

**Appendix 3 - Community Health Improvement Implementation Plan  
FY17-19**

<b>Priority Area: Access to Care</b>					
<b>Long Term Goals Supporting Maryland SHIP:</b>					
1) To increase the percentage of adults who are vaccinated against influenza annually.					
2) To increase the percentage of people with a usual primary care provider.					
3) To decrease emergency visits related to mental health conditions.					
<b>Annual Objective</b>	<b>Strategy</b>	<b>Target Population</b>	<b>Actions Description</b>	<b>Performance Measures</b>	<b>Resources/Partners</b>
To increase the number of free flu vaccinations provided to the community.	Increase the number of sites and clinics where flu shots are offered.	Community	Free community flu vaccination clinics will be held on and off campus at a variety of locations and times. They will be advertised with home mailings, social media, and flyers in public places.	Number of free flu clinics hosted. Number of individuals vaccinated.	White Marsh Mall Shops at Kenilworth Greetings & Readings St. Joseph Parish Catholic Charities
St. Clare Medical Outreach will provide increased access to healthcare in the uninsured population.	Continue monthly intake of new patients as program allows.	Undocumented population	Monthly interview potential patients for eligibility. If eligible schedule appointment with primary care provider. If not eligible provide resources for health care access.	Number of new patients per month.	UM/SJMC Baltimore County Health Dept. Federally funded health clinics in Baltimore City and County. Access Maryland Health Connection

Build strong partnerships with UM St. Joseph Medical Group Primary Care Providers and specialists in order to provide timely access to service.	Create referral coordinator role to assist with appointment scheduling.	Medical Group patients, community and providers	Develop protocols to improve timely communication and better handoffs from provider to provider. Work with physicians to open capacity for new patients in need of care.	Number of new patients seen within the network. Percentage of new patient appointments made and kept. Decrease in no-show appointments.	UM St. Joseph Medical Group,
Develop after hours and extended hours care to meet the growing health needs of the community	Extended PCP office hours into evenings and weekends to accommodate variety of patients. Enhance partnership with ChoiceOne Urgent Care Center by opening additional sites.	Community	Currently three locations are open in Towson, Dundalk and Jacksonville.	Opening of a new site by the end of FY 17 Number of patients seen during extended office hours	ChoiceOne Urgent Care and UM SJMG PCP offices
Create more pathways in the community for Behavioral Health patients	Opening a Behavioral Health Center	Primary care patients, behavioral health patients, high risk medical patients.	Open a Behavioral Health Center as part of the Post Discharge Center that can help at risk patients transition back into the community. Encourages counseling, medication adherence.	Hospital PAU and readmission rates. Hospital utilization rates. Number of patients seen.	Community providers, Baltimore County resources. Partners include VNA and Mosaic.

Plan and open a Post Discharge Center that helps high risk patients transition back into the community	Open a center for high risk patients discharged from UM SJMC.	High Risk/high utilizer UM SJMC patients	Open a center with 3 disciplines, physician provider, pharmacist and case manager to follow up on high risk patients discharged from UM SJMC and transition them back into the community.	Hospital PAU and readmission rates. Hospital utilization rates. Number of patients seen.	Community providers, Baltimore County resources, community resources, SJMG and SJMC resources
Further enhance partnership with Maxim Transition Assist to help high risk patients transition back into the community ensuring proper follow up and psychosocial needs are met	Community Health Workers (CHW) will provide non-clinical in-home services to high risk UM SJMC discharged patients.	High Risk medicine or behavioral health patients	CHWs to help with transportation needs, follow up appointments, psychosocial needs. Report conditions to providers.	Hospital PAU and readmission rates. Hospital utilization rates. Number of patients seen.	Maxim Transition Assist. Baltimore County Health Department resources
Invest in Transition Nurse Navigators to help with targeted patient populations	Provide telephone post discharge follow up to high risk medical and behavioral health patients and make arrangements to assist or augment discharge plans.	High risk, high utilizer medical and behavioral health patients	May connect patients to CHW, Post Discharge Center or Behavioral Health Center in addition to community providers.	Hospital PAU, readmission and utilization	Maxim Transition Assist. Baltimore County Health Department resources.

<p>Increase awareness on important considerations for health literacy when interacting with patients (written and verbal).</p>	<p>Educate employees about health literacy.</p>	<p>Employees and Community</p>	<p>Incorporate UMMS Health Literacy video into annual HealthStream training for employees.</p> <p>Present UMMS Health Literacy video to providers.</p>	<p>Number of employees educated</p> <p>Number of providers educated</p>	<p>Dr. Smyth</p>
	<p>Use a 5<sup>th</sup> grade reading level in health literature and forms.</p>	<p>Patients and community</p>	<p>Revise screening forms and handouts to improve readability.</p>	<p>Number of forms revised</p> <p>Number of handouts revised</p>	

**Priority Area: Mental Health and Substance Abuse**

**Long Term Goals Supporting Maryland SHIP:**

- 1) Decrease the rate of emergency department visits related to substance abuse disorders.
- 2) Decrease the percentage of adults who currently smoke.

Annual Objective	Strategy	Target Population	Actions Description	Performance Measures	Resources/Partners
Increase the number of individuals who are screened and referred for depression.	Increase the knowledge and education of patients on depression and psychosocial issues post cardiac event.	Cardiac Rehab patients	Engage target community on healthy lifestyles through: <ul style="list-style-type: none"> <li>- Education lectures</li> <li>- Education handouts</li> <li>- Psychology referrals 1:1 Consult</li> <li>- PCP referrals</li> <li>- Pre &amp; Post Assessments</li> </ul> Cardiac Speaker Support Group	Pre and Post Assessments including: <ul style="list-style-type: none"> <li>- PhQ9 Index</li> </ul> Outcomes <ul style="list-style-type: none"> <li>- % change in PhQ9 index</li> <li>- # of participants requiring Psychology referral</li> </ul> Number educated	BCDH, AHA, ACS, NIH, UMSJMC Psychology dept., AACVPR, CDC
Provide culturally appropriate access to mental health	Increase staff knowledge of common mental health disorders	Staff of St. Clare Medical Outreach	Provide presentations on Mental disorders/ case studies to staff. Discuss and define diagnosis and treatment options. Identify barriers to treatment. Collect feedback from staff.	Number of presentations presented to staff.	Pro bono Counseling Johns Hopkins Community Outpatient Psych Psych dept. at UM/SJMC Alcoholic Anonymous First Step
Promote medication management and raise awareness on the dangers of over the counter drug addiction.	Develop and deliver a presentation on substance abuse and sleep.  Offer brown bag medication reviews.	Seniors  Community	Present information on how medications affect the brain and sleep. Interventions and treatment will also be discussed.	Number of presentations. Number of attendees.	Baltimore County Department of Aging The National Sleep Center  UM SJMC Pharmacy

<p>Decrease the number of cardiac rehab adults who are using tobacco products.</p>	<p>Provide education &amp; information on smoking cessation management. PowerPoint lectures, guest speakers.</p>	<p>Adults who are entered into the Cardiac Rehab Program</p>	<p>Engage target community on healthy lifestyles through:</p> <ul style="list-style-type: none"> <li>- Tobacco cessation counseling</li> <li>- Education lectures</li> <li>- Education handouts</li> <li>- Referral to county department of health quit smoking program</li> <li>- Pre &amp; Post Assessments</li> </ul>	<p>Pre and Post Assessments including:</p> <ul style="list-style-type: none"> <li>- # of cigarettes/tobacco usage</li> <li>- Cardiac Speaker Support group</li> </ul> <p>Outcomes</p> <ul style="list-style-type: none"> <li>- % changes in tobacco usage</li> </ul> <p># of people who quit during program</p>	<p>Baltimore County Department of Health</p>
<p>Prevent tobacco use and substance abuse in adolescents.</p>	<p>Provide information and educational material on the dangers of tobacco use and substance abuse at the annual Powered by ME! conference.</p>	<p>High school students and athletes, coaches, teachers, administrators</p>	<p>Presentation and educational materials presented and distributed ay annual Powered By ME! Conference</p> <p>Follow up w/ schools who attended conference.</p>	<p>Post conference evaluation</p> <p># of attendees at annual event</p> <p># of schools represented at annual event</p>	<p>Towson Sports Medicine Towson Orthopaedic Associates UM SJMC University of Maryland Shock Trauma Congressman Elijah Cummings</p>
<p>Educate youth of Baltimore County and City on issues regarding mental health</p>	<p>Provide Educational Material on Signs/Symptoms of Mental Health Issues and appropriate treatment options at the annual Powered By ME! Conference</p>	<p>High school students and athletes, coaches, teachers, administrators</p>	<p>Presentation and Educational Materials presented and distributed ay annual Powered By ME! Conference</p> <p>Follow Up w/ Schools who attended Conference.</p>	<p>Post conference evaluation</p> <p># of attendees at annual event</p> <p># of schools represented at annual event</p>	<p>Towson Sports Medicine Center for Eating Disorders at Sheppard Pratt</p>

<p>Educate youth of Baltimore county and city on the dangers of performance enhancing drug use</p>	<p>Provide educational material on negative effects of PED use and appropriate treatment options for PED use and /or Abuse</p>	<p>High school students and athletes, coaches, teachers, administrators</p>	<p>Presentation and Educational Materials presented and distributed ay annual Powered By ME! Conference</p> <p>Follow Up w/ Schools who attended Conference.</p>	<p>Post conference evaluation</p> <p># of attendees at annual event</p> <p># of schools represented at annual event</p>	<p>Towson Sports Medicine Taylor Hooton Foundation</p>
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**Priority Area: Chronic Disease- Cardiovascular Disease/Obesity**

**Long Term Goals Supporting Maryland SHIP:**

- 1) Reduce the age adjusted mortality rate of heart disease.**
- 2) Increase the proportion of adults who are at a healthy weight.**
- 3) Increase the number of people who are physically active.**

Annual Objective	Strategy	Target Population	Actions Description	Performance Measures	Resources/Partners
Increase the proportion of cardiac rehab adults who are at a healthy weight	Provide education & information on the importance on healthy eating, heart healthy shopping, nutritional importance for weight loss, hypertension.	Adults who are entered into the Cardiac Rehab Program	Engage targeted communities on healthy lifestyles through: <ul style="list-style-type: none"> <li>- Education lectures</li> <li>- Education handouts</li> <li>- Heart healthy recipes</li> <li>- Nutrition Fair</li> <li>- Measurement of abdominal girth</li> <li>- Daily weights</li> <li>- Dietician referrals 1:1 Consult</li> <li>- Pre &amp; Post Assessments</li> <li>- Cardiac Speaker Support Group</li> </ul>	Pre and Post Assessments including: <ul style="list-style-type: none"> <li>- Rate your Plate (Heart)</li> <li>- Blood Pressure pre and post exercise</li> <li>- Abdominal Girth</li> <li>- Weight</li> </ul> Outcomes <ul style="list-style-type: none"> <li>- % Change in RYP</li> <li>- % of change in weight loss</li> <li>- % of change in abdominal girth</li> <li>- % of participants with normal BP post exercise program</li> <li>- # of participants who require dietician referral</li> </ul>	AHA, CDC, NIH, ADA, UMSJMC Nutrition Dept, UMSJMC Pharmacy Dept., AACVPR
Monitor and maintain diabetes patients A1C to be at goal.	Engage with Diabetic patients to lower or maintain A1C	Patients of St. Clare Medical Outreach	Establish individualized A1C goals and blood glucose goals for each patient. Monitor A1C and Blood glucose at each visit. Provide education on diabetes at each visit as needed. Encourage patients to be involved in care and treatment.	Monitor A1C and blood glucose at each visit	Diabetes Educators at UM/SJMC Hoffberger Foundation Grant BGE Grant

Increase awareness on the importance of blood pressure management and the signs and symptoms of stroke.	Provide education and information on risks of hypertension and stroke.	Community	Patient will monitor blood glucose at home as directed.  Blood Pressure Screenings Cholesterol Screenings Stroke/AAA Screenings Distribute F.A.S.T. educational material	Number screened Number educated	AHA UM SJMC Stroke Center UM SJMC Lab
Highlight connection between diabetes and resulting complications, especially high blood pressure	Continue and expand evidence-based diabetes education opportunities	Diabetic patients and community	Support Groups Health Fairs	Number educated	American Diabetes Association UM SJMC dieticians
Promote healthy weight loss and management.	Continue body composition analysis	Community	Offer free body composition analysis which identifies individual body fat percentage, muscle mass, total body water, visceral fat, basal metabolic rate, and BMI. Provide education on healthy lifestyles and resources for support.	Number of participants	USDA
	To provide resources, support and education to St. Clare patients seeking to lose weight and maintain healthy habits.	St. Clare Medical Outreach patients.	Identify patients with high BMI and track weight. Provide one on one coaching/education for weight loss and healthy eating Follow up coaching sessions with phone counseling. Provide information in Spanish on weight loss, healthy eating, stress reduction in Spanish	Number of patients educated	Dieticians at UM SJMC BGE grant Weight Watchers ChooseMyplate.gov.

<p>Increase the number of individuals who engage in regular physical activity and stress management.</p>	<p>Continue and expand free yoga classes</p>	<p>Community</p>	<p>Provide presentations to patients on healthy lifestyles and weight management. Provide educational videos in the waiting area on weight management and healthy lifestyles. Encourage patients to stay active and establish an exercise routine.</p> <p>Free yoga classes will be offered weekly to the public.</p>	<p>Number of classes Number of participants</p>	<p>Tree House Yoga Studio UM SJMC WellnessWise</p>
<p>“BeMore Fit N Fun” Program: Educate youth of Baltimore County on the importance of a balanced diet and exercise. Promote active healthy lifestyles and effect change in a family/ community</p>	<p>A free one week camp for youth age 6-12 focusing on proper nutrition and consistent exercise. Educational material and presentations on exercise, nutrition, goal setting, communication, team building</p>	<p>Community</p>	<p>Engage targeted communities on healthy lifestyles through:</p> <ul style="list-style-type: none"> <li>- Education lectures</li> <li>- Education handouts</li> <li>- Healthy Snacking</li> <li>- Daily weights</li> <li>- Dietician referrals</li> <li>- Pre &amp; Post Assessments</li> </ul> <p>PCP referrals</p>	<p>Pre/Post event assessments 2/4/6 week follow up</p>	<p>Towson Sports Medicine Nourish Family Nutrition Dr. Alan Lake Powered By ME! Dr. Michelle Sun Smith</p>

**Priority Area: Cancer FY 2017-FY 2019**

**Long Term Goals Supporting Maryland Cancer Control Plan:**

- 1) Raise awareness of cancer screening guidelines in community**
- 2) Maintain/add to disease specific cancer screening programs, focus on disparities**

Annual Objective	Strategy	Target Population	Actions Description	Performance Measures	Resources/Partners
Educate primary care physicians about cancer screening guidelines	Collaborate with Physician Liaison Office to provide cancer screening guidelines to PCP practices for their patients	Primary Care Physicians	Annual Cancer Symposium  Physician Liaison visits to PCP practices to provide cancer screening guidelines education	# Physicians educated	Physician Liaison Office
Improve early cancer detection in community with a focus on disparities	Collaborate with UM SJMC Employee and Community Health, Health Department and community organizations	Residents of Baltimore County and Metro area Employees	Active Participation in Baltimore County Cancer Coalition  Active Participation in Maryland State Cancer Collaborative and Cancer Plan Steering Committee  Active Participation on Leadership Team of DHMH Patient Navigation Network	# of community members screened, race, ethnicity and insurance status	UM SJMC Employee and Community Health, Health Department and community organizations

Implement Colorectal Cancer Screening program for Employees	Collaborate with GI Physicians, Employee Health, DDC	Employees	Implement screening, track metrics	# Employee colonoscopies performed	*Listed Under Strategy
Continue Community Breast Cancer Screening Program	Collaborate with Cancer Institute/Breast Center and Community Health	Women/Community	Implement screening, track metrics	# Women having screening mammogram	
Continue One Voice Breast Cancer screening program for Uninsured	Collaborate with Advanced Radiology, Cancer Institute/Breast Center and Community Organizations	Uninsured/Underinsured women in community	Implement screening program, navigate women into appropriate resources, track metrics	# Uninsured women receiving screening mammogram and navigation	
Continue Community Prostate Cancer Screening	Collaborate with Cancer Institute, Community Health, GU physicians	Men/Community	Implement screening, track metrics	# Men having prostate exam, DRE and PSA	
Continue Cervical Cancer Screening	Collaborate with Community Health, Cancer Institute & Women's Health Associates	Women/Community focus on disparities	Implement screening, track metrics	# women screened for cervical cancer	

Explore possibility of skin cancer screening program	Meetings with Cancer Institute, Dermatologists, Community Health	Men, Women/Community	Meetings with Cancer Institute , Dermatologists, Community Health and Administration to determine feasibility	Identify other opportunities for screening and education.	
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**Priority Area: Fall Prevention**

**Long Term Goals Supporting Maryland SHIP:**

**1) To decrease the rate of fall related deaths among the elderly.**

Annual Objective	Strategy	Target Population	Actions Description	Performance Measures	Resources/Partners
To support better balance in adults.	Offer Stepping On twice a year.	Adults 65 and over	Stepping On is a 7 week evidence-based program that incorporates balance and strength exercises with education on home safety, medications, footwear, vision, and assistive devices.	Number of programs offered. Number of participants.	Wisconsin Institute for Healthy Aging Maryland Department of Health and Mental Hygiene Department of Injury Prevention and Health Promotion Baltimore County Department of Aging UM SJMC Physical Therapy UM SJMC Pharmacy UM SJMC Safety Officer Orokawa Y in Towson
To promote bone health in	Continue with bone density screenings.	Adults	Bone density screenings are offered through an ultrasound of the heel bone.	Number of individuals screened.	Baltimore County Department of Aging

adults.			Participants are counseled on their risk and given information on protecting bone health. Those identified as high risk are advised to speak with their health care provider about a DEXA scan.		Towson Orthopaedic Associates Bone Health Center National Osteoporosis Foundation
To increase fall prevention awareness in the community.	Provide educational material on ways to reduce fall risk.	Community	Education will be incorporated into bone density screenings. Educational material will be distributed at the Senior Expo.	Number of individuals who receive education.	Baltimore County Department of Aging National Osteoporosis Foundation