

***Western Maryland Health System (WMHS)
Allegany County Health Department (ACHD)
Community Partners***

Working Together to Improve Health

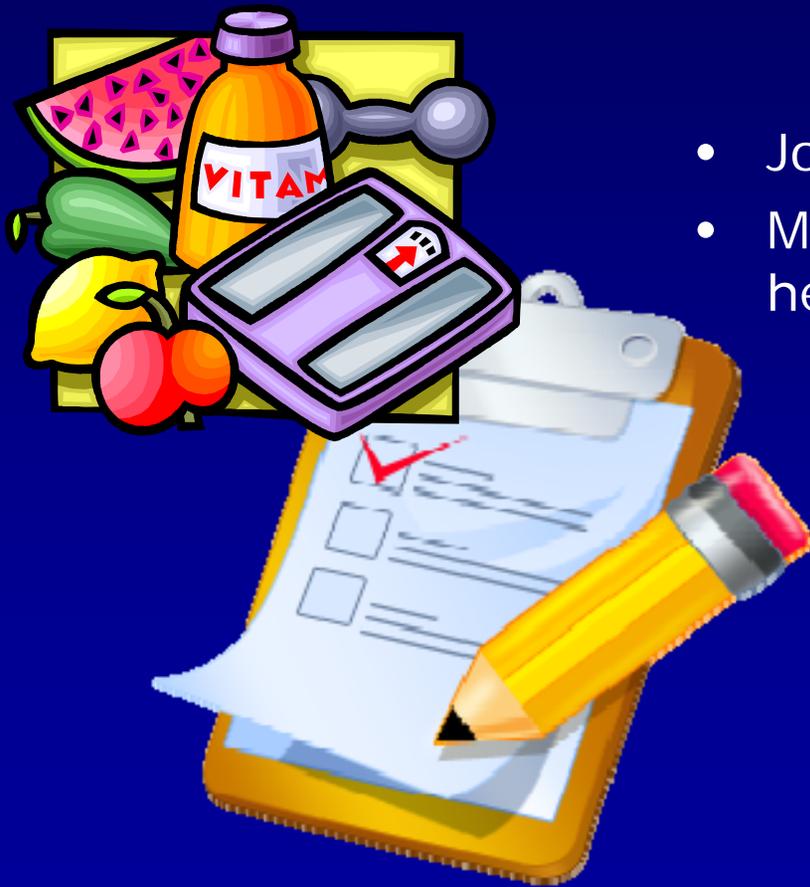
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Impetus for Joint Action

2010 County Health Rankings

- Allegany County Rankings
 - 21st – Health Outcomes
 - 20th – Health Factors
- WMHS Community Health and Wellness Division and ACHD met to discuss County Health Rankings and develop a strategy to address issues
- Health Fair focused on identified health needs

Allegany County Health Needs Assessment 2011 and 2013



- Jointly led by WMHS and ACHD
- Many focus groups help prioritize health needs to be addressed

Local Health Improvement Coalition (LHIC) Established in 2011

- Co-chaired by ACHD and WMHS
- Founding Partners
 - ACHD, WMHS, Board of Education (BOE), Western Maryland Area Health Education Center (WMAHEC), Tri-State Community Health Center (Federally Qualified Health Center - FQHC), County United Way, Allegany Health Right, Allegany County Human Resources Development Commission (HRDC)
- Advisory Board: Founding partners plus...
 - Media, Business/Economic Development, Providers, Case Management, Law Enforcement
- Affiliates

Developed Local Health Action Plans (LHAP)

- July 2011 – June 2014
- July 2014 – June 2017

Local Health Action Plan Workgroup (Subgroup of LHIC) – ACHD & WMHS staff

- Develops Community Health Needs Assessment data sets
- Fine tunes LHAP draft to go to LHIC
- Developing MOUs and grants

Allegheny County Health Planning Coalition



Vision

Healthier together in Allegheny County.

Mission

Healthy lifestyles through collaborative partnerships, evidence-based practices and personal commitments.

<http://www.alleghenyhealthplanningcoalition.com>

Financing

- Community Trust Foundation Grant for transportation
- In Kind funding – WMHS and ACHD
- Two Maryland Community Health Resources Commission (MCHRC) grants
 - 2012 Grants to LHICs - \$25,000
 - 2013 – 2014 Health Allegany Grant - \$185,048



Healthy Allegany Grant

Community Health Worker Program

- 9 Community Health Workers hired by ACHD and WMHS
- Trained together by Western Maryland Area Health Education Center (AHEC) and WMHS Staff
- Developed joint systems:
 - Share information
 - Single tracking process
- Community Health Worker Services
 - Clients referred by their primary care provider or other providers and agencies in the community
 - Visit clients and support health goals
 - Refer to transportation
 - Prescription assistance, insurance
 - Tobacco cessation
 - Housing
 - Food resources
- Improvements seen
 - Decrease in tobacco use
 - Increase in activity level
 - Progress on goals
 - Decrease in disease red flags (blood pressure, glucose control, weight, breathing)
 - Decrease in recent emergency room and hospital visits

Healthy Allegany Grant

Transportation

- Transportation Surveys (ACHD, WMHS, FOHC) – 2011 and 2014
 - 25% (2011) and 23% (2014) clients reported missing health appointments due to lack of transportation
- LHIC – Transportation Workgroup
 - Developed Mobility Management Program
- HRDC houses Mobility Manager
 - Assists clients navigating currently available transportation services
 - Provides bus and cab vouchers for low-income residents to attend health appointments, human services appointments
 - The program began in December 2013; has been running for 10 months; to date 774 calls, 627 vouchers for bus/cab
- Working on sustainability beyond grant funding

Healthy Allegheny Grant

Community Resource Guide

- Developed by LHIC December 2013
- Local resources
 - Health insurance
 - Dental
 - Behavioral health
 - Food and nutrition
 - Housing
 - Prescription assistance
 - Transportation
 - Family services
 - Medical equipment
 - Senior care
 - Other
- Guide helps providers and community organizations in referring clients
- CHWs distributed to 115 health care facilities and community organizations

Consistent Health Communication

- LHIC works together to ensure consistent messaging to engage and inform the community
- Materials developed by subgroup of coalition and distributed by coalition partners
- Examples:
 - 911 Rack Card
 - Nutrition and Physical Activity Resource Rack Card
 - Preventive Health Services Rack Card



Major Impacts

- ↓ Behavioral Health Emergency Room Visits
- ↓ Dental Emergency Room Visits
- ↓ Obesity and Smoking
- ↑ Services for people with Chronic Disease
- ↑ Availability of Transportation
- ↑ Collaboration of Community Partners
- ↑ Access to Care



Challenges



- Poverty and Rurality
- Appalachian Culture
- Developing formal contracts and MOUs between local partners
 - legal barriers
- Helping educate staff and governing boards WMHS and ACHD
 - embrace challenges and opportunities in moving from a sick system to a community partnering to improve the health of all residents
- Meeting requirements
 - Patient Protection and Affordable Care Act, the Health Care Reconciliation Act, and Community Benefits for WMHS and Public Health Accreditation Board (PHAB) Accreditation for ACHD
- Learning to use all existing assets provided by all partners in broad public health systems
 - in other words, not recreating wheels that already exist
- Funding

Conclusion

Poverty is our greatest disparity. A spirit of collaboration is our greatest asset.

Together, we are moving forward.

