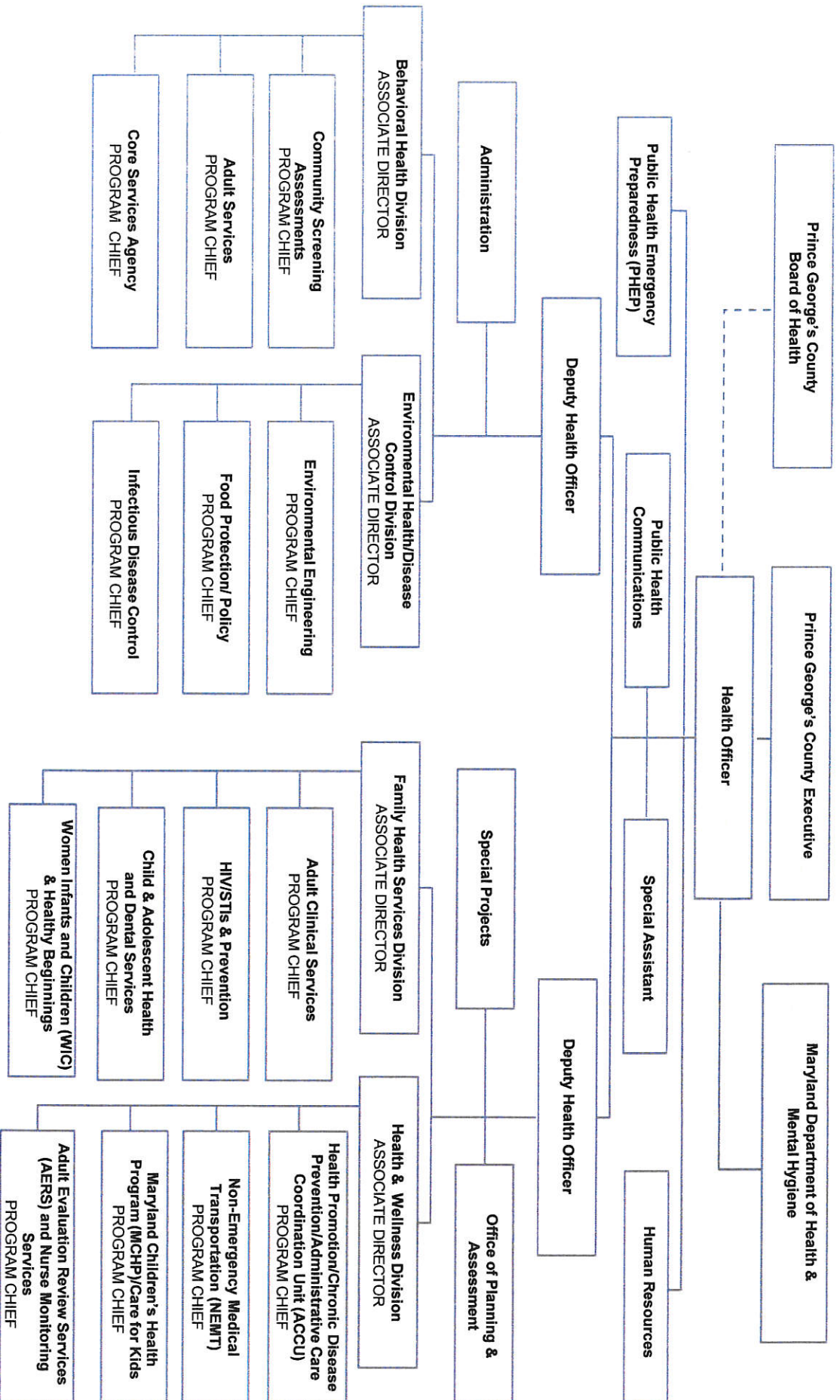
There is a 16-year difference in life expectancy within Prince George's County depending on where you live.

Additional Information



PRINCE GEORGE'S COUNTY HEALTH DEPARTMENT

Headquarters Building
1701 McCormick Drive, Largo, Maryland 20774
Telephone: (301) 883-7879



Behavioral Health Division



Community Screening & Assessments

- Office of Problem Solving Court Programs (Drug Court, Veterans, etc.)
- Parole & Probation Services (Assessment & Case Management Unit)
- Social Services Screening (TCA, HB7, SB512)
- Hospital Screening & Referral



Adult Services

- Bridge Center at Adams House
- Methadone Program
- Outpatient Program
- Intensive Outpatient Program
- Recovery & Support Services
- Tobacco Use & Prevention
- Reentry Services
- Jail-Based Treatment Services



Youth Services

- Operation Safe Kids
- Recovery Club House
- Outpatient Program
- Intensive Outpatient Program
- Teen Court
- Prevention

Environmental Health/Disease Control Division



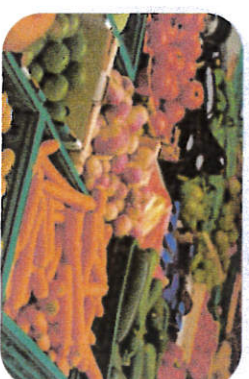
**Infectious Disease Control
Program**

- Prevention & Control
- Education/Disease Consultation
- Outbreak Investigation
- Infection Control and Coordination
- Vector Education & Control
- 24-Hour Coverage



**Environmental
Engineering Program**

- Environmental Lead and Asthma
- Pools/Spas
- Solid and Hazardous Waste
- Health Impact Assessment/Plan Review
- Wells/Septic Systems
- Complaint Investigations



**Food Protection/
Policy Program**

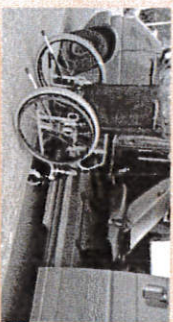
- Food Service Facility Inspections
- Complaint Investigations
- Food Service Manager Training and Certification
- Food Policy Council

Health & Wellness Division



Health Promotion / Chronic Disease Prevention/ Administrative Care Coordination Unit (ACCU)

- Chronic disease prevention & management
- Healthy Eating, Active Living (HEAL)
- Cancer Programs
- Diabetes On The Road Program



Non-Emergency Medical Transportation

- Non-emergency transportation to scheduled medical appointments with **no other** means of transportation*



Maryland Children Health Program (MCHP)/ Care for Kids

- Insurance for uninsured children under 19 years of age, and pregnant woman who cannot afford private insurance or qualify for government health insurance programs
- Assistance to children who do not qualify for public or private health insurance, providing enrollment assistance.



Adult Evaluation Review Services (AERS) & Nurse Monitoring Services

- In-home nurse case monitoring
- Senior care support
- Comprehensive evaluation of chronically ill or older adults at-risk for nursing home placement
- Medicare Waiver

Family Health Services Division



Clinical Services

- Dental Health for All- Preventative and Restorative services (self pay based a sliding fee schedule, Medicaid, Ryan White, MCHP, some commercial insurance carriers)
- Healthy Teens & Young Adults (adolescent health, Title X services)
- Immunizations (VFC, Future- Travel vaccines)
- Reproductive Health Resource Center (Family Planning & STI testing/treatment, Expedited Partner Therapy)
- School-Based Wellness Center- Adolescent Health including Somatic and Behavioral Health (Bladensburg, Fairmont Hqts, Northwestern, Oxon Hill High Schools)
- Refugee Health- Ending 6/30/19)
- TB Testing, Treatment & Case Management (Onsite a Video Observation Therapy)
- HAP Clinic (HIV treatment & Support Services)
- Medication Dispensing Program



HIV/STD & Prevention

- STD Control/Prevention
 1. Partner Services/Partner notification services
 2. STI Prevention/Testing
 3. HIV Testing, Counseling, Treatment and Linkage to care/Specialty Referral
 4. Disease Investigation (including cluster investigation)
 5. Provider Education
 6. Ryan White Support Services- Therapeutic Behavioral Health Counseling and Treatment
 7. Early Intervention Services
 8. High Risk Negative Support Services (Post Exposure Prophylaxis (PEP), Preeposure Prophylaxis (PrEP) –future FY 19, other services to keep well)
 9. TASP (treatment as HIV prevention)



Case Management/Care Coordination

- Healthy Beginnings for High Risk Moms and babies-includes safe sleep initiative that is a part of the *Smart Start for Babies Campaign)
- Ryan White Non-Medical Case Management
- Ryan White Medical Case Management
- Ryan White Support Services:
 1. Emergency Financial Assistance for Food, Transportation and Housing Assistance
 2. Psycho-social support groups



WIC

- Nutrition and Breastfeeding Education & Support eligible pregnant and postpartum Women and Children 0-5 Years of Age.

Assistance in Community Integration Services (ACIS)

- ACIS serves the County's high-risk, high system utilizers with chronic physical and/or mental health disease and are chronically homeless or at-risk of homelessness post-release institutional settings including hospital, incarceration and foster care
- ACIS is a pilot program through a service expansion initiative of the State of Maryland's Medicaid §1115 HealthChoice Waiver
- ACIS brings together partners from governmental and non-profit organizations to serve our County's most vulnerable residents

PreventionLink

- \$12 million, 5 year cooperative agreement from the Centers for Disease Control and Prevention to reduce the impact of diabetes, hypertension, and stroke in Prince George's, St. Mary's, Charles, and Calvert counties
- Prince George's County Health Department is the lead entity
- PreventionLink builds on lessons learned in the Health Enterprise Zone
- Integrates clinical practice with evidence-based public health programs to improve health outcomes for patients at all levels of risk for chronic disease
- Includes innovations in the use of health information technology and the development of communities of practice to bring together stakeholders in chronic disease care
- **Long-Term (5 year) Goals:**
 - 25% decrease in # of patients with diabetes A1C>9
 - 50% increase in # of patients with known high blood pressure who achieve blood pressure control
 - 50% increase in # of patients at risk for cardiovascular events whose cholesterol is controlled

System of Care (Children's Mental Health Initiative)

- This grant (\$996,176 annually) from the Substance Abuse and Mental Health Services Administration (SAMSHA) allowed County representatives to engage in a strategic planning process focused on the development and implementation of a system of care for children and youth with serious mental health issues and their families
- A system of care is an array of effective, community-based services and supports that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to function better at home, in school and in the community.
- Recent Key Activities include:
 - Conducted 20 listening sessions to understand the behavioral health system gaps and strengths in the County. Participants included: foster families; Transforming Neighborhood Initiative Community Resource Coordinators; Cheltenham staff; Health Department staff; foster care case workers; pediatricians; Cheltenham families and youth; Youth Bureaus; parents and youth at the Langley Park multi-service center (session with parents conducted in Spanish); Office of the Sheriff; crisis response team members; private providers; and other families and youth.
 - Conducted a fund mapping of Prince George's County behavioral health and related expenditures for youth ages 8 – 18 to better understand resource allocation.

Food Protection Training Program for Food Operators & Chronic Offenders

- Chronic Offender Training Program
 - Chronic offenders are restaurant owners that have 2+ food safety violations in one year
 - Chronic offenders are fined \$500 per year
 - The Health Department offers a training program to help them learn about food safety and avoid future offenses
 - Feedback from owners has been positive – the program is appreciated
- Food Safety Training for Food Operators
 - The Health Department offers training for restaurant owners and others who handle food (“food operators”)
 - A recent training, “Active Managerial Control” had over 75 attendees from local businesses
 - Provided statistics, training, and a short film created by employees in the Environmental Health/Disease Control division

Overdose Reduction

While many jurisdictions in Maryland saw an increase in overdose deaths in 2018, Prince George's County experienced a reduction:

- From January – Sept 2018, there were 90 overdose deaths occurring in Prince George's County. This is a **30% reduction** compared to the same period in 2017 (n=128)

The collaborative Overdose Fatality Review/Opioid Intervention Team led by the Health Department and Office of Homeland Security/Office of Emergency Management has worked to:

- Expand overdose education with a broad media campaign and naloxone distribution including opioid users, syringe exchange participants, law enforcement, and correctional officers
- Optimize every opportunity for engagement into treatment including police ride-alongs to visit non-fatal overdose victims and train them in naloxone; care coordination with hospital emergency rooms; and offering treatment those receiving clean syringes from the newly initiated syringe exchange service

Sources: MDH Behavioral Health Administration, 2018 Quarterly Report, 3rd Quarter; 2018 OFR Annual Report

Health Equity Workgroup

Vision: Prince George's County is a place where everyone has equitable access to achieve their full health and wellness potential, regardless of race, color, religion, country of origin, immigration status, class, age, disability, sexual orientation, gender or gender identity.

Co-Chairs: Shari Curtis, Sharon Zalewski

Research Assistant: Olivia Kachingwe,
onkachingwe@co.pg.md.us

Meeting: 3rd Wednesday of the month, 4:30-6:30pm



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Healthy Eating Active Living (HEAL) Workgroup

Vision: The Healthy Eating Active Living Workgroup envisions Prince George's County as a place where everyone has access to fresh, nutritious food and environments that promote good health, wellness and active living.

Co-Chairs: Sydney Daigle, Anthony Nolan

Research Assistant: Krystle Coldiron, ktcoldiron@co.pg.md.us

Meeting: 1st Wednesday of the month, 6:00-8:00pm



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Behavioral Health Workgroup (BHAG)

Vision: Prince George's County is a place where residents have access to integrated behavioral health care services through a resilient behavioral health workforce who provide continuous high-quality, personalized and culturally-sensitive care.

Co-Chairs: Guy Merritt, Kent Alford

Research Assistant: Samantha Smith, sasmith3@co.pg.md.us

Meeting: 3rd Wednesday of the month, 2:00-4:00PM



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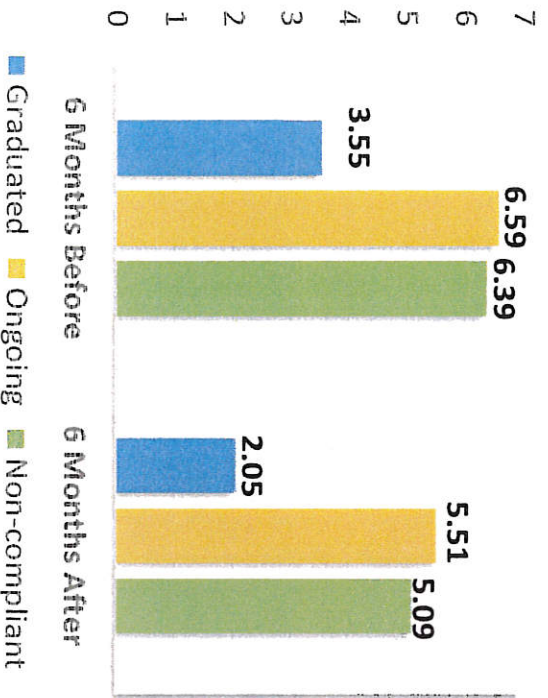


Health Enterprise Zone: Hospital Use Analysis (N=143)

	Graduated	Ongoing	Non-Compliant
Average Age (years)	48.8	50.0	48.2
% Female	82%	56%	52%
% Black	95%	88%	94%
% Reside in HEZ	41%	44%	55%
% Medicare	29%	24%	36%
Average Pathways	2.73	3.34	2.67

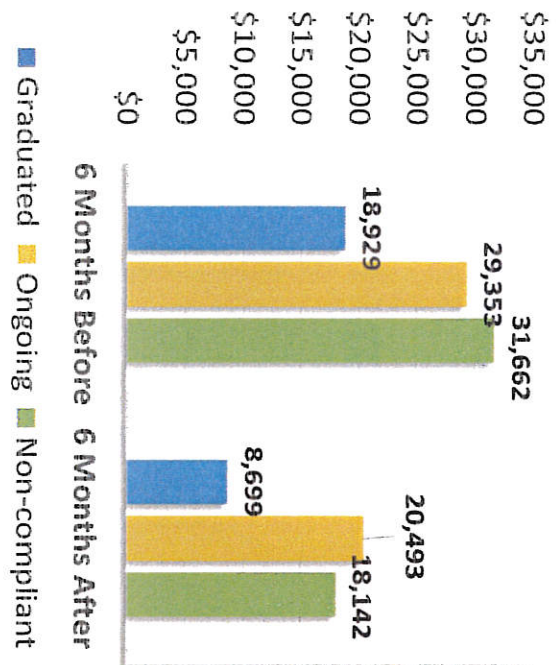
Total Hospital Patients N = 143	Before CHW Intervention	6-Months After Intervention	Difference	Total Reduction and Savings
Visits	4.83	3.38	1.45 reduction	207 visits
Charges	\$26,997	\$16,801	\$10,195	\$1,457,885

Average Hospital Visits per Patient



■ Graduated ■ Ongoing ■ Non-compliant
42.2% **16.4%** **20.3%**
Reduction in Visits

Average Hospital Charges per Patient



■ Graduated ■ Ongoing ■ Non-compliant
54% **30.2%** **42.7%**
Reduction in Cost

Primary Care Strategic Plan

Highlights of 7 key Recommendations

To achieve the goal of expanding access to primary healthcare services, the County would need a multipronged approach:

1. Increase patient-centered primary care practices in high-need areas.
2. Build capacity of existing primary care practices to operate as patient-centered medical homes.
3. Build collaboration among Prince George's County hospitals.
4. Develop work force to support patient-centered primary care.
5. Implement a marketing and branding campaign.
6. ***Establish a Prince George's Healthcare Alliance (Primary Healthcare Alliance) to ensure successful implementation of the Primary Healthcare Strategic Plan.***
7. Develop and implement a monitoring and evaluation plan.



Health Assures Update

- Conducted stakeholder meetings;
- Developed a project plan;
- Identified participating providers;
- Completed eligibility requirements;
- Developed an operations budget and plan;
- Completed Phase One implementation activities to include:
 - Infrastructure development;
 - Determination of number of patients, who will be served, execution of provider agreements, provider training, implementation/Go-Live date.
 - Developed standard operating procedures for Health Assures.

Once the funds are received, they will conduct provider trainings, establish an advisory board and communicate plan to key stakeholders and establish a regular meeting schedule and begin service delivery.