Healthy Anne Arundel Coalition

Steering Committee Meeting
Pip Moyer Recreation Center
August 22, 2012
3:00 p.m. – 4:30 p.m.

VISION
Healthy County,
Healthy People!
**Healthy Anne Arundel Coalition**

**MISSION**

Working together as a community to promote the health and wellness of Anne Arundel County residents

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**Obesity Prevention**

**Baseline and Goal for 2015**

<table>
<thead>
<tr>
<th>MD SHIP OBJECTIVE</th>
<th>MD BASELINE</th>
<th>COUNTY BASELINE</th>
<th>COUNTY BY RACE/ETHNICITY</th>
<th>MD 2014 GOAL</th>
<th>COUNTY 2015 GOAL</th>
<th>DATA SOURCE</th>
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<tbody>
<tr>
<td>Increase the proportion of adults who are at a healthy weight</td>
<td>34.0%</td>
<td>33.5%</td>
<td>White, Non-Hispanic: 33.9% Black: 30.0%</td>
<td>35.7%</td>
<td>35.2%</td>
<td>BRFSS 2008-2010</td>
</tr>
<tr>
<td>Reduce the proportion of young children and adolescents who are obese</td>
<td>11.9%</td>
<td>10.8%</td>
<td>N/A</td>
<td>11.3%</td>
<td>10.36%</td>
<td>MYTS 2008</td>
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Co-Occurring Disorders
Baseline and Goal for 2015

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<tr>
<td>Reduce the rate of emergency department visits related to behavioral health</td>
<td>1,206.3</td>
<td>1,134.9</td>
<td>White: 1,146.9 Black:</td>
<td>1,46.0</td>
<td>1,078.2</td>
<td>HSCRC 2010</td>
</tr>
<tr>
<td>conditions per 100,000 population</td>
<td></td>
<td></td>
<td>1,450.6 Asian: 152.7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Hispanic: 203.6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduce the rate of drug-induced deaths per 100,000 population</td>
<td>13.4</td>
<td>15.0</td>
<td>N/A</td>
<td>12.4</td>
<td>13.9</td>
<td>VSA 2007-2009</td>
</tr>
<tr>
<td>Decrease the rate of alcohol impaired driving fatalities</td>
<td>0.29</td>
<td>17 (count only due to rate instability)</td>
<td>N/A</td>
<td>0.27</td>
<td>15</td>
<td>SHA 2009</td>
</tr>
<tr>
<td>Reduce the rate of suicides per 100,000 population</td>
<td>9.6</td>
<td>9.6</td>
<td>N/A</td>
<td>9.1</td>
<td>9.1</td>
<td>VSA 2007-2009</td>
</tr>
</tbody>
</table>

AGENDA

- Welcome and Introductions
- Review of July Meeting Minutes and Updates
- Healthy Anne Arundel Fund: Grant Processes
- Million Hearts Initiative: Healthiest Schools, Healthiest Worksites, Healthiest Communities
- Announcements
- Next Steps and Concluding Remarks
Steering Committee Observers

- Meetings are open to the public.
- Subcommittee Chairpersons and Coalition Staff can participate in discussions.
- Observers can participate in discussions upon request by a Steering Committee member or through acknowledgement by the Chair.
- Observers cannot participate in the decision making process of the Steering Committee.
- Observers may provide additional input after the meeting through conversation with Coalition Staff.

Healthy Anne Arundel Fund

Grant Processes
3 Main Functions of a Community Foundation

1. Vehicle for Philanthropy: CFAAC serves as a vehicle for the philanthropy of individuals, corporations and organizations that care about our community. We work with donors, of all giving levels, to create charitable funds that meet the goals of the donors and the needs of our community today and in the future.

2. Grantmaker: CFAAC focuses its resources on the most pressing needs in the county and in areas we feel we can have the greatest impact.

3. Community Leader: We work with a variety of donors, nonprofit organizations, and government agencies to identify and address community challenges and issues, and bring together key stakeholders to develop desired outcomes and realistic action plans.
Healthy Anne Arundel & CFAAC

Eat Healthier/Move More

- Pilot Grant Program to distribute $25,000 in grant funds to community-based organizations.
- Funded Programs will be designed to impact eating habits and/or physical activity levels in communities where obesity is documented as a health issue.
- Short-term: Funded Programs must be up and running no later than 10/1/12 and completed by 10/31/12 with results reported to Healthy Anne Arundel Coalition and the Maryland Community Health Resources Commission by mid-November.
- Long-term: Results of this Pilot Grant Program will inform future community-based efforts to fight obesity in Anne Arundel County.

Criteria for Invited Organizations

- IRS designated not-for-profit organization or a faith-based organization that will use the funds only for non-sectarian activities;
- In good financial standing;
- Evidence of serving vulnerable populations in zip codes where the health disparities for obesity are the highest (Brooklyn, Annapolis, Glen Burnie, Pasadena);
Criteria for Invited Organizations

- History of successfully managing, monitoring and reporting on small grant projects;
- Able to market their project through a variety of mechanisms to reach a wide audience;
- Able to implement a small grant project within 2 weeks of receiving notice of grant funding.

Grant Application

- Cover sheet with identifying information, brief program description and simple budget;
- No more than a 2 page narrative:
  - Organization’s mission, grant management experience, capacity and interest in addressing obesity;
  - Demographics of population to be served;
  - Plans to market program.
Million Hearts Initiative

Healthiest Schools, Healthiest Worksites, Healthiest Communities

August 22, 2012

Million Hearts™ Initiative

- National initiative
- Launched by the Department of Health and Human Services in September 2011
- To prevent 1 million heart attacks and strokes over five years.
Million Hearts™ Initiative

- Million Hearts™ aims to prevent heart disease and stroke by:
  - Improving access to effective care.
  - Improving the quality of care for the ABCS.
  - Focusing clinical attention on the prevention of heart attack and stroke.
  - Activating the public to lead a heart-healthy lifestyle.
  - Improving the prescription and adherence to appropriate medications for the ABCS.

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Million Hearts™ Initiative

- Remember Your ABCS
  - A — Appropriate Aspirin Therapy
  - B — Blood Pressure Control
  - C — Cholesterol Management
  - S — Smoking Cessation

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Healthy Anne Arundel Coalition
Maryland’s Million™ Hearts

- February 2012
- Supports the National Initiative
- 5 Core Components
  - Improving clinical care
  - Strengthening tobacco control
  - Promoting a healthy diet
  - Encouraging workplace wellness
  - Incentivizing local public health action

PHHS Block Grant

- PHHS Block Grant – Maryland Million Hearts
  - $175,000
  - Healthiest Schools – strengthen and enhance the AACPS FitnessGram Program.
  - Healthiest Workplaces – provide a review and evaluation of the School Wellness Policy.
  - Healthiest Communities – enhance the health of communities through the families of public school children.
PHHS Block Grant

- Supports two positions
  - Epidemiologist – to develop a “Healthiest Schools” initiative
  - Health Planner – to develop “Healthiest Worksites” and “Healthiest Communities” programs


Disparity in the County

10 Leading ZIP Codes Medicaid Enrollment Rate*
2007-2011

* Rate per 1,000 population
- <84.00
- 84.00-129.9
- 130.00-408.38
Disparity in the County

10 Leading ZIP Codes
2010 Hospital ED Visit Rate*
Ages 5-18 Years

* Rate per 1,000 population
- <218.00 or not calculated
- 218.00-264.99
- 265.00-1,413.63

Rate based on 2010 Census for Ages 5-18 Years

August 22, 2012

Healthy Anne Arundel Coalition

AACPS FitnessGram

Mary Buddemeier
Anne Arundel County Public Schools
Physical Education Resource Teacher

August 22, 2012

Healthy Anne Arundel Coalition
FITNESSGRAM
ANNE ARUNDEL COUNTY PUBLIC SCHOOLS

MARY BUDDEMEIER
PHYSICAL EDUCATION RESOURCE TEACHER
FITNESSGRAM ADMINISTRATOR

FITNESSGRAM/ACTIVITYGRAM

A comprehensive, educational and promotional tool for fitness and activity assessment for children.
Philosophy

Health is available to Everyone for a Lifetime and it is Personal.

HEALTH comes from regular physical activity and the development of health related fitness.

Physical activity and fitness are for EVERYONE regardless of age, gender, or ability.

Physical activity and physical fitness are for the LIFETIME.

Physical activity programs should be designed to meet PERSONAL needs and interests.
Regular physical activity will improve a child’s level of health- and skill-related fitness.

Health-Related Physical Fitness

- Aerobic Capacity
- Body composition
- Muscular strength
- Muscular endurance
- Flexibility
Skill-Related Physical Fitness

- Agility
- Speed
- Coordination
- Balance
- Power
- Reaction time

FITNESSGRAM Approach

FITNESSGRAM assessments focus on health-related fitness

- Aerobic Capacity
- Body Composition
- Muscular Strength, Muscular Endurance, and Flexibility
Philosophy

**HEALTH** comes from regular physical activity and the development of health related fitness.

Physical activity and fitness are for **EVERYONE** regardless of age, gender, or ability.

Physical activity and physical fitness are for the **LIFETIME**.

Physical activity programs should be designed to meet **PERSONAL** needs and interests.

Fitness is for Everyone

Not all children can become elite athletes but **ALL** children can enjoy the benefits of a physically active lifestyle.
Influences on Physical Fitness

- Maturation
- Physical activity
- Physical fitness
- Heredity
- Environment

*If you do the process, the product will follow!*

- *Physical activity is the process*
- *Physical fitness is the product*
Philosophy

**H**  HEALTH comes from regular physical activity and the development of health related fitness.

**E**  Physical activity and fitness are for **EVERYONE** regardless of age, gender, or ability.

**L**  Physical activity and physical fitness are for the **LIFETIME**.

**P**  Physical activity programs should be designed to meet **PERSONAL** needs and interests.

Fitness & Activity is for a Lifetime

- The long-term goal is for children to become active and fit adults.
- Fostering positive attitudes to activity is more important than short term improvements in fitness.
Physical Activity and Health

Physical activity will improve health in both children and adults!

Childhood Health

Childhood Physical Activity

Adult Health

Adult Physical Activity

The best way to promote adult health is to promote adult activity!
Philosophy

**H** HEALTH comes from regular physical activity and the development of health related fitness.

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**L** Physical activity and physical fitness are for the LIFETIME.

**P** Physical activity programs should be designed to meet PERSONAL needs and interests.

Fitness is Personal

Fitness results provide personal information. Children do not have to share their results with other children.
FITNESSGRAM Approach

The FITTINGRAM report prints out an individualized report that evaluates a child’s personal level of fitness compared against the established health standard, the Healthy Fitness Zone. Children can take these home to parents.

Needs Improvement

Healthy Fitness Zone
Goal of Youth Fitness and Activity Promotion

To increase the probability that youth will adopt regular physical activity habits and maintain adequate levels of physical fitness to contribute to optimal health and function throughout life.
The FITNESSGRAM Assessment

► Aerobic Capacity

PACER
One Mile Run-Walk
Walk Test (age 13+)

The FITNESSGRAM Assessment

► Body Composition

Percent Body Fat from Skinfold Measurements
Percent Body Fat from Bioelectric Impedance Analysis (BIA) Device
Body Mass Index from Height and Weight
The FITNESSGRAM Assessment

► **Muscle Strength, Endurance & Flexibility**
  - Abdominal – **Curl-up**
  - Trunk Extensor – Trunk Lift
  - Flexibility – Back saver Sit and Reach or Shoulder Stretch
  - Upper Body – 90° Push-up, Modified Pull-up, Flexed Arm Hang

**Abdominal Strength**

► **Curl-up**
Trunk Extensor Strength

- Trunk Lift

Upper Body Strength

- 90° Push-up
Flexibility

Back Saver Sit-and-Reach

AACPS Worksite Wellness

Angela Barber
Anne Arundel County Public Schools
Benefits Specialist
HR/Benefits

August 22, 2012
Healthy Anne Arundel Coalition
STAFF WELLNESS

Anne Arundel County Public Schools

Committees – Wellness Policy Committee

- Reauthorization Act of 2004 mandated local Wellness Policy.
- Policies developed and approved July 2006 for school year 06-07.
- Eight components of Coordinated School Health Program.
- Representation: Board members, union representatives, principals, eight components, PTA, CAC, bilingual office, business community, health community
Eight components of Coordinated School Health

- Goals, activities, steps, outcomes, monitoring.

Goals to date:
- School staff will serve as role models
- Students will achieve and/or maintain a level of health-related fitness
- Students will be involved in wellness activities beyond those offered through regular physical education
- Use of non-food rewards for school accomplishments
- Employee Wellness Interest Survey
- Stress management program for staff
- Promote student mental/emotional wellness
- Develop effective partnerships
- Wellness Schools of Distinction
Committees - Wellness County Consortium

- AACPS, County Government, Department of Health, County Library, AACC, healthcare carriers (account managers and wellness managers)

Committees - School Health Advisory Council

- 1991 mandate: each local superintendent and health officer to establish a local school health council. Support health-related activities of CSHP, conduct assessments, promote adoption of health-enhancing policies, support school health activities, communication
- Student survey re health-risk behaviors and well-being, flu pandemic, obesity, Wellness Ambassadors, web page, grant, A+ Health Newsletter, Healthy Celebrations, Healthy Meetings
Health Fairs

- May is Physical Fitness and Sports Month
- Six fairs starting in 2004
- Co-hosts: Anne Arundel County Government
  Anne Arundel County Department of Recreation and Parks
  Anne Arundel County Public Library
  Anne Arundel Community College
  Anne Arundel Medical Center
  Baltimore Washington Medical Center
- 50 exhibitors
- 5K run

Other initiatives

- Flu Clinics
- Communications to schools e.g. Healthy Nutrition over Holidays, Breast Cancer Awareness, Great American Smokeout
- Local hospitals (discount at AAMC)
- Know Your Numbers January 2010
- Health Risk Assessment 2010 (CareFirst 263, Aetna 39): Overweight, high blood pressure
Other initiatives

- Bulletin board at Central Office
- School survey Wellness Success Stories - May 2011 (e.g. Weight Watchers, Walking Groups, Tastings, Jump Rope for Heart)
- WalkingWorks Program April-June 2011 (10 weeks), over 2,700 registered. Repeated April-June 2012, nearly 1,800 registered
- Open Enrollment Meetings (flu shots, blood pressure screenings)

Other initiatives

- Lunch and Learns
- Stress management posters
- Train the Trainer Stress Management - HELP conference 2011
- Mini health fairs (school based)
Staff Wellness Website

- http://www.aacps.org/wellness/staff.asp
- Monthly wellness theme
- Events calendar
- Employee discounts
- Links
- Resources

Website

[Image of a website page with sections for wellness information and resources.]
Health Plan Resources

- Disease Management with 18 disease states
- Weight Watchers and Jenny Craig
- Nurselines
- Monthly Wellness Newsletters e.g. Vitality
- Discounts on alternative health care e.g. massage
- Magellan Behavioral Health

Future Initiatives

- Employee Assistance Program
- Stress survey
- Biometric Screenings
- Health Risk Assessments
- Wellness Ambassadors
- School-based fitness classes
- Incentive program
  and many more…
Questions?

Thank you!

Angela Barber
HR/Benefits
Anne Arundel County Public Schools
410-222-5206
abarber@aacps.org

Healthy Anne Arundel Coalition
ACTION PLAN

➢ Obesity Prevention Strategies
  A. Convene an obesity stakeholder workgroup comprised of key leaders
     with initiatives in obesity prevention.
  B. Conduct an inventory of existing programs, initiatives and assets in the
     County and determine what interventions are supported by documented
     evidence-based practices.
  C. Explore Anne Arundel County data to further identify populations
     and areas of greatest need related to obesity prevention and identify
     evidence-based population level overweight and obesity prevention
     interventions.
  D. Implement feasible initiatives, utilizing an “Eat Healthier” and “Move
     More” framework, incorporating evidence-based practices into
     existing programs, expanding existing programs to increase
     impact, and applying for grants for further expansion and
     sustainability.

August 22, 2012
Healthy Anne Arundel Coalition
## Obesity Prevention

### BASELINE AND GOALS

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<th>County Baseline</th>
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### Questions?

#### Resources

- **National Million Hearts Campaign**
  - [http://millionhearts.hhs.gov/index.html](http://millionhearts.hhs.gov/index.html)

- **Maryland Million Hearts Campaign**
  - [http://dhmh.maryland.gov/SitePages/Maryland's-Million-Hearts-Commitment.aspx](http://dhmh.maryland.gov/SitePages/Maryland's-Million-Hearts-Commitment.aspx)
Announcements

An opportunity to share information from Steering Committee Members that would be helpful to the Coalition’s efforts

Next Steps

➢ Next Steering Committee Meeting:
   Wednesday, September 26, 2012
   3:00 p.m. – 4:30 p.m.
   Rosalie E. Mitchell Community Center
   (formerly the Eastport Community Center)
   1014 President Street, Annapolis, MD 21403

➢ Acknowledgements

➢ Closing Remarks
Healthy Anne Arundel Coalition
Contact Information

www.HealthyAnneArundel.org
HealthyAnneArundel@aacounty.org
Laurie Fetterman, MSW
Phone: 410-222-7203
Email: hdfett00@aacounty.org

August 22, 2012
Healthy Anne Arundel Coalition

County Executive John R. Leopold
Department of Health
J. Howard Beard Health Services Building
3 Harry S. Truman Parkway
Annapolis, Maryland 21401
Phone: 410-222-7375  Fax: 410-222-4433
Maryland Relay (TTY): 1-800-735-2258
www.aahealth.org

Anne Arundel County Department of Health
Representatives:
Angela M. Wakhweya, M.D., MSc.Econ., Health Officer
Dr. Jinlene Chan, M.D., M.P.H., Deputy Health Officer, Healthy Families Administration
Kelly Russo, M.D., M.P.H., Deputy Health Officer, Healthy Communities Administration
Ronna Gotthainer, Deputy Health Officer, Operations
Antigone Vickery, M.P.H., Director, Office of Assessment, Planning, and Response
Laurie Fetterman, M.S.W., Health Planner, Office of Assessment, Planning and Response

Steering Committee Member Organizations:
A.A. Co. Office of the County Executive
A.A. Co. Dept. of Aging and Disabilities
A.A. Co. Dept. of Detention Facilities
A.A. Co. Dept. of Health
A.A. Co. Dept. of Recreation & Parks
A.A. Co. Dept. of Social Services
A.A. Co. Public Schools
A.A. Co. Mental Health Agency, Inc.
Anne Arundel Community College
Anne Arundel Economic Development Corporation
Anne Arundel Health System
Arundel Community Development Services, Inc.
Baltimore Washington Medical Center
CareFirst BlueCross BlueShield
City of Annapolis Mayor’s Office
Community Foundation of Anne Arundel County
Housing Authority of the City of Annapolis
MedStar Harbor Hospital
Northrop Grumman
People’s Community Health Centers, Inc.
Rite Aid Corporation
School of Public Health, University of Maryland
Walmart