



**MAINE CENTER**  
**for Public Health**

# Annual Report 2003



## Maine Center for Public Health Annual Report 2003

The mission of the Maine Center for Public Health is to improve the health of Maine citizens through an organized program of research, education and training, technical assistance, and policy analysis.

### **2003 Goals and Highlights of Accomplishments**

**Goal 1. The Maine Center for Public Health will continue to support efforts to achieve a stronger public health infrastructure throughout Maine.**

#### State Government Re-Organization

- The MCPH Board and MPHA Executive Committee created a Task Force to engage the public health community in the re-organization planning process for currently separate departments of Human Services and Behavioral and Developmental Services. Public health representatives were involved in each key committee as well as the executive planning group. At the opening of 2004, the public health community, via this Task Force, is carefully scrutinizing the Merger Council's recommendations.
- Key Turning Point partners will reconvene in 2004 to discuss how to make sure the Turning Point plans' recommendations can be implemented in a political environment affected by a new administration, the Dirigo Plan and a reorganization of DHS and BDS.

#### Dirigo Policy Development and Rulemaking Task Force

- The Maine Center for Public Health received funding from the Maine Health Access Foundation, as part of a joint initiative with MPHA, to participate in the rule making process for Dirigo Health, assuring a public health perspective in that process.
- Moose Ridge Associates' Betsy Sweet and Karen Geraghty were contracted to advise the Task Force that is composed of a variety of stakeholders, including members of the previous Merger Task Force and MCPH's nominees to the various Dirigo boards and committees. MeHAF Dirigo Health grantees (which include a number of organizations historically identified with the "access community") have met and will continue in 2004 to meet regularly to share insights and strategies. A well-received Public Health "Teach-In" was held for this group in January 2004.
- The Task Force has developed a short list of prevention-related components for the Dirigo Health Plan. Future efforts will include participation in Dirigo forums, communications with the public health community and efforts to liaison with small business.

The above work on the DHS-BDS Merger and Dirigo Health grew out of Maine Turning Point discussions conducted over the previous three years and supported by the Robert Wood Johnson Foundation and The Jessie B. Cox Charitable Trust. Turning Point has been a national RWJ initiative designed to strengthen public health capacity.

### Integrated Primary Care and Mental Health Planning

- The MCPH received funding from the Maine Health Access Foundation for a year-long planning project to identify an effective model or models in Maine to integrate primary care and mental health services.
- A needs assessment, (including a survey of 700+ Maine physicians to gauge their interest in the project) was conducted as well as a literature review and in-depth interviews with pediatricians, mental health providers, and family physicians. A great deal of information has been gathered to date on this topic.
- Dr. Andy Cook and Ann Conway (along with other MeHAF grantees who are developing integrated projects) spoke on a panel at the Maine Primary Care Association meeting. An advisory group of clinicians has been meeting.
- Drs. Cook and Conway have identified the key elements in the models, and are engaged in discussions with others in Maine concerning the many barriers between model development and implementation. The goal remains the initiation of a multi-site demonstration project in January 2005.

### Maine – Harvard Prevention Research Center Advocacy Initiatives

- Over the last year M-HPRC has provided scientific background, educational assistance, and a forum for debate and discussion concerning a legislative package of bills to impact the obesity epidemic by making the environment more supportive of healthy decisions including bills on nutrition labeling at chain restaurants, providing nutritional choices in school vending machines, and an enacted bill creating a legislative commission to study other legislative opportunities.

### Diabetes Public Health System Assessment

- The Maine Bureau of Health Diabetes Program contracted with MCPH to conduct a rigorous assessment of the state's diabetes public health system. This assessment is intended to serve as the impetus for the development of an improvement plan.
- The state instrument developed by the National Public Health Performance Standards Program at CDC served as the framework for this assessment. A diverse statewide team of about 25 core individuals met five times to complete the 800-item tool. Both quantitative and qualitative information were recorded and assessed. An algorithm was used to score quantitative data based on the 10 essential public health services framework. The results of the assessment and a final report are scheduled to be released in February 2004.

**Goal 2. The Maine Center for Public Health will enhance educational and training opportunities in Maine for the public health workforce.**

### Education and Training Committee

- The Center held two well-received workshops. Dr. Leonard Marcus from the Harvard School of Public Health led both train-the-trainer and general sessions on negotiation

and conflict resolution. Another session on data resources available to the Maine public health community was also held.

- Initial steps have been taken toward a pilot internship program involving MCPH Board members' organizations and MPH students from New England universities, to be implemented in summer 2004.
- MCPH staff have developed a plan with community health faculty at the University of Maine at Farmington to place students from the UMF program, to begin in the fall of 2004.
- The MCPH has continued to participate in the HRSA-funded New England Alliance for Workforce Development. Meetings have been held by this group of New England schools of public health and state agencies to enhance the coordination of public health emergency preparedness as general public health training in the region. The Alliance provided the financial support required for Dr. Marcus' training programs mentioned above.

#### Public Health Emergency Preparedness Training

- The Center is continuing its work with the Bureau of Health's Office of Public Health Emergency Preparedness to provide training to the public health and health care work force in collaboration with the Harvard Center for Public Health Preparedness (HCPHP).
- Assessments of public health workforce competencies and training needs were completed for the core Bureau of Health emergency preparedness staff with the remainder of staff completing the first assessment based on national standards. These assessment findings provide the framework for targeted trainings within the Bureau.
- A number of trainings were held, including eleven videoconferences coordinated with the HCPHP, for the core emergency preparedness group at the Maine Bureau of Health. Also, a statewide multidisciplinary satellite broadcast, "Partnerships for Emergency Preparedness & Response: Roles and Responsibilities at local, state and federal levels," co-sponsored with the Harvard Center for Public Health Preparedness and the Maine Bureau of Health was held in June 2003. A total of 213 participants consisting of public health staff, first responders, emergency management personnel, school nurses, Red Cross leaders, town health officers, primary care providers, hospital staff, and mental health crisis workers were engaged at ten facilitated sites scattered around Maine.
- A statewide Public Health Emergency Preparedness Education and Training Coordinating Committee was established. This group meets regularly to guide the training of specific target groups and to assure minimal redundancy and maximum coordination among the state agencies and non-profit organizations.
- A two year training plan was developed with the coordinating committee members that delineates target audiences, core content areas for training, strategies for implementing, and sets specific priorities for each targeted group. The training plan adopted "train the trainer" model as a sustainable method of increasing the training base. The MCPH, with the support of Harvard staff, have developed a detailed train the trainer planning document that includes instructional design, content outline, evaluation, and logistical plans. The Center will be providing train the trainer sessions covering a variety of

preparedness-related topics on an approximately monthly basis during 2004. The trainers will subsequently provide training for about 1000 individuals during the year.

#### Maine–Harvard Prevention Research Center (M-HPRCP) Conferences

- A CME workshop entitled “Practical Approaches for Childhood Obesity Interventions” was held on September 13<sup>th</sup> with 45 participants. Dr. Bill Dietz from the federal Centers for Disease Control and Prevention was the keynote speaker. The workshop served to launch a Maine Youth Overweight collaborative initiative.
- The third annual M-HPRC obesity workshop was held on December 3<sup>rd</sup> entitled “Learning to Move and Moving to Learn” dealing with physical education/physical activity in schools. Russell Pate, Ph.D. from the University of South Carolina was the keynote speaker. Bill Potts-Datema, from the Harvard Prevention Research center, spoke about New England recommendations for physical education/activity in schools. 120 individuals from around the state participated.

**Goal 3. The Maine Center for Public Health will contribute to available knowledge about public health practice in Maine through applied research and dissemination.**

#### Maine – Harvard Prevention Research Center (M-HPRC) Research Initiatives

- A primary focus of the M-HPRC is dissemination of research that occurs through workshops (described above) as well as through the electronic “Info Monthly.” Every month, two research articles with abstracts, as well as other practical information and links designed to serve statewide and local prevention efforts, are distributed via an electronic list that now includes more than 260 individuals.
- The M-HPRC has begun the development of several research initiatives and will seek funding for each in the next year. These include:
  - *Headstart*: Because disparities were identified as important foci for the MHPRC by our community partners and steering committee, we are currently in the process of assessing current data and practices in Head Start, WIC, and other pertinent early childhood settings, in order to conduct research to identify intervention opportunities for Head Start centers and families.
  - *Clinical Interventions*: M-HPRC has engaged a clinical workgroup over the past year, which will begin formative research on the development and testing of brief clinical interventions, for youth and their families, that would be practical and adaptable for family practitioners and pediatricians around reduction of television viewing and improvement of physical activity and nutrition. Funding for this initiative will come from core Harvard PRC funding years 2004-2009.
  - *Maine Youth Overweight Collaborative*: Launched with our September workshop for clinicians, our Maine Youth Overweight Collaborative is seeking implementation funds. We submitted a letter of intent to the Maine Health Access Foundation and were invited to submit a full proposal due at the end of January 2004.

- *Trails and Facilities Research:* MHPRC has been involved in discussions to plan research to study the impact of trails and other facilities for physical activity on local communities and individuals living in them. Phil Troped, Ph.D. at the Harvard School of Public Health, is taking the lead on this effort and we are planning to partner with him in applying for funds through Robert Wood Johnson's Active Living Research program round 3 early in 2004.

**Goal 4. The Maine Center for Public Health will provide technical assistance to increase the effectiveness of public health interventions in Maine.**

Maine-Harvard Prevention Research Center Technical Assistance

- Information was collected at the Sedgwick and Brooksville elementary schools in Blue Hill through interviews with health education and physical education teachers in order to ascertain the extent of CATCH curriculum implementation and fidelity among third, fourth, and fifth graders. A summary of results was presented to teachers and stakeholders, including BOH staff on October 7<sup>th</sup>.
- M-HPRC has been working closely with the Bangor-based Move and Improve program to evaluate that large program that has been stimulating physical activity through many organizations in Maine. All evaluation data collection is complete and the analyses and report writing is in progress. Some of the evaluation data will be presented at the annual national Chronic Disease Prevention Conference in February 2004.
- The Center has been contracted to provide evaluation technical assistance to the new BOH physical activity and nutrition program, funded recently through a cooperative agreement with the CDC. A draft logic model has been created and an evaluation plan for implementation of the program will be developed.
- M-HPRC facilitated the creation of a framework and Logic Model for evaluation of Maine's Coordinated School Health program.
- M-HPRC staff met with BOH staff to assist in the addition of several important questions to the Maine Behavior Risk Factor Surveillance System (BRFSS) having to do with unified outcomes for BOH chronic disease programs. A presentation on this process will be given at the annual ASTDPHE conference in Arizona in February.
- The M-HPRC has continued to assist the MBOH in its efforts to develop a statewide BMI surveillance system for youth. The Center and Harvard School of Public Health staff have also been working to refine a framework for physical activity and nutrition surveillance.

Comprehensive Cancer Control Evaluation

- The Maine Bureau of Health contracted with MCPH to develop a comprehensive evaluation plan and to assist in the implementation of activities designed to evaluate the Maine Cancer Plan and the Maine Cancer Consortium.
- A series of logic models were developed to serve as the evaluation framework, and a 31-page comprehensive evaluation plan was developed and disseminated to stakeholders throughout Maine.

- The plan was presented at two national conferences and disseminated, upon request, to interested states and national organizations. The implementation phase of the evaluation plan is currently underway.

#### Environmental Public Health Tracking (EPHT) Evaluation

- The Maine Bureau of Health contracted with the MCPH to provide technical assistance and to develop an evaluation plan for Maine's EPHT Program.
- A logic model was developed to serve as the evaluation framework for the program and an accompanying evaluation plan was written. The evaluation plan was shared with program staff and CDC representatives.
- In addition to the evaluation plan, MCPH conducted an assessment to assess knowledge and interest level, as well as priority rankings, for key environmental public health indicators. This assessment was conducted with a diverse planning consortium.

#### Evaluation Capacity Building

- The Maine Bureau of Health contracted with MCPH to provide technical assistance and evaluation capacity building. Specific activities included:
  - *Asthma Prevention and Control:* The Center worked with the Muskie School of Public Service to develop a three year evaluation report summarizing the activities conducted and the accomplishments achieved as part of a CDC planning grant.
  - *Oral Health Program:* Based on the needs of the program, a logic model was drafted.
  - *Community Health Program:* A review of existing community health indicators was conducted.

**Goal 5. The Maine Center for Public Health will continue to develop as an increasingly efficient and effective, as well as collaborative and sustainable, organization.**

#### Staff Additions/Changes

- In 2003, the Center added three new positions who provide additional expertise to the staff. These include:

Becky Whittemore is the new Public Health Emergency Preparedness Education and Training Project Director. She brings an exceptional background to this position. She served for twenty years in the United States Army. Fifteen of those years focused upon preventive medicine, the military's public health system. She earned her Bachelor's Degree in Nursing (BSN) at Montana State University, her Master's Degree in Public Health (MPH) from Tulane University, and a Master's in Nursing (MSN) qualifying her as a Family Nurse Practitioner from the University of Washington. Her work at the Center focuses on the training and coordination of training related public health emergency preparedness.

Ann C. Conway, Ph.D. began working with the Center on the development of the well-received report on opiate overdose and is now the Education and Training Coordinator and Director of the Robert Wood Johnson Foundation-funded Maine Turning Point Project, which is now in its fifth year. A sociologist by training, she previously served as Director of Domestic Health Programs at Medical Care Development, Inc. in Augusta and prior to that as coordinator of the graduate Family Studies Program at Wheelock College in Boston. Ann also chairs a task force of Maine public health leaders who are involved in both the merger of the state health and mental health departments and in the development of Maine's new universal health care plan, Dirigo Health.

Dani Kalian was hired to coordinate all administrative aspects of meetings and trainings. Dani comes from the Maine Principals' Association where she had similar responsibilities. Given the additional trainings and workshops held by the Center in 2003, this position was crucial to enhance our capacity to efficiently provide training opportunities in Maine.

#### Fund-Raising

- The MCPH initiated a number of fund-raising efforts, under the leadership of the Finance Committee. Every Board member contributed to an annual drive for donations. A first-ever and successful "Friend-Raiser" was held at the home of State Health Officer and MCPH Board member Dr. Dora Mills. A proposal was submitted to the Betterment Foundation for assistance. The Foundation announced at the close of 2003 that the MCPH had been awarded \$25,000 a year for the next two years to develop a plan to assure the Center's long-term sustainability, and to implement that plan. A search has begun for a consultant to work with the Finance Committee, Paul Campbell, and Kim Dube to begin this effort.

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