

Anne Arundel County Board of Health Presentation

Dr. Tonii Gedin, RN, DNP Health Officer Anne Arundel County Department of Health

October 10, 2023
Anne Arundel County Council
Annapolis, Maryland



Mission and Vision

Vision

A vibrant Anne Arundel County with healthy people in healthy communities.

Mission

To preserve, promote and protect the health and well-being of all people by advancing health equity in Anne Arundel County.



Key Staff

- Dr. Tonii Gedin: Health Officer
- Shawn Cain: Deputy Health Officer for Operations
- Megan Pringle: Director, Communications
- Sandy O'Neill: Director, Behavioral Health Services
- Jennifer Schneider: Director, Disease Prevention and Management
- Don Curtian: Director, Environmental Health
- Peggy Cruz: Director, Family Health Services
- Karen Siska-Creel: Director, School Health Services
- Grace Tydings: Director, Finance
- Donna Perkins: Director, Office of Assessment and Planning

Partner Agencies

Adrienne Mickler: Executive Director, Mental Health Agency



 Dr. Pam Brown: Executive Director, Anne Arundel County Partnership for Children, Youth and Families



Department of Health Overview

Founded October 1930

Operating Budget: \$82,266,200 FY 24

Employees: 907 budgeted positions | 783 currently filled positions

DOH Offices:

Annapolis Health Center (DOH Headquarters) | Baymeadow Health Services-Glen Burnie | Behavioral Health Building-North | Behavioral Health Building-South | Brooklyn Park Health Center | Glen Burnie Health Center | Health Annex | Lula G. Scott Community Center | Magothy Health Center | North County Health Services Center | Parole Health Center



Strategic Plan 2023 - 2025

Our vision remains the same. Our mission is updated to identify health equity as the way in which we improve health for all.

Our Priorities

- → Reinvigorating the workforce
- → Enhancing Infrastructure
- → Deepening and expanding community partnerships
- → Advancing health and health equity

We remain committed to achieving optimal health for all county residents. Pursuing health equity was emphasized throughout the planning process. Achieving health equity requires acknowledging and addressing the structural and social factors that contribute to health disparities.







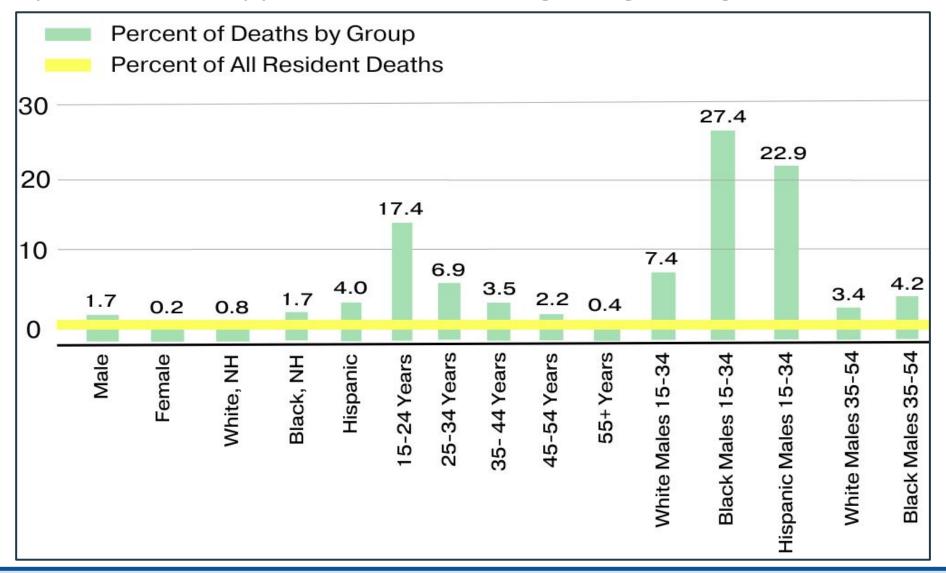




View at www.aahealth.org/strategic-plan

Gun Violence in Anne Arundel County

A leading cause of premature death in the U.S. The Department of Health recognizes a comprehensive public health approach to addressing this growing crisis is necessary.



As of August 2023:

- → Homicides have surpassed all of 2022 and are the highest since tracking began in 2016
- → Suicides have **surpassed** all of 2022

^{*}Data provided by the Anne Arundel County Police and Annapolis Police Department; CDC Wonder Underlying Causes of Death

GUN VIOLENCE INTERVENTION TEAM DATA POLICY DAD THE DESHIP

Vision

Envisions a community where all residents are safe from gun violence.

Mission

To prevent and reduce gun-related injuries and deaths in Anne Arundel County.

Goals of the GVIT

- Address gun violence as a public health issue through community engagement, data and evidence-based practices.
- Multi-agency effort focused on reducing death and harms from gun injuries.
- Utilizes a Policy-Systems-Environment (PSE) public health framework.
- Strategic Plan released on June 28, 2022.



<u>aahealth.org/gvit</u>



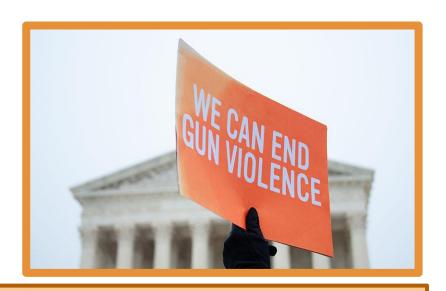




Strategic Plan Goal Statements



- 1. Lead and coordinate gun violence interventions in Anne Arundel County and the City of Annapolis.
- 2. Monitor and advance evidence-based gun laws.
- 3. Prevent gun violence through education and public awareness.
- 4. Collect and report data on gun-related incidents, injuries and deaths.
- 5. Disrupt cycles of community violence through engagement with community members.
- 6. Coordinate a response process to support victims of gun violence.



FY23 Accomplishments

Goal 1

Coordination

- Monthly GVIT meetings (47 members)
- Three active work groups: Data, Education and Policy, and Environment

Goal 2

Gun Laws

- Ongoing legislation monitoring and testimony/letter preparation
- Development of policy briefs highlighting current evidence and laws

Goal 3

Education

- Developed Extreme Risk Protective Order (ERPO) tool kit
- Developed and distributed GVIT bookmark with website QR code and link

Goal 4

Data

- Ongoing data dashboard
- ERPO data tracking through court system and police partners

Goal 5

Community Violence Disruption

- Cure Violence assessment (Aug 2022) and implementation preparation in FY24
- Implemented Gun Lock Distribution Program with AAC Public Library
- Hosted quarterly community meetings and launched community survey

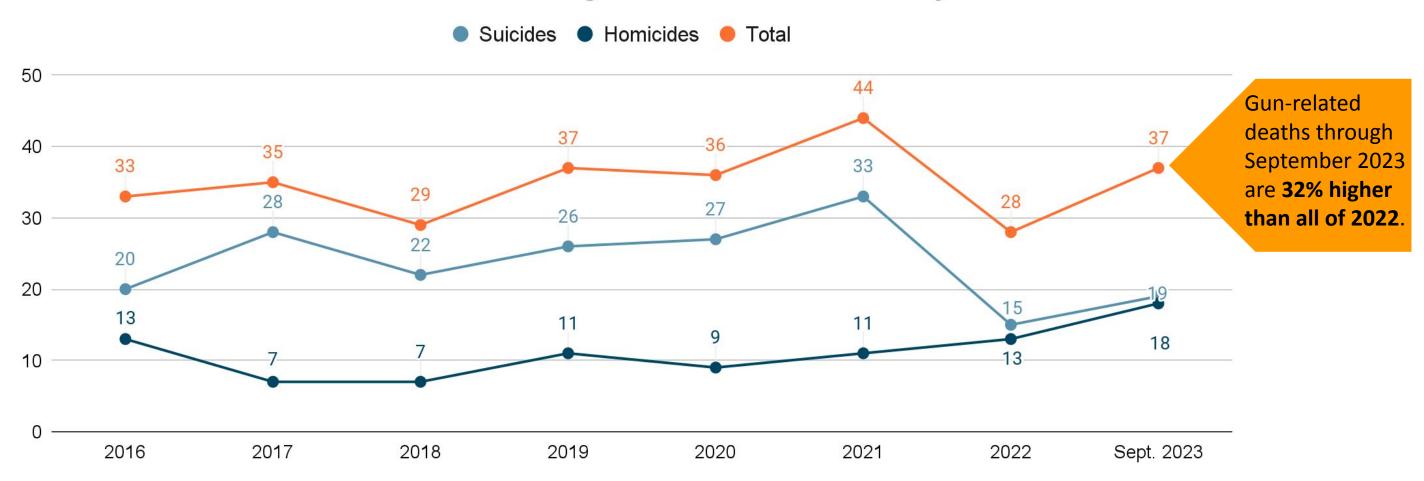
Goal 6

Victim Support

 Planned for 9 Adverse Community Experiences and Resilience trainings for community members and organizations (Summer 2023)

Data Dashboard (2016-September 2023)

Gun Deaths Occurring Within Anne Arundel County

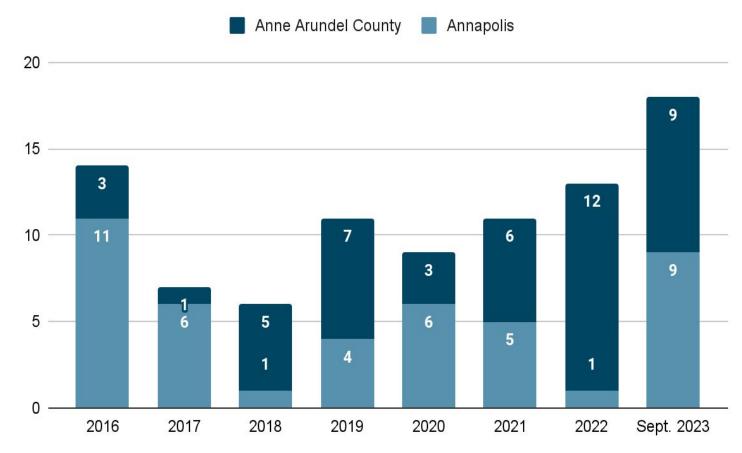


^{*}Data provided by the Anne Arundel County Police and Annapolis Police Department as of 10/4/23

Gun Violence Intervention Team Data (2016-2023)

Annapolis City Gun Violence (2016-September 2023)

City and County Gun Homicide Totals (2016-September 2023)



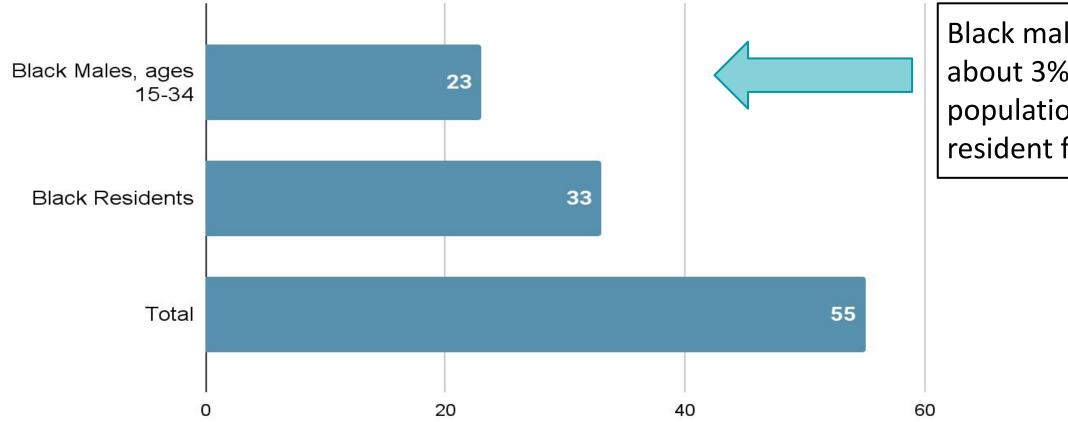
- Homicides in Annapolis City in 2023 have reached their highest number since 2016.
- In 2022, 42% of homicides within the county occurred in Glen Burnie.
- The majority of homicide victims are black and male.
- Nearly half (48%) of homicide victims in Annapolis City between 2016 and August 2023 were between 14-24 years of age.



Demographics

- Gun violence affects all people but it disproportionately affects young black males and older white males.
- When we compare gun-related deaths by suicide and homicide a stark difference jumps out.
- Nearly 80% all of the suicides by firearm are in white males (median age 55) and 58% of the homicides by firearm occur in black males (median age 29). (VSA 2013-2019)

Anne Arundel Resident Firearm Homicides, 2018-2020



Black males ages 15-34 are about 3% of the county population, but are **42%** of resident firearm homicides.

Source: CDC Wonder Underlying Cause of Death, 2021 U.S. Census American Community Survey, Table B01001B

Gun Safety Lock Distribution

On April 13, the Department of Health in partnership with AAC Public Libraries began distributing free gun locks to residents in an effort to reduce suicides, deaths and injuries.



Distribution surpassed 3,000 gun locks in September 2023

Since the start of the program distribution has expanded through the Department of Health and community partners.

The program offers two locks to residents 18 and older.

The gun locks were obtained through a grant from the Governor's Office of Crime Control and Prevention.







Gun Safety Lock Distribution

What we're hearing from residents:

"My grandchildren
are coming to visit
next week. This was
perfect timing".

"Need them for my dad."

(teenager who came back with parent to get locks).

Needed for father's guns, he's developing dementia and has of suicide.

"Interested in getting locks for (my) grandson because he's gotten ahold of one and snuck off with it to school and getting into a lot of trouble."

To show participants in a gun safety class how the locks work.

Gun Lock Distribution Timeline, April - Sept 2023

After a successful pilot period, gun lock distribution has continuously ramped up over the first six months of the project to include community partners and outreach opportunities.

April 2023



April 13:

3 locations: Busch Annapolis, Easport and Glen Burnie

June 2023



June 1: 3 locations added: Deale, Severn, Odenton and at events

July 2023



July: Man Up Anne Arundel distribution begins

August 2023



August 28:
All 15 locations
distributing gun
locks

Sept 2023



Sept: DOH distribution at home visits



June: DOH distribution at events begins



July: DOH distribution at school vaccination clinics



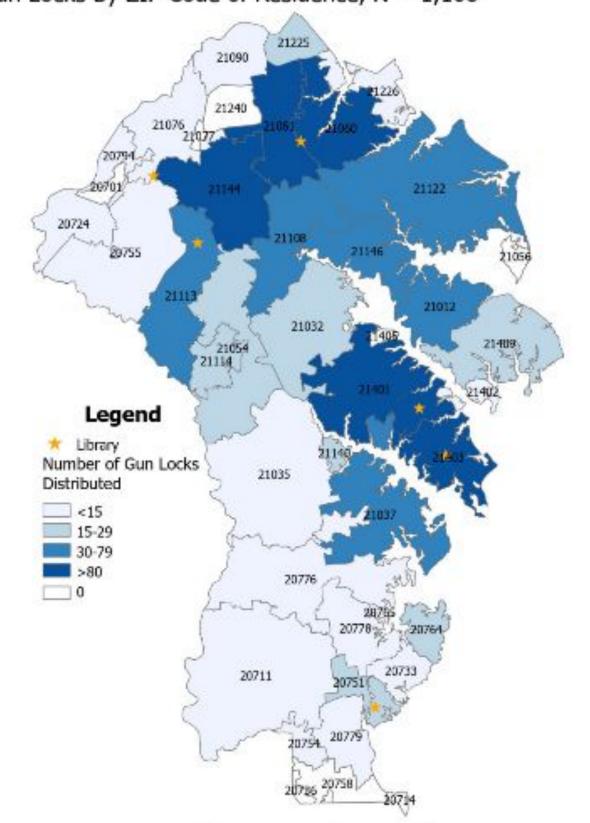
Sept: City of Annapolis No HARM distribution begins

Gun Violence Intervention Team Gun Lock Distribution as of August 2023

- Most (92%) gun locks were provided to county residents
- 91% of those identifying as white obtained gun locks from a library location
- Approximately 40% of those identifying as black and Hispanic obtained gun locks through outreach events and partners
- Those obtaining locks heard about the project through a variety of ways; the media attention and signage at the libraries helped to increase awareness
- Next steps include strategically increasing partners and outreach based on program data

Received FY24 grant from the Governor's Office of Crime Control and Prevention (GOCCP) to purchase more gun locks.

Number of Anne Arundel County Residents Who Obtained Gun Locks By ZIP Code of Residence, N = 1,108



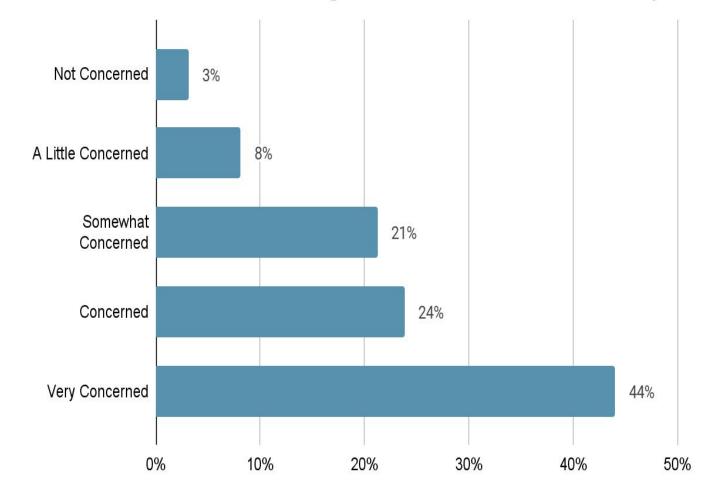


Community Survey

526 Surveys were collected from June-July 2023 to discover community

perceptions about gun violence

Level of concern about the overall gun violence in Anne Arundel County



Two-thirds were concerned or very concerned about the level of gun violence in the county.

- Respondents most commonly reported that when they think of gun violence, they think of "crime" (68.5%) and "mass shootings" (59.5%).
- Self-directed and unintentional gun violence (including suicide, injury, and unintentional shootings) were less frequently associated with gun violence.
- Top three perceived causes of gun violence were access to guns (47.7%), mental health needs (47.0%) and loss of respect for others (45.2%).

Despite this perception, those with mental health needs are more likely to be victims of gun violence than perpetrators, showing an opportunity for community education

Community Trauma Trainings

Adverse Community Experiences and Resilience

Eight trainings were hosted throughout the county through a grant from the Governor's Office of Crime Control and Prevention. Trainings held in July and August.

- Quiet Waters Park (one specific for GVIT members)
- Severn Center (one specific for youth)
- Heritage Crest Glen Burnie
- Eastport Community Center
- Virtual meeting
- Brooklyn Park Library

Attendee Feedback:

"The concept of post traumatic growth needs to be the norm with responding agencies. This was great!"

"Enjoyed the interaction and allowing the listener to participate."

"This is one of the best trainings I have ever attended!!!"



Community Engagement

The Panelists



Dr. Craig Coates Senior Pastor, Fresh Start Church



Jen Pauliukonis
Director of Policy and
Programming, JHU,
Center for Gun Violence



Ryan Voegtlin
Director of Student
Services, Anne Arundel
County Public Schools



Dr. Kyle Fischer ER Doctor, Clinical Assistant Professor, Director of Health Policy and Leadership, University of Maryland



Gabrielle Breven
Grants Management Supervisor,
Interim Section Chief, Violence
Reduction Unit, Office of Attorney
General for the District of Columbia

Gun Violence as a Public Health Issue

Community Meeting Panel - March 2023

"From a public health lens, gun violence gives us a holistic and comprehensive view."

"A public health approach means looking at the evidence, root causes, risk factors, and why it differs from one area to another and then developing solutions based on the findings."

~ Jen Pauliukonis, Director of Policy and Programming, JHU, Center for Gun Violence

Participation:

In person: Approximately 30 participants

Zoom: Approximately 25 participants

Stream: 4 Shares and 4 people watching live

Violence Interruption

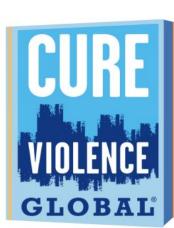
What is Violence Interruption?

It is an urgent response to violence.

Violence interruption involves working with people at risk of committing or being the target of violence to prevent violence. It is an urgent response to violence. Violence interrupters **from** the community work **in the** community to find alternatives to looming violent situations.

The Department of Health, the County Executive's Office and Cure Violence Global are establishing a **Violence Interruption Program** in Annapolis.



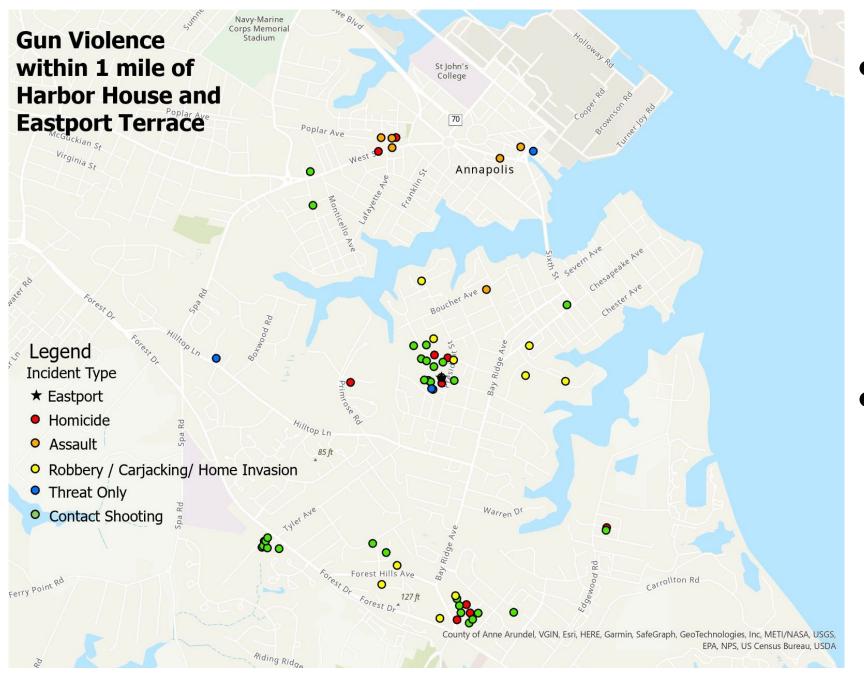




Impact of Violence Interruption Programs:

- → Decrease gun homicides, crime and injuries overtime
- → Empowers communities to denormalize local violence

Eastport Gun Violence, 2018 - August 2023



- From 2018 through August 2023
 - There were 74 homicides or gun injuries (excluding suicides) within a 1 mile radius of Eastport Terrace
 - In a 2-mile radius there were 141 homicides or gun injuries (excluding suicides).
- From January August 2023 there were 5 homicides and 5 contact shootings within a mile radius of Eastport Terrace

Gun Violence Interruption

Information Sharing Phase

The Department of Health held listening sessions in specific in Annapolis communities to identify which area would be the best fit for a Violence Interruption Program.

Neighborhoods were chosen from the August 2022 Cure Violence Global assessment.

These communities were identified as hot spots where Cure Violence Global could be implemented.

Community Listening Sessions

Held in July and August

- Harbor House
- Bay Ridge Gardens
- Eastport
- Newtowne Drive

*Two stakeholder meetings with elected officials in August







Gun Violence Interruption

Information Sharing Phase

Eastport residents expressed:

- → exhaustion from violence
- → concern about children and access to guns
- need for better youth engagement and programming
- need for privacy when engaging with community members
- need for additional resources including employment, mental health, ongoing housing needs and drug prevention



Eastport residents engaged in the planning process and expressed interest in having a Violence Interruption Program in their community.

Violence Interruption Program

Framework

Street Outreach

A team of street outreach workers are present in target neighborhoods, offering:

- Youth mentorship
- Conflict mediation
- Resource navigation

Programs and Skills

Offer targeted community services to support:

- Employment
- Education
- Life Skills

Host local events to change community norms.

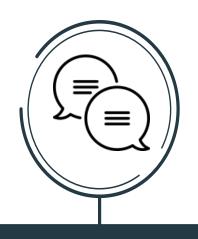
Coordination

Collaborate with system partners to track:

- Goals and performance measures
- Progress updates
- Impact reports

Coordinated efforts interrupt cycles of violence by de-escalating conflict and empowering neighborhoods to take a zero tolerance stance on community violence.

Violence Interruption Program (VIP) Timeline













Planning

Information Sharing

Meet with:
Annapolis City
Anne Arundel
County
GVIT
Legislators
Internal
Stakeholders
Community
Members
CBOs

Funding Bid

Develop process
and
procurement
requirements
Form a review
committee
Hold a
pre-bidders
conference

Selection

Release the NOFA
Outreach and
promotion
Review
applications
Notify applicants
Contract
completion

Hiring

Post positions
Pre-screening of
candidates
Panel interviews
Offer letters

Training and Onboarding

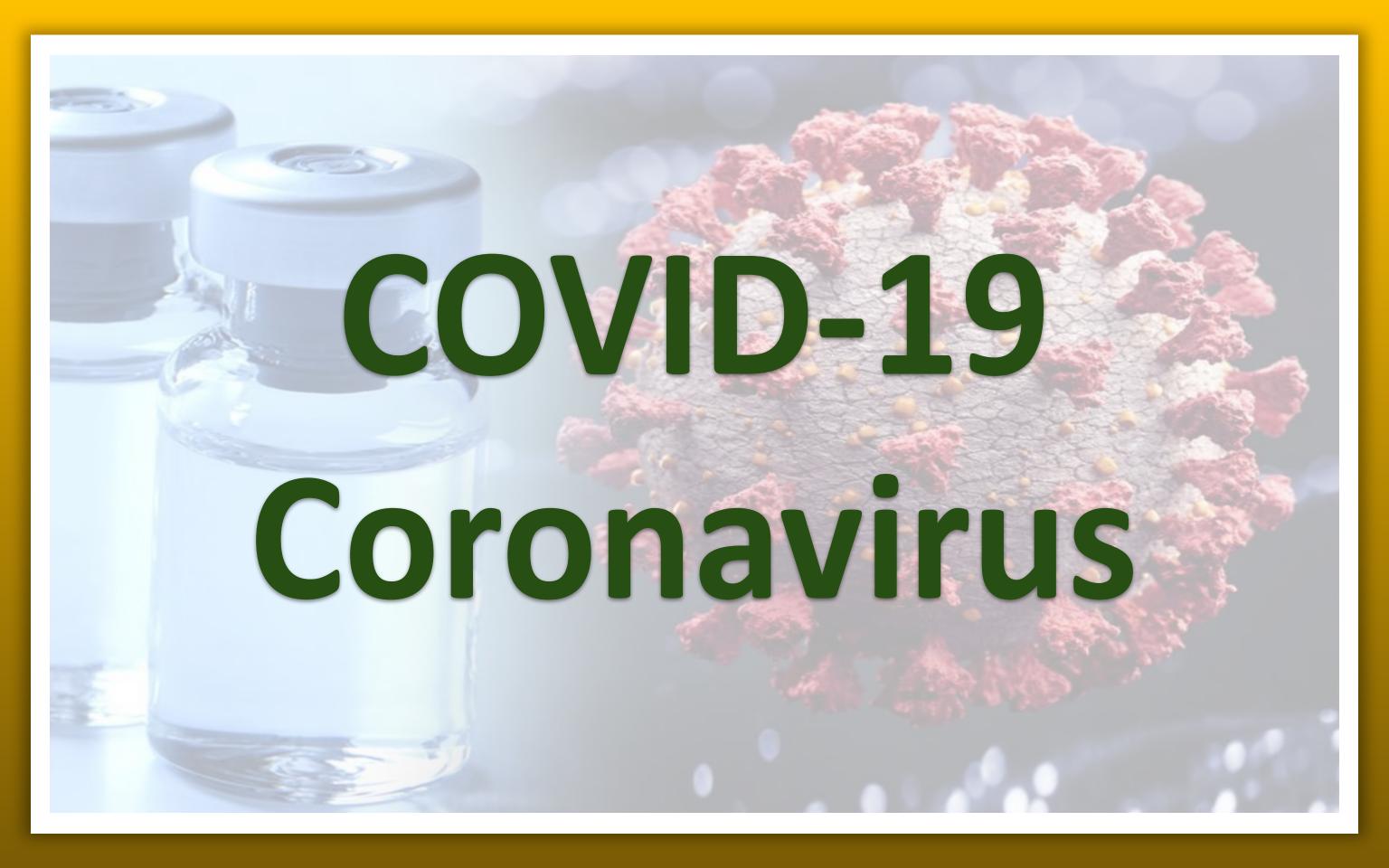
Implementation

Program
Manager
training
Violence
Interrupter and
Outreach
Worker training
Database
training

Reporting

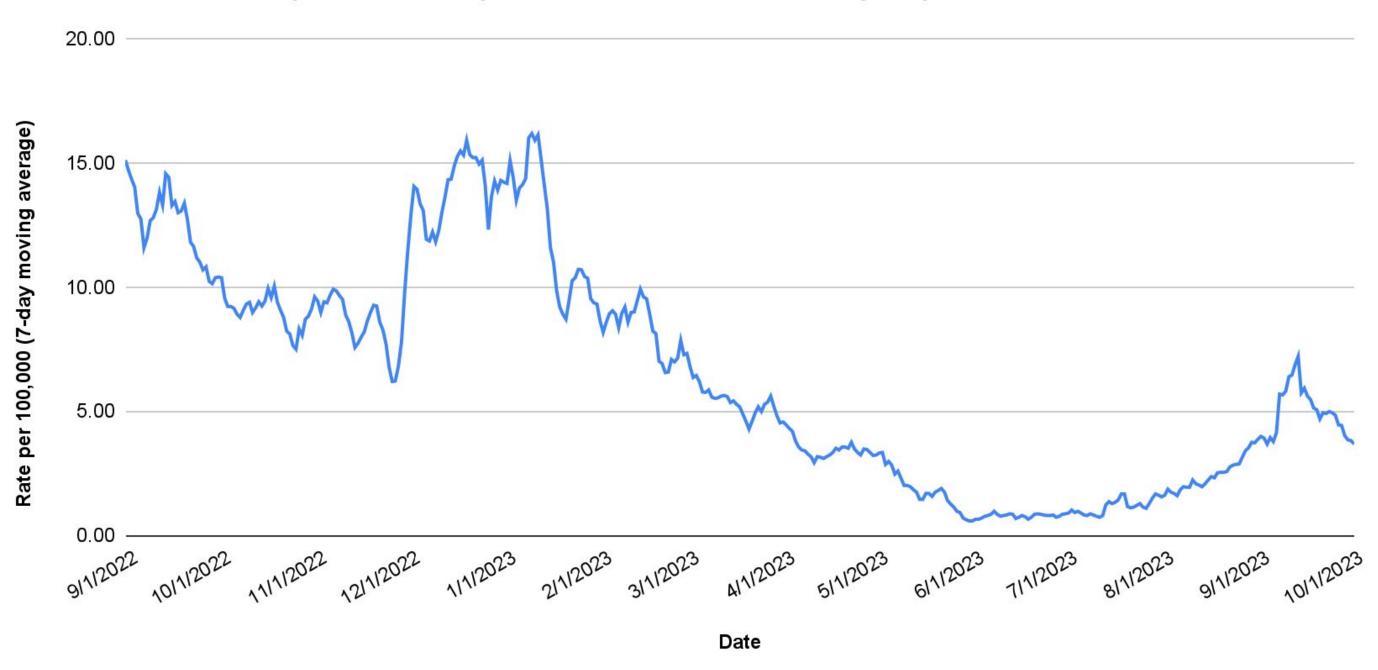
Weekly
performance
reports
Quarterly
impact reports
Community and
partner
presentations

Onboarding Training for the CBO



COVID-19: Cases per 100,000

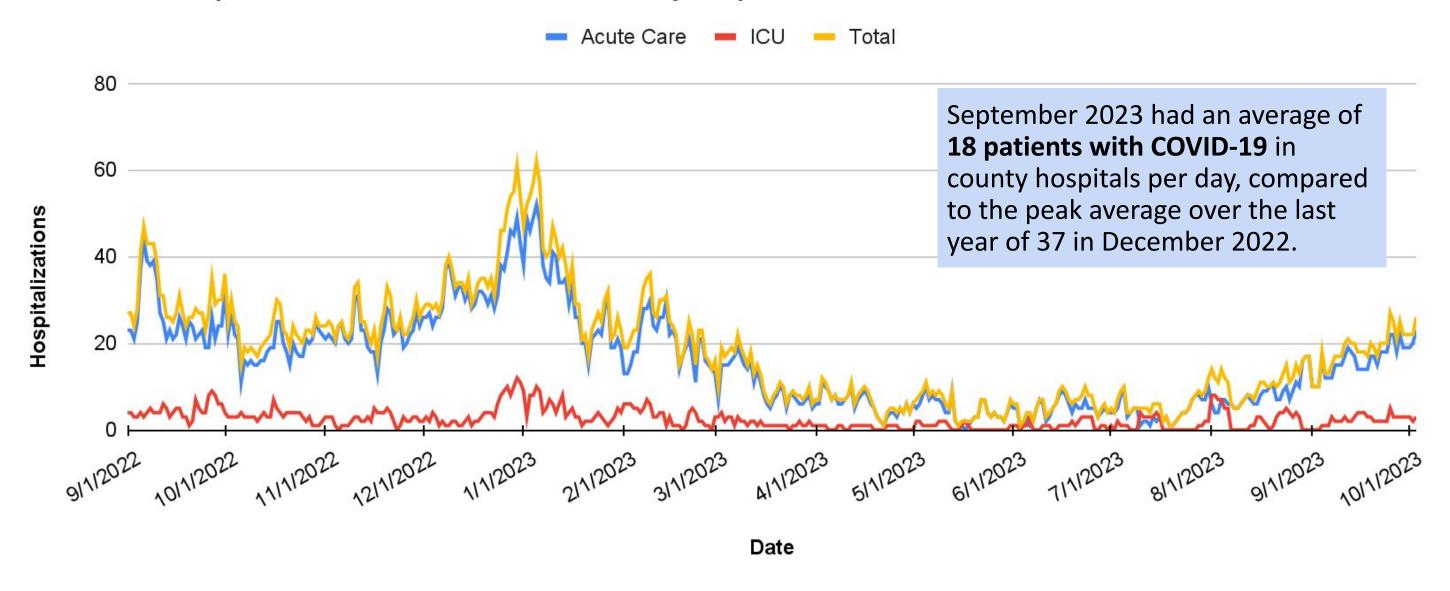
New COVID-19 Cases per 100,000 Population, Anne Arundel County, September 2022 - October 2023



Source: Maryland Department of Health COVID-19 daily dashboard as of 9/6/2023

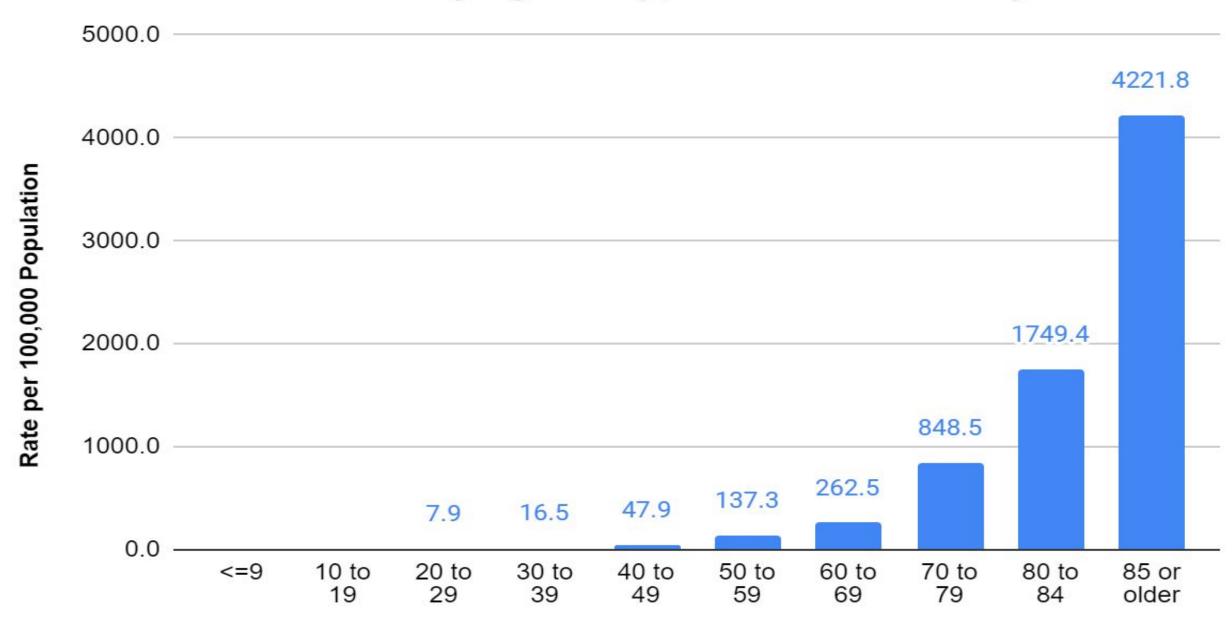
COVID-19 Hospitalizations

COVID-19 Hospitalizations, Anne Arundel County, September 2022 - October 2023



COVID-19 Death Rate by Age Group

Rate of COVID-19 Deaths by Age Group, Anne Arundel County

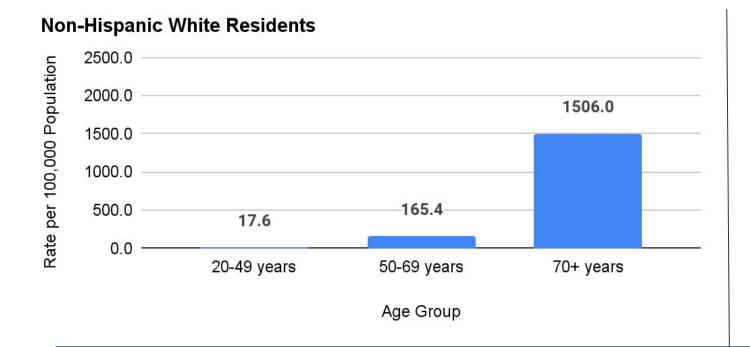


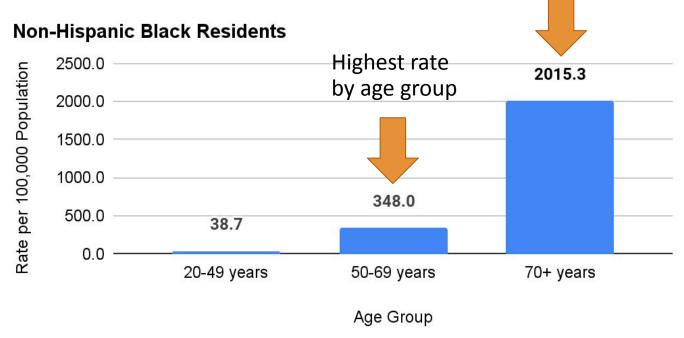
Rates for ages <= 9 and 10 to 19 are suppressed due to low numbers.

Source: Maryland Vital Statistics Administration COVID-19 Deaths Files as of 9/5/2023

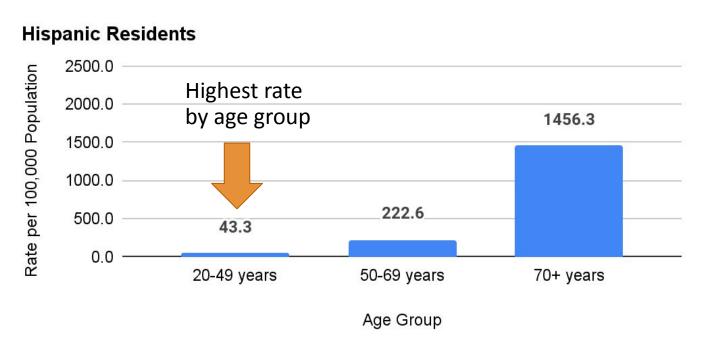
Population data: National Center for Health Statistics, 2020 Population Estimates

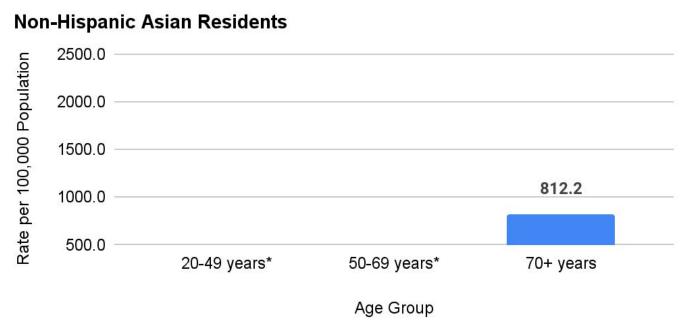
COVID-19 Death Rate by Race and Ethnicity





Highest rate by age group





^{*}Rates for deaths among non-Hispanic Asian residents in the 20-49 and 50-69 age groups are suppressed due to low numbers. Source: Maryland Vital Statistics Administration COVID-19 Deaths Files as of 9/5/2023

COVID-19 Vaccinations

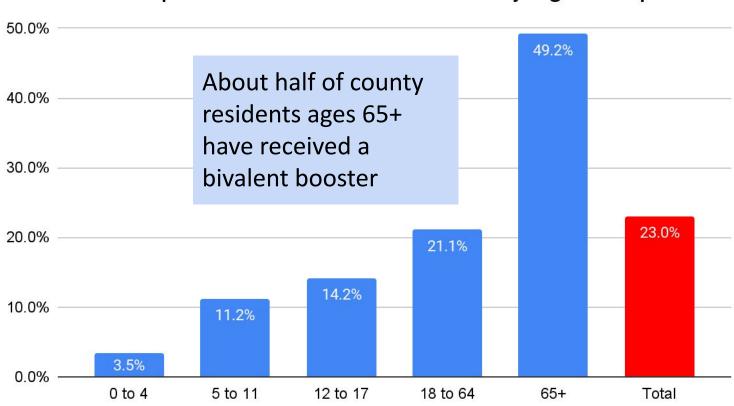
79% of Anne Arundel County residents completed their primary series, and **24%** of residents have received a bivalent booster.

AACo Resident COVID-19 Vaccination Totals

	Doses Administered	% Population (590,336)	Doses Administered by DOH	% Population (590,336)
First Dose	528,758	89.6%	81,808	13.9%
Primary Series Complete	468,603	79.4%	78,194	13.2%
Bivalent Booster	138,979	23.5%	5,249	0.9%

13% of county residents completed their primary vaccination series through the Department of Health

Percent of Population with Bivalent Booster by Age Group*



^{*}Data as of September 5, 2023, Maryland ImmuNet (does not include vaccinations through federal entities)

Updated COVID-19 (2023-2024 Formula) Vaccinations The Changing Landscape

- The CDC recommends that children down to 6 months of age get an updated COVID-19 (2023-2024 Formula) vaccine which will protect against the circulating XBB.1.5 (Omicron variant).
- The end of the public health emergency changed the way vaccines are offered:
 - Cost is covered by insurance companies (Private, Medicare, Medicaid).
 - Where
 - Insurance Pharmacies, Federally Qualified Health Centers, other medical providers
 - No Insurance Pharmacies, Federally Qualified Health Centers, local health departments (limited supply) through the Bridge Access Program

Updated COVID-19 Vaccinations

The Department's role in vaccine distribution is different now that the Public Health Emergency Declaration ended. That means the Department will be getting far less vaccines this year.

Changes Include:

- → Bridge Access Program Will receive a limited supply of the updated COVID-19 vaccine that will be reserved for:
 - 19 years of age and older uninsured or underinsured individuals
 - Immunocompromised or chronically ill individuals
 - Individuals experiencing homelessness
- → Vaccines for Children Program
 - Will receive vaccine for free through the VFC program
 - Will be administered in our health center locations
- → DOH Private Purchase Exploring option to purchase a limited supply of vaccine and bill insurances or to provide at no cost to increase access to vulnerable groups
- → No longer able to hold mass vaccine clinics

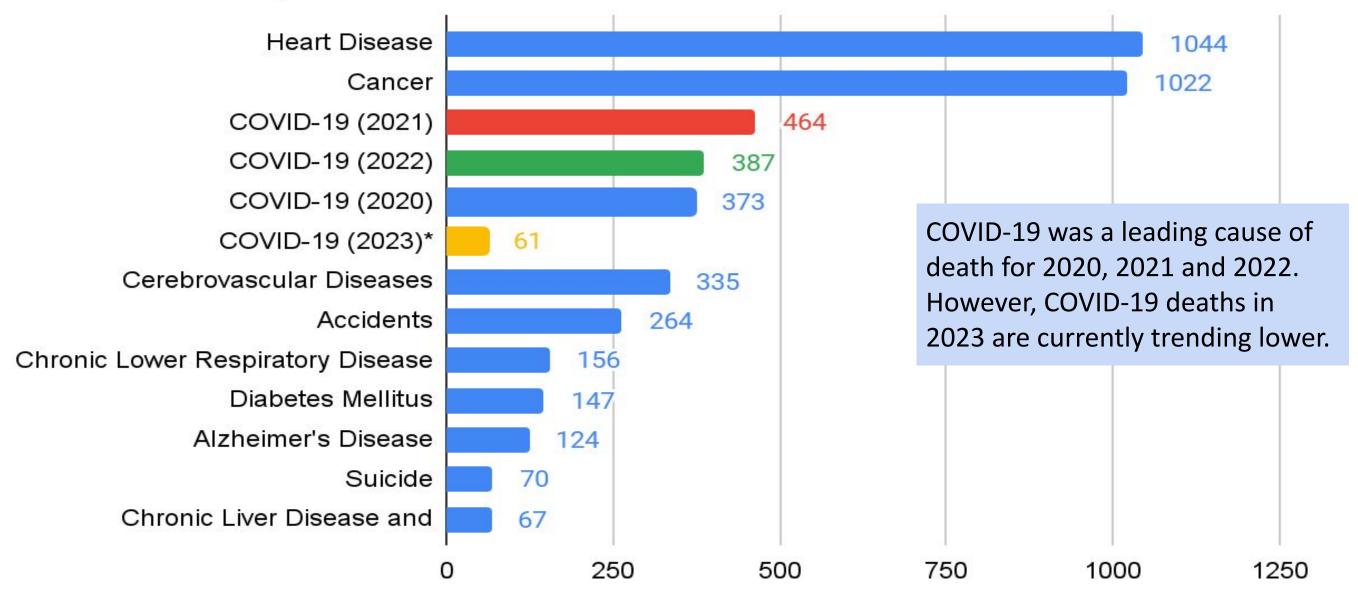






Leading Cause of Death in Anne Arundel County

COVID-19 Deaths Compared Leading Causes of Death (2020), Anne Arundel County



*Year to date as of 9/5/2023

Source: Maryland Vital Statistics Administration Yearly Death Files, 2020; COVID-19 Deaths Files as of 9/5/2023

Managing COVID-19 in Anne Arundel County Public Schools

August 2022 - March 2023

3,519

COVID-19 Positive Cases

2,528

COVID-19 Rapid Tests

26

Classroom Outbreaks





Healthy Anne Arundel Coalition (HAAC)

Goal

- Identify and address community's priority health needs
- Align resources within each member organization to achieve common goals

Mission

Working together to remove barriers and create optimal conditions that improve the health and well-being of all people, focusing on people impacted by health inequities.

Vision

All people have the knowledge, resources and equitable access to care to improve their health and well-being.

Values

- Equity
- Cultural Relevance
- Prevention
- Quality and Length of Life
- Collaboration



Healthy Anne Arundel Coalition (HAAC)

FY23-FY24 Focus Areas:

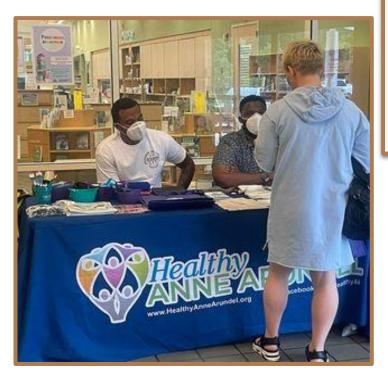
- 1. Mental Health
- 2. Obesity

Countywide collaborative led by the DOH

- Community organizations
- Faith-based institutions
- Economic development
- Federally Qualified Health Centers
- Hospitals
- County government agencies
- Private organizations

HAAC Staff

New Project Manager in December 2022







The Healthy Anne Arundel Coalition is a collaboration among county leaders who recognize that health is an important issue impacting the physical, mental, and

GUIDING COALITION LEADERSHIP

Anne Arundel County Executive Steuart Pittman and the Anne Arundel County Department of Health announced the departure of Health Officer Deputy Secretary for Public Health Services at the Maryland Department of Health. Dr. Kalyanaraman's last day was March 21, 2023. Under his leadership, the Department of Health relaunched the Healthy Anne Arundel Coalition to address community identified health priorities.



appointed as Anne Arundel County's Acting Health role on March 23, 2023. Dr. Gedin joined the Anne Health with a Masters in

unity and Public Health Nursing and a Doctorate in Nursing Practice. Her work over the past 16 years has focused on removing barriers to care, and creating systems that increase health equity and improving outcomes.

The Healthy Anne Arundel Coalition is grateful for the leadership and experience that Dr. Gedin adds to our team!



MENTAL WELLNESS WORKGROUP Purpose: Improving mental wellness for all

Anne Arundel County Office of the County Executiv Co-chair: Ann Hoyt

May is Mental Health Awareness Month. Green is the color that symbolizes mental health awareness. We would like to know how you embrace your mental health. Take a selfie (wear elow or www.https://www.aahealth.org/be-green be-seen/. This will be posted on social media, so





green" along with Anne Arundel Medical Center Baltimore Washington Medical Center, Annapolis

The next Mental Wellness Workgroup meeting is in person on June 14th to plan for our work over the

of our dynamic workgroups, email HealthyAnneArundel@aacounty.org or call

Healthy Anne Arundel Coalition

FY23 Accomplishments

Healthy Anne Arundel Day

April 7, 2023

- 25 events held in the county with a focus of physical activities, nutrition, nature and family involvement
- New HAAC Partners included: Giant Food, Merritt Health Clubs, Severna Park Fitness Club, MY Fitness and AA Recreation and Parks

Mental Health Awareness Month Campaign May 2023

- Promoted 30 public events held throughout the county through campaign website
- Partnered with 10 organizations to raise awareness by lighting facilities green
- Dozens of internal events
- 2,321 Facebook post reach promoting mental health activities in the county







HAAC: Mental Wellness Workgroup FY24 Goals

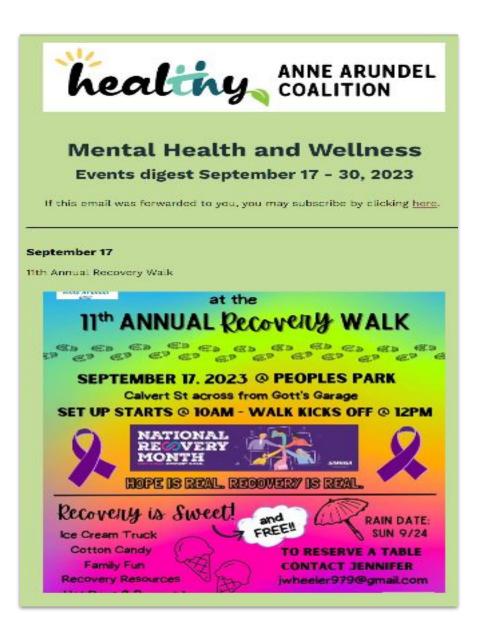
Promote sharing of mental wellness resources

- Bi-weekly email for mental health happenings in the county (complete)
- Network of Care promotion (in progress)
- Crisis Warmline Youth Flyer (in progress)
- May 2024 Mental Health Awareness Month Campaign (starting soon)

Promote mental wellness policies

- Cannabis legislation overview and resources (complete)
- Process to communicate 2024 Maryland General Assembly mental health bills (in progress)
- Promote policy to include mental health resources in employee orientation for county employers (starting soon)





HAAC: Healthy Eating Active Living Workgroup FY24 Goals



Promote sharing of healthy eating and active living resources

- Communication plan to promote new HEAL resource platform (in progress)
- Partner showcase (starting soon)
- 2024 Healthy Anne Arundel Day (starting soon)

Promote policies that support healthy lifestyles

- Federal PHIT Act flyer (in progress)
- Promote healthy meeting and event best practices and organizational sign-on (in progress)
- Develop guide for permitting practices for county-wide field/sports facility rentals (in progress)
- Promote disability inclusion policies (in progress)



Health Equity and Racial Justice

Health Equity

is the state in which everyone has a fair and just opportunity to attain their highest level of health.

Racial Justice

is recognizing that challenging institutional and structural racism is essential if we are to support the creation of a just and equitable society.

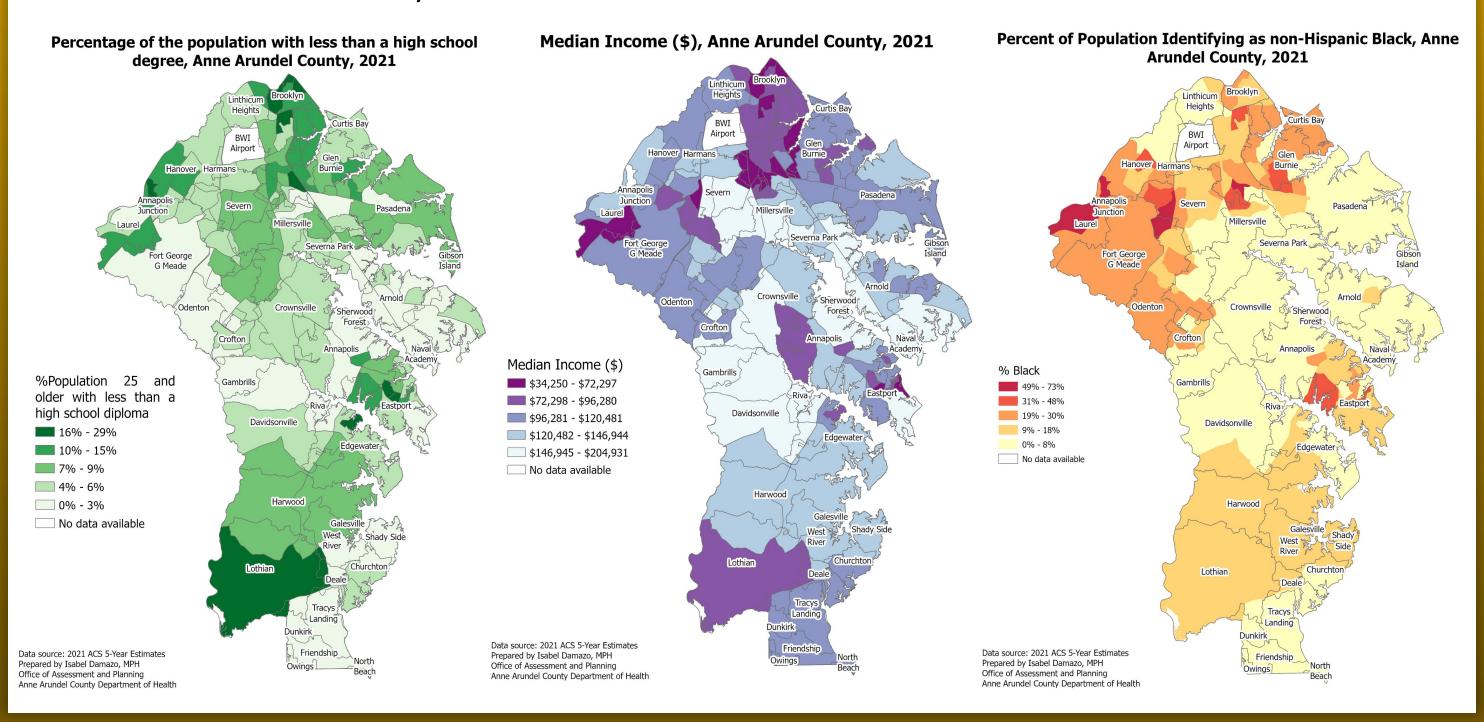
Demographic, Socioeconomic, and Health Indicators by ZIP Code in Anne Arundel County, 2021							
		Poverty	Percentage Without High	Percentage of Households with	ED Visit Rate per	Percentage Low Birthweight Infants	Minority
ZIP Code	Area	Percentage	School Diploma	SNAP	1,000	(2016-2020)	Population
20711	Lothian	11.5%	18.3%	7.1%	275.5	8.7%	41.8%
20724	Laurel	12.0%	7.4%	8.7%	182.2	9.2%	73.4%
20765	Galesville	11.5%	9.3%	3.7%	186.1	Suppressed	24.3%
20776	Harwood	3.7%	7.3%	9.5%	268.7	5.3%	13.8%
21060	Glen Burnie (East)	7.0%	9.3%	10.6%	258.1	8.1%	40.1%
21061	Glen Burnie (West)	7.7%	8.6%	11.8%	283.6	8.6%	45.0%
21122	Pasadena	4.8%	7.1%	5.8%	198.0	7.8%	18.9%
21144	Severn	6.4%	5.5%	7.4%	203.6	8.7%	52.4%
21225	Brooklyn	25.1%	21.9%	27.3%	169.6	12.1%	64.9%
21226	Curtis Bay	13.9%	10.7%	20.5%	165.1	8.2%	41.2%
21401	Annapolis	7.1%	6.5%	7.1%	282.2	6.6%	30.7%
21403	Eastport	7.2%	7.4%	4.8%	249.5	7.6%	36.1%
	Anne Arundel	5.6%	6.6%	6.0%	211.8	7.7%	33.9%

Red = Higher than county average

Source: U.S. Census American Community Survey 5-year Estimates 2016-2021; Maryland Health Services Cost Review Commission Outpatient Files, 2017-2021; Maryland Vital Statistics Administration Birth Files, 2016-2020

Education, Income and Race in Anne Arundel County

Education and income disparities that drive poor health outcomes also align with where people of color reside in the county.



Average Life Expectancy

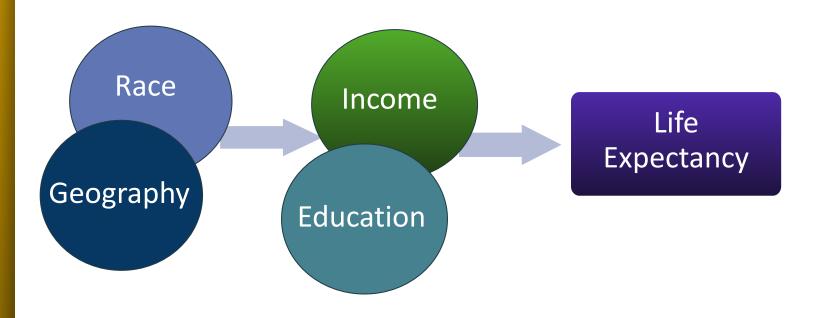
Highest average life expectancy:

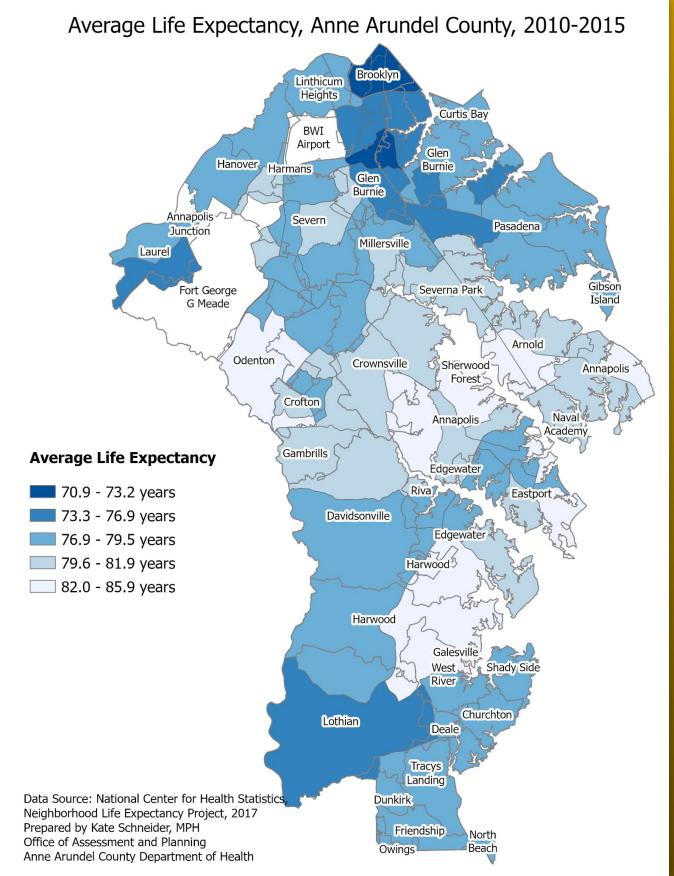
Arnold (85.9 years)

Lowest average life expectancy:

Brooklyn (70.9 years)

Drivers of Life Expectancy





Health Equity in Anne Arundel County



The Health Equity and Racial Justice (HERJ) Office leverages Community Health Workers (CHWs) who are essential public health workers integral to a strong public health infrastructure. **CHWs attended nearly 30 community events in a 3-month period (June - Aug 2023),** including Juneteenth Parade and Festival, gun violence meetings, pop up resource fairs, bookbag giveaways and more!

What is the role of a Community Health Worker?

CHWs nurture authentic and enduring relationships of trust with the community to link people disproportionately impacted by preventable health inequities to needed health and social support services.

Through meaningful partnerships, CHWs create community pathways to tangible support, such as financial assistance for rent and utilities, food support, and transportation for medical appointments.



Community Health Workers

Sustaining a Visible Presence in the Community through High-Impact Engagement

The HERJ Office leverages CHWs who identify the complex health and social needs rife in under-resourced communities through authentic relationships built on trust.

Top concerns/needs expressed from over 15,000 residents for their communities

- → Economic stress 72%
- → Substance use 57%
- → Mental health stigma 53%
- → Exposure to violence, gun violence and trauma 51%
- → Housing instability 41%
- → Food insecurity 27%
- → COVID-19 14%



Meet HERJ Office's Bilingual CHW via Facebook AASaludEquidad, Video Translation:

Hello everyone, my name is Alexander Bravo and I am a bilingual community health worker for the Anne Arundel County Department of Health in the Office of Health Equity and Racial Justice. Connecting people to resources is what I enjoy doing! Reach out to me if you want to know more about available resources in the community. I look forward to connecting with you.

Health Equity and Racial Justice Office

Monthly Community Meetings and Forums

Meeting goals

- 1. Discover community concerns, barriers and opportunities for collaboration
- 2. Share data trends for community interventions and community outreach strategies

Forums bring together approximately 70 health equity experts, decision-makers, stakeholders, leaders and community members, who live, work, play, worship and learn in Anne Arundel County.

- Minority Mental Health Awareness
- Mpox
- Back to school Vaccinations
- Peer Support Services
- Recovery
- Hispanic Health Festival
- Gun Violence Interventions
- Food Insecurity
- Community Building
- Black Resistance and Black Resilience
- Equity in Policies

- Public Health and Gun Violence
- Heart Healthy Campaign in Maryland
- Cancer Screening Services
- Flu Vaccines
- Healthy Communities Program
- Communities of Hope
- Intimate Partner Violence
- Childhood Asthma and Lead
- Environmental Case Management
- Youth Engagement

Community Health Ambassador Program Goals

FY23: Support residents disproportionately impacted by COVID-19 and mental health.

- Expand outreach for COVID-19 and mental health information-sharing, education and linkage to health services among underrepresented and minority communities.
- Hire and train Health Ambassadors from local communities and neighborhoods.
- Support community capacity building through grant awards to seven community partners.















Community Health Ambassadors

The Community Health Ambassadors (CHA) Program utilizes community-based partners to meet residents where they are as a trusted source of health information and resources.



June 2022

CHAs reached 25,308 households through door-to-door outreach during FY22.



June 2023

25,620 community members reached at events, food distribution sites, door-to-door and outreach opportunities.



May 2021

9 CHAs selected to provide outreach support for COVID-19 vaccinations.



October 2022

8 CHAs continue COVID-19 outreach efforts in FY23 with added focus on mental health needs.



Community Health Ambassadors

Mental Health First Aid is a national program that teaches how to recognize and help those experiencing a mental health problem or substance use disorder.

- 24 CHAs trained, including those who speak Korean and Spanish
- 15 of the 24 trained were also trained for Youth MHFA to help adolescents ages 12-18 years
- CHA partners hosted 9 trainings resulting in 163 community members trained





Community Health Ambassadors

The HERJ Office's CHA Program supports community capacity building through grant awards to seven community partners.

They provide technical assistance through meetings, site visits, field support and ongoing learning opportunities.

FY 23 Capacity Building Included:

- Opioid Use and Narcan
- Equity, Diversity, and Inclusion
- Community Engagement
- Youth Mental Health First AID Training
- Mental Health First AID Training
- Intimate Partner Violence and Sexual Assault Services

FY 24 Expansion Includes:

- Access to Care
- Behavioral Health
- Community Safety
- Extreme Weather Preparedness
- COVID-19



Community Health Ambassador Program

FY24 Focus: Responding to Community Needs

FY23

covidential vaccination information and resources (e.g., masks, test kits)

Mental Health MHFA and local resources CHAs partner with different populations in the county with different needs. Growth in FY 24 focus areas leverages the DOH and other county programs to build capacity specific to the different communities served by CHAs and allows them to be the trusted boots on the ground to promote these programs.

FY24

Behavioral
Health
Narcan (opioid
reversal)
distribution

Partnering with:

DOH Behavioral Health Community Safety

Gun Violence and Community Trauma

Gun Violence Intervention Team **Access to Care**

Medicaid Expansion and re-enrollment

DOH Family Health Services Weather Preparedness

County resources and critical communication

County Office of Emergency Management, DOH Office of Emergency Preparedness

Key Insight from some of our Community Health Ambassador Program Partners

"Many Korean Americans ignore mental health problems and do not see them as a big problem. However, thanks to [mental health] promotion of My Life Foundation and the Health Department, more and more people are recognizing the importance of mental health, and...people struggling with mental health issues are reaching out and asking for help. In addition, Asian American communities recognize the importance of mental health prevention education and demand prevention education.

For example, we deliver promotional materials and resources to Korean churches. One of them, the Philippi Church, realizes the importance of mental health awareness education and requested education. My Life [Foundation] conducted Mental Health Awareness/prescription drug misuse education...

Feedback from the community is that people have lived without realizing the importance of mental health awareness and treatment. Many have been enlightened by My Life Foundation and the Department of Health's [mental health] promotion and that more publicity and treatment services should be available to those who need them in the future. It is also said that there should be a channel through which people without insurance or undocumented people can receive treatment." - My Life Foundation, Inc.

"Our individual success story is that this program allowed us to hire Maria Hernandez. Maria is primarily Spanish speaking. A little about Maria, she has three children. They have struggled with mental health issues, such as anxiety and depression, and she has a husband who has been physically ill. We met Maria at a health fair and she didn't know so many services existed in Anne Arundel County for the underserved Hispanic/Latino communities. She immediately wanted to connect people to resources.

Maria's educational level in most cases would not give her the opportunity to work [in partnership with] a governmental agency and do this kind of work, but CHA program and training provided such as Mental Health First AID, and other trainings provided a boost in her confidence and further equipped her [with] tools she has used for her family and for the underserved Hispanic/Latino families in Anne Arundel County." - Heritage Community Church



Key Insight from some of our Community Health Ambassador Program Partners

"The CHAs at The Center of Transformation had the opportunity to attend the National 100 Black Women Coalition event. Not only were we able to start up conversations about mental health via survey collection, but through this partnership, my fellow ambassador and I were given the opportunity to speak to and educate their youth mentees. The focus of this conversation was to express the importance of self-care for mental wellness, and developing social strategies they could implement now.

Initially I could tell they were a bit apprehensive to discuss mental health based on their preconceived notion that mental health only meant mental disorder. However, once we broke down the social dimension of mental wellness and invited them into the conversation, their perspective suddenly changed. They were excited to learn that something as simple as spending time with friends, going for a walk, or picking up a hobby could help to relieve certain pressures they identified that they currently face as teens.

I would say this was very successful. By us being young ourselves they were able to be receptive to what we had to share and open up more. The outcome was they were able to gain a new perspective and appreciation, and came up with a list of self-care strategies that would improve their overall mental wellness now." - The Center of Transformation, Inc.

"On Saturday, April 22nd, we hosted our National Minority Health Awareness Day in Annapolis. A woman with two children currently under doctor's supervision for mental illness was in attendance. At the beginning of the event, I told the attendees that I was sure that everyone would leave with something they did not come with.

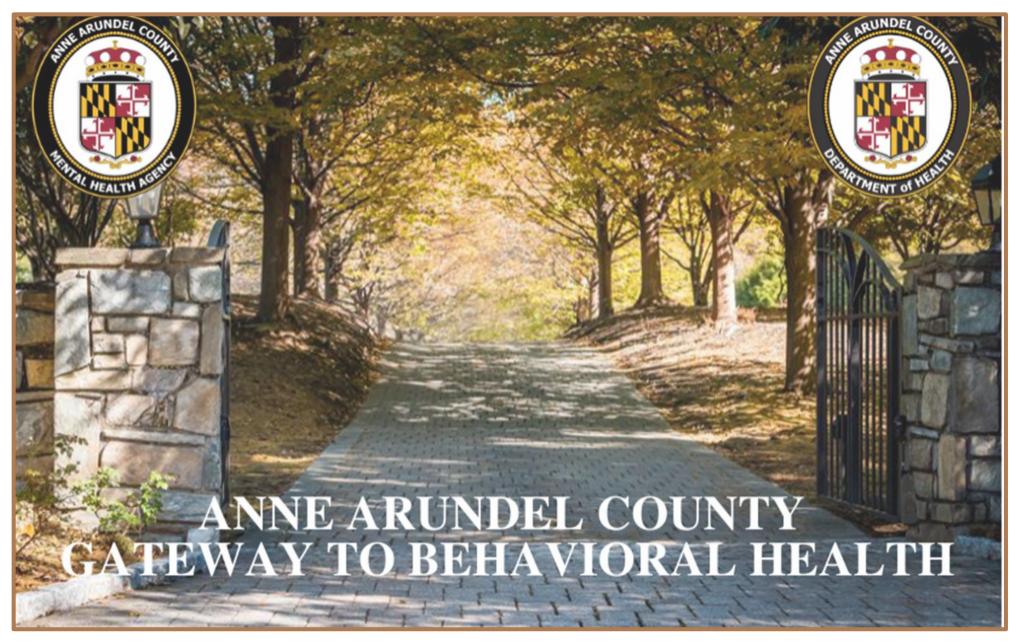
This woman was concerned about the diagnosis and care her children were receiving. She came in hopes of getting additional support. By the time the event was over, she was connected to Catherine Gray, Clinical Director/Deputy Director [for] AACo Mental Health Agency. Ms. Gray will be walking this woman through what to expect and how to respond to get the best care available for her children.

This woman said she felt a burden lifted and was so thankful. She was hoping that we could come to the community from time to time to share information in this way. She signed up immediately for our 8hr [Mental Health First Aid] training on April 29th to further educate and equip herself." - Growth Matters, Inc.





Anne Arundel County Local Behavioral Health Authority (LBHA)



410-AAC-BHA1 (410-222-2421) aac-lbha-connect@aacounty.org

LBHA 2024-2026 Community Plan Priorities

Results



Communities embrace behavioral health and mental wellness as a key component of overall wellness



Individuals and families have the support they need to prevent and manage behavioral health issues



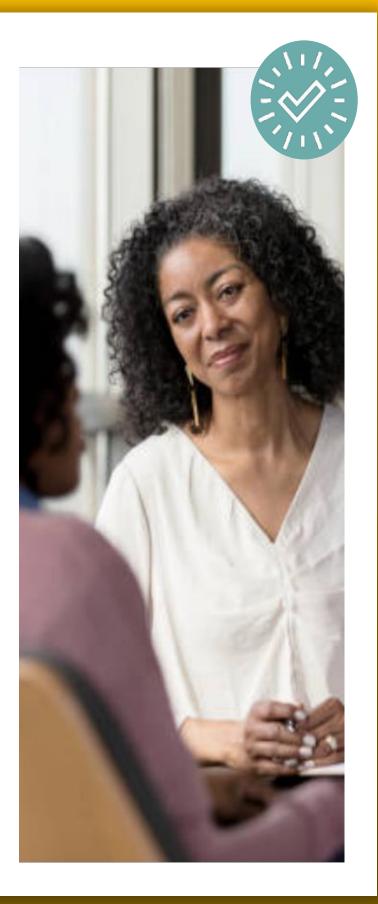
All people are physically, mentally and emotionally healthy

Priorities

- → Education and Prevention: Increase behavioral health programs that promote mental well-being, reduce trauma and stress, and prevent substance misuse, suicide, and other risky behaviors.
- → Quality: Provide quality care through increased use of proven and promising practices, workforce development and training, and quality management, monitoring and improvement.
- → Equity: Increase equity in behavioral health services through people, policies, practices, and programs that recognize and value all individuals and families.
- → Access: Increase access to behavioral health care through a state and local, integrated health and human services system, enhanced care coordination, and expanded use of technology.

Our Standard of Care for Behavioral Health Care

- Accessible to all and meets people where they are
- Responsive to a person's unique identity, culture, language and trauma
- Evidence-based and open to innovation
- Comprehensive including prevention,
 management and treatment
- Family- and person-centered
- Collaborative with warm handoffs and seamless transitions among agencies and providers



Behavioral Health in Anne Arundel County

Agenda 2024-2026

VISION

All people in Anne Arundel County have the resources and support they need to manage their behavioral health (substance use + mental wellness) and lead fulfilling lives.

PRIORITIES and STRATEGIES

EDUCATION AND PREVENTION

Increase behavioral health programs that promote mental well-being, reduce trauma and stress, and prevent substance misuse, suicide, and other risky behaviors.

QUALITY

Provide quality care through increased use of proven and promising practices, workforce development and training, and quality management, monitoring and improvement.

EQUITY

Increase equity in behavioral health services through people, policies, practices, and programs that recognize and value all individuals and families.

ACCESS

Increase access to behavioral health care through a state and local, integrated health and human services system, enhanced care coordination, and expanded use of technology.

Behavioral Health Provider Meetings and Annual Symposium



BEHAVIORAL HEALTH SYMPOSIUM: THE POWER OF CONNECTION

Tuesday, September 19, 2023 9:00 a.m. - 4:00 p.m. Topics:

- Creating Trauma Informed Resiliency Oriented Equitable Care and Culture Organizations
- Depression and Mental Health in African American Men
- Considerations in LGBTQ+ & Gender Affirming Care
- Social Drivers of Health & Better Health Outcomes
- Connecting Wellness, Wellbeing and Neuroscience Register here:



Hybrid Meeting
In Person:
Health Department
3 Harry S Truman Parkway
Annapolis, Maryland



Click the link or scan the QR code to register.

- Collaboration between the Department of Health and the Mental Health Agency
- Annual Symposium includes free continuing education credits and national speakers - This year's theme was The Power of Connection
 - 5 Free Continuing Education Units for attendees
 - 180 attendees
- Monthly Meetings are open to all stakeholders



BH Provider Monthly Meeting

CONTACT US: AAC-LBHA-CONNECT@AACOUNTY.ORG OR 410-AAC-BHA1/410-222-2421

Behavioral Health

- Adolescent and Family Services
- Road to Recovery
- System Planning and Management
- System Training, Education and Prevention Services
- Recovery Community Support
 Services



Mental Well-being Activities







Something to Talk About

Reduce Stigma and Increase Awareness



Boost Your EQ

Increase emotional literacy



Just Do It

Practice acts of wellbeing...everyday



Life Line

Engage in help seeking behaviors

DOH Behavioral Health Services FY23

- Adolescent and Family Services delivered via telehealth and in person.
 - 398 families served (137 new admissions)
- Road to Recovery clinics in Glen Burnie and Annapolis (including ORCC) providing opioid medication treatment with counseling (methadone, buprenorphine and naltrexone).
 - 561 individuals served (169 new admissions)
- Peer Support Services (PSS) providing recovery support services as well as overdose outreach to individuals in the community.
 - 1147 individuals served
 - 247 individuals outreached to post incident with 60 individuals actively engaged in peer support services
- System Planning and Management continues to process requests for funding.
 - 722 served in SUD crisis beds
 - 56% were admitted to SUD treatment

Strengthening Families Program

An evidence-based, 14 session program, which provides training in parenting; children's social and life skills, and helps participants to build a healthy and positive family relationship.



- Multi-family group intervention
- Reconfigured for a virtual platform while maintaining the fidelity of the model.
- Each family had dinner delivered to their homes every session.

Program was changed to meet the needs of the community during the COVID-19 pandemic.

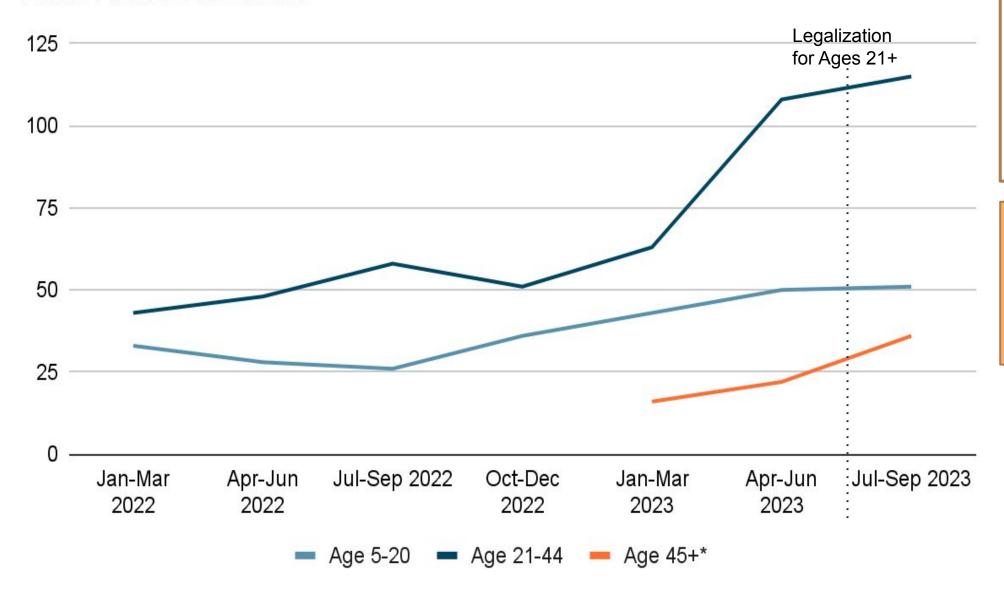
Total Served: 63 families served; 239 individuals served

Total Graduated: 35 families graduated; 125 individuals graduated

Total Percentage Graduated: 55% families; 52% individuals

Cannabis-related Hospital Visits

Cannabis-related Hospital Visits by Age Group, Jan 2022 - Sept 2023 Anne Arundel Residents



Cannabis-related hospital visits increased for ages 5 and older in 2023, but the increase pre-dates the legalization of cannabis on July 1,2023.

Hospital visits for ages 21-44 years **doubled in a year**, from 58 in Jul-Sep 2022 to 115 in Jul-Sep 2023.

Source: Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE), Chief Complaint and Discharge Diagnosis: Marijuana v3, accessed 9/28/2023

^{*} Data prior to 2023 is suppressed due to multiple time periods with <11 visits

Wellmobile - Virtual and In Person

On demand initiation of buprenorphine services

- Telehealth services for entire county, Monday-Friday
- In person Schedule
 - 1 day/week in Annapolis
 - 1 day/week in Glen Burnie
 - 1 day/week in South County at Lula Scott
 - NEW 1 day/week in Severn at Severn Intergenerational Center
- Incorporates STI and HIV testing and treatment
- Naloxone Distribution
- Syringe Services

Wellmobile Numbers

- 87% of those served referred to a community provider
- 100% of those referred keep their initial appointment
- 94% of those who keep their initial appointment are still active >30 days
- 462 residents served FY23





Opioid Intervention Team (OIT)

Countywide collaborative led by Department of Health, Anne Arundel County OEM and Annapolis City OEM

- County government agencies
- Community organizations
- Faith-based organizations
- Persons in recovery
- Family members

Purpose

- Develop a unified strategy to reduce non-fatal and fatal opioid overdoses.
- Integrate all stakeholders into the OIT from local, state and federal government agencies as well as the private and non-profit sectors.
- Coordinate stakeholders operations to achieve the unified strategy.
- Develop Opioid Restitution Funding Strategies.

Opioid Intervention Team (OIT)

Strategic Priorities

- Prevention and Education
- Treatment
- Recovery
- Enforcement and Public Safety
- Data

Accomplishments

- Joint County/City Dashboard
- Public Service Announcement: Signs and Symptoms of Overdose
- Expansion of Sounds of Silence
- Low barrier naloxone availability
- Community Grants for Opioid Abatement Funding Projects

Scan the QR code to view the OIT Strategic Plan



Joint-Opioid Related Data Dashboard

Anne Arundel County
Police Department and
Annapolis City Police
Department data.

Updated data is available every Friday on aahealth.org.



522

2023 Total Overdoses YTD

This is a 2.4% decrease from the 535 overdoses YTD 2022.

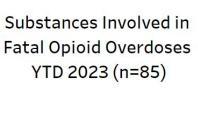


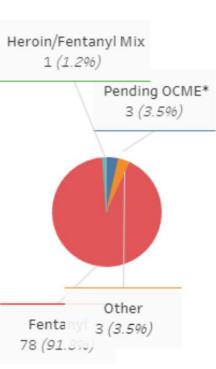
75

2023 Fatal Overdoses YTD

This is a 20.2% decrease from the 94 overdoses YTD 2022.

Source: Anne Arundel County and Annapolis Police Departments

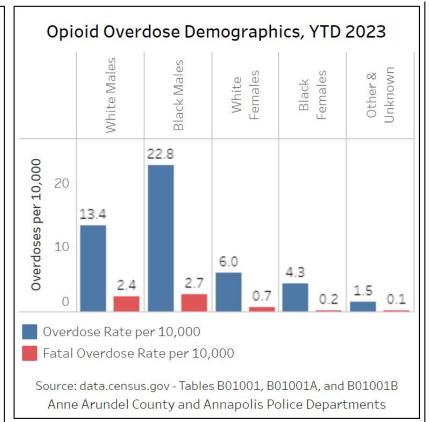


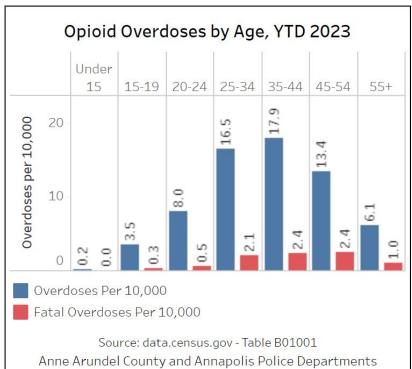




Substances can include fentanyl, heroin, heroin/fentanyl mix, opioid analogues and other opioid substances.

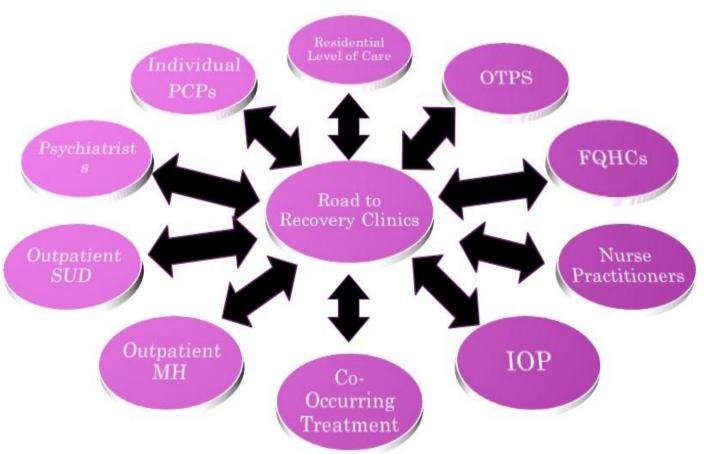
Source: Anne Arundel County and Annapolis Police Departments





Behavioral Health: Hub and Spoke

- Connects a network of community providers around a central hub that offers medications for opioid use disorder (MOUD) as a component of their care.
- Supports the treatment of opioid use disorder within the chronic disease paradigm.
- Understands that while medications are not the only treatment for opioid use disorder, it is
 the most effective for the most people.
- Transfers between hubs and spokes are bidirectional.
- People with less complex needs may begin their treatment at a Spoke, other patients transition to a Spoke after beginning recovery in a Hub.

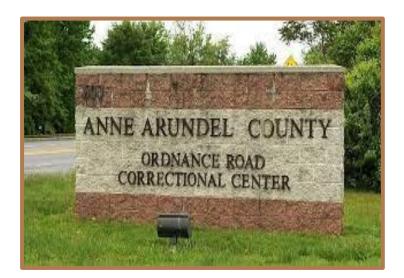


Road to Recovery at Ordnance Road Correctional Center

Opioid overdose death risk is 40-120 times higher on re-entry without treatment.

- Provides methadone and naltrexone to incarcerated inmates and connects them to care on release
 - Added buprenorphine March 2022
- 71 inmates enrolled in program YTD FY23
- 100% of those enrolled in RTR were connected to community treatment upon release.





Road to Recovery-South at Jennifer Road Detention Center

- In collaboration with JRDC, applied for a grant to offer medication for the treatment of opioid use disorder at Jennifer Road.
- Innovative model to leverage existing resources and expand services.
- Will assure compliance with House Bill 116 which requires MOUD to be provided within all correctional facilities.

Services provided via a mobile unit attached to Road to Recovery South.

- Inmates will be offered access to methadone, buprenorphine and naltrexone.
- Access to counseling and peer support services.





Responsible Restaurant Alliance

Community Education -

- 115 liquor store compliance checks
 - 91 passed (82% Compliance Rate)
- 60 restaurant compliance checks
 - 46 passed (77% Compliance Rate)
- 62 Establishments received TIPS training (Responsible Beverage Service Training)
- 228 Servers trained on TIPS

FY24 Priorities:

Invites establishments to join the Safe County Alliance (restaurant partnership) with special emphasis being placed on establishments that have passed all compliance checks in program history. Continue to offer TIPs training to establishments that fail compliance checks as well as offer training to new establishments identified at Liquor Board hearings.



Harm Reduction is...

- a set of practical, public health strategies designed to reduce the negative consequences
 of drug use and promote healthy individuals and communities.
- "a movement for social justice built on a belief in, and respect for, the rights of people who use drugs." (Harm Reduction Coalition)
- provision of services to people who are actively using drugs, without the expectation that they stop using drugs.
- non-judgmental, non-stigmatizing engagement of people who use drugs.
- acknowledgement of the harms associated with drug use while presenting accurate and complete information about ways to reduce these harms as much as possible.







Harm Reduction Advisory Council (HRAC)

HRAC was developed with the goal of enhancing the quality of life for People Who Use Drugs (PWUD) by a coordinated effort through education and promotion of harm reduction (HR) principles. Membership includes:

Mission: To expand harm reduction services and reduce stigma among all members of the county through ongoing education and advocacy to promote the health and well-being of all people with substance use disorder.

Vision: We envision a county where all community members and groups have access to judgment-free harm reduction services that foster dignity, prioritize safety, build connections and instill hope regardless of individual substance use status.

Membership: 33, including 4 Syringe Services Program (SSP) Participants

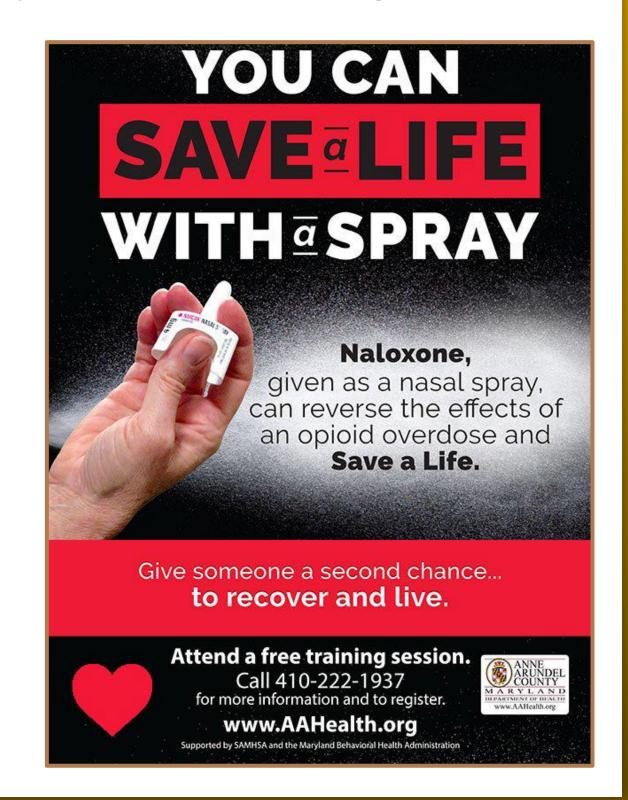
Activities: Currently developing a strategic plan to identify gaps and improvement in services focusing on the 5 key areas: community partnership and engagement, education and awareness, service delivery, research and data, and equity.

Harm Reduction: Opioid Overdose Response (ORP) Program

Free and open to anyone who would like to learn:

- How opioids impact the brain and body
- How to recognize the signs and symptoms of opioid overdose
- How to administer naloxone
- How to care for someone who is having an overdose until emergency help arrives

Participants receive a free rescue kit that includes naloxone (Narcan®), a life-saving medication that may be able to restore the breathing of a person who has overdosed on opioids.



Harm Reduction

Naloxone Dispensing Machines

Nationwide, dispensing machines have emerged as a strategy for widespread distribution of naloxone. These machines are customized to provide naloxone in a secure, organized and stigma-free manner.

The Department of Health in partnership with County Libraries and Correction Centers will have seven machines throughout the county.

Machines will include contact information to access naloxone training, as well as treatment and recovery resources.

Additional harm reduction materials to be considered:

- Masks/PPE
- Hygiene kits
- COVID tests
- Fentanyl test strips



Funding: six machines were purchased using state Overdose Data to Action funds and one with opioid Abatement funds.

The Department of Health has an Overdose Response Program and currently receives naloxone from the state.

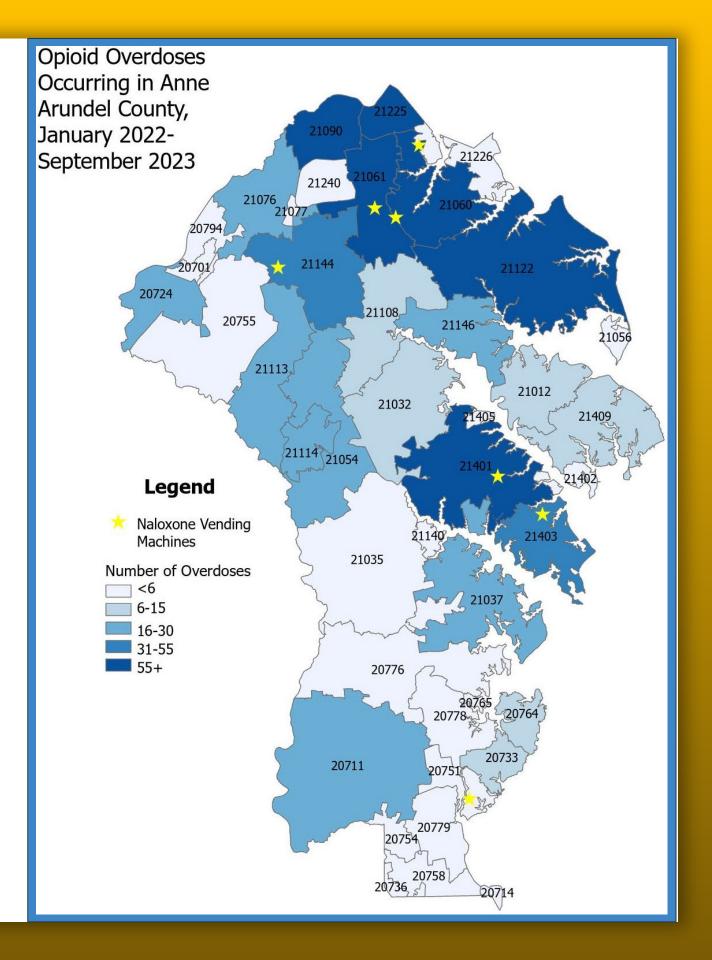
Harm Reduction

Naloxone Dispensing Machines

Initial locations include:

- Ordnance Road Correctional Center
- Jennifer Road Detention Center
- Glen Burnie Health Center
- Severn Intergenerational Center
- Deale Library
- City of Annapolis
- Brooklyn Park/Glen Burnie Library





Harm Reduction: AA POWER

A peer-delivered and judgement-free street outreach harm reduction program, with a person-first approach and a focus on quality of life outcomes. Partner with communities to provide:

- Overdose Prevention: naloxone (Narcan) kits, fentanyl test strips and overdose education
- Safer Drug Use: split safe kits, single use injection kits and safer smoking kits (without stems)
- Safer Injection Assistance: bleach cleaning kits, tourniquets, sterile water vials, syringe disposal containers, wound care kits
- Infectious Disease Prevention: safer sex items (condoms and lube), sexually transmitted infection (STI), hepatitis, and human immunodeficiency virus (HIV) testing education and referrals
- Syringe Services Program

Harm Reduction: Syringe Services

Syringe Service Programs (SSPs) are evidence-based programs with over two decades of research that demonstrate effectiveness in preventing HIV and other blood-borne infections, as well as connecting drug users with a range of vital medical and social services and supports.

960 Individuals received harm reduction materials

Referrals made:

- 554 SUD Treatment
- 551 Mental Health Treatment
- 551 Health Care
- 551 Housing
- 551 Hep C Referrals

1065 Syringes Collected







Stigma Reduction Initiatives

- Public Service Announcements
 - Bupe = Hope
 - Help is Here
 - Denial is Deadly
 - Show Us Your Sign
- Awareness Events
 - Mental Health Month (May)
 - Recovery Month (September)
 - Suicide Prevention Awareness Month (September)
 - International Overdose Awareness Day (August 31)

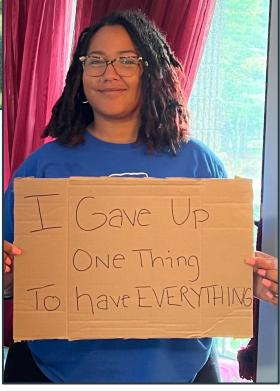












Suicide Prevention Initiatives

- A grant from the MDH's Office of Suicide Prevention allowed for 10 Department of Health staff to be trained as instructors in two evidence based suicide prevention programs. These staff members will be training staff, stakeholders and community members in the coming months.
 - Counseling on Access to Lethal Means (CALM)
 - Question. Persuade. Refer. (Q.P.R.)
- Promoting mental wellness and the normalization of mental health through media campaigns, including BeWellAA and Change the Beat.
- As of September 14, 2023, a full-time Suicide
 Prevention Coordinator has been hired to develop
 and expand suicide prevention efforts in
 the county.



September 16, 2023: Department of Health and AACo Mental Health Agency staff participated in the Out of Darkness Walk for Suicide Awareness in Annapolis.

Suicide Prevention Initiative - Firearm Retailers Bill 108-21

Mandates that gun dealers in Anne Arundel County distribute suicide prevention and conflict resolution literature to the purchasers of guns and ammunitions and make the literature available at point of sale.

- Bill was challenged by Maryland Shall Issue representing four gun shop owners in 2022 (MSI, et al v. Anne Arundel County)
- Ruling in March 2023 was in favor of the County and allowed for literature distribution to resume (13,500 distributed since)
- Maryland Shall Issue filed an appeal
- Multiple medical organizations, including the American Academy of Pediatrics and American Medical Association, filed a <u>legal brief</u> urging for the literature to continue
- Maryland also filed a <u>legal brief</u> in support



Anne Arundel County Warmline 410-768-5522 aahealth.civilspace.io/en/projects/ Anne Arundel County Police

911 Veteran's Crisis Line 1-800-273-8255, Press 1.







53,586 brochures distributed to around 31 gun shops as of September 21, 2023

Overdose Survivors Outreach FY23

Teams of two Peer Support Specialists respond 7 days/week to non-fatal overdoses in Anne Arundel County

- 649 overdose survivors received outreach attempts
- 36 survivors referred to Intensive Care Coordination due to multiple incidents
- 68 survivors linked directly to SUD treatment
- 47 business with high incidents of overdosed trained and provided naloxone







Overdose Survivors Outreach Services (ODSOS)

- Peers in hospital emergency departments (ED) offers OD survivors path to treatment and wrap around services
- Peers, in local ED guide survivors through the process of connecting to care during and after ED visit
- Peers use the AACo Police Department overdose line item report to do street outreach to survivors not going to the ED





Crisis Response - Number of Individuals Served

Component of CRS	FY 20	FY 21	FY 22	FY 23
Mobile Crisis Teams	1,529	1,852	1,775	2,170
Safe Stations	762	678	541	637
Warmline	4,831	6,456	7,547	9,789
Crisis Intervention Teams	435	1,209	2,232	2,055
Hospital Diversion	1,192	1,261	615	805
Mental Health Stabilization Service	57	40	69	79
Care Coordination & Outreach	1,232	1,043	786	1,031
Jail Diversion	182	0	110	542
Youth	590	613	658	910
# of Unique Individuals*	7,188	8,890	11,872	11,937

^{*}Individuals may receive multiple services.

988 New Suicide and Crisis Lifeline

- The National Suicide Prevention Lifeline became The National Suicide and Crisis Lifeline
- Call or text 988, 24 hours a day,7 days a week
- The Anne Arundel County Crisis Response
 Warmline is unchanged
- Call 410-768-5522, 24 hours a day,7 days a week

On July 16th, 2022, **The National Suicide Prevention Lifeline** became **The National Suicide and Crisis Lifeline**.

Users can now call or text **988** 24 hours a day, 7 days a week

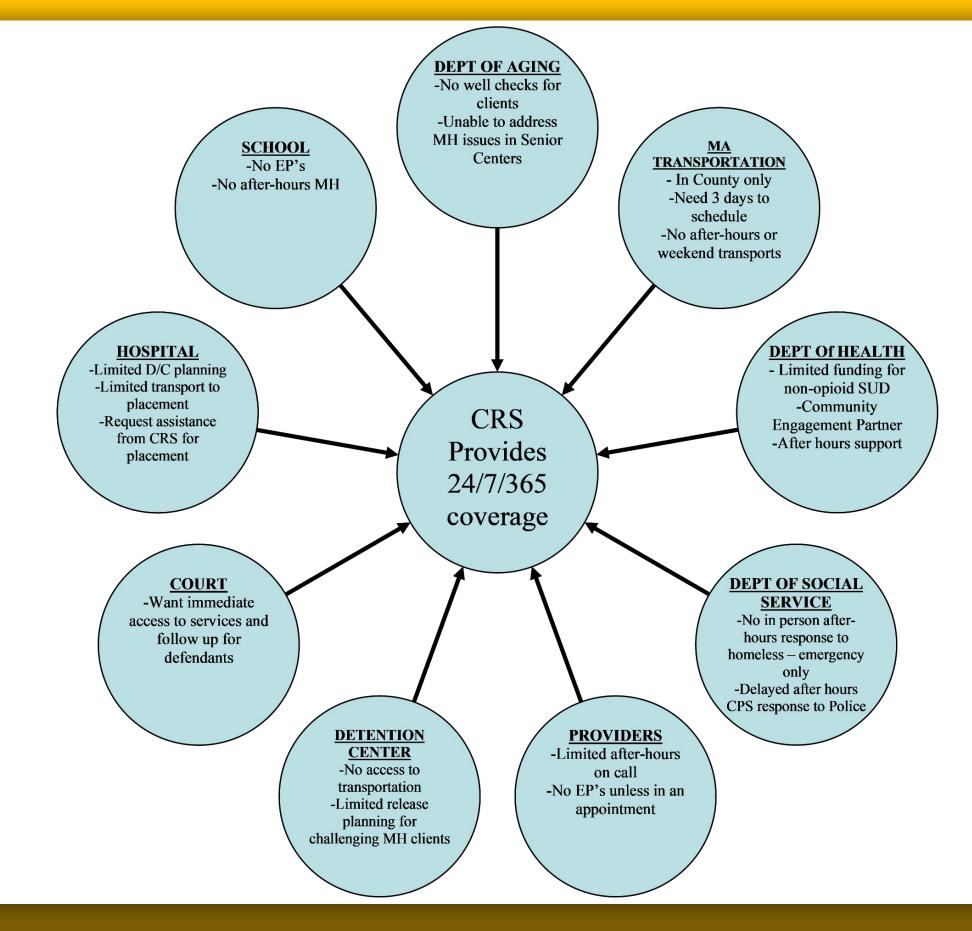


The Anne Arundel County Crisis Response Warmline is unchanged.

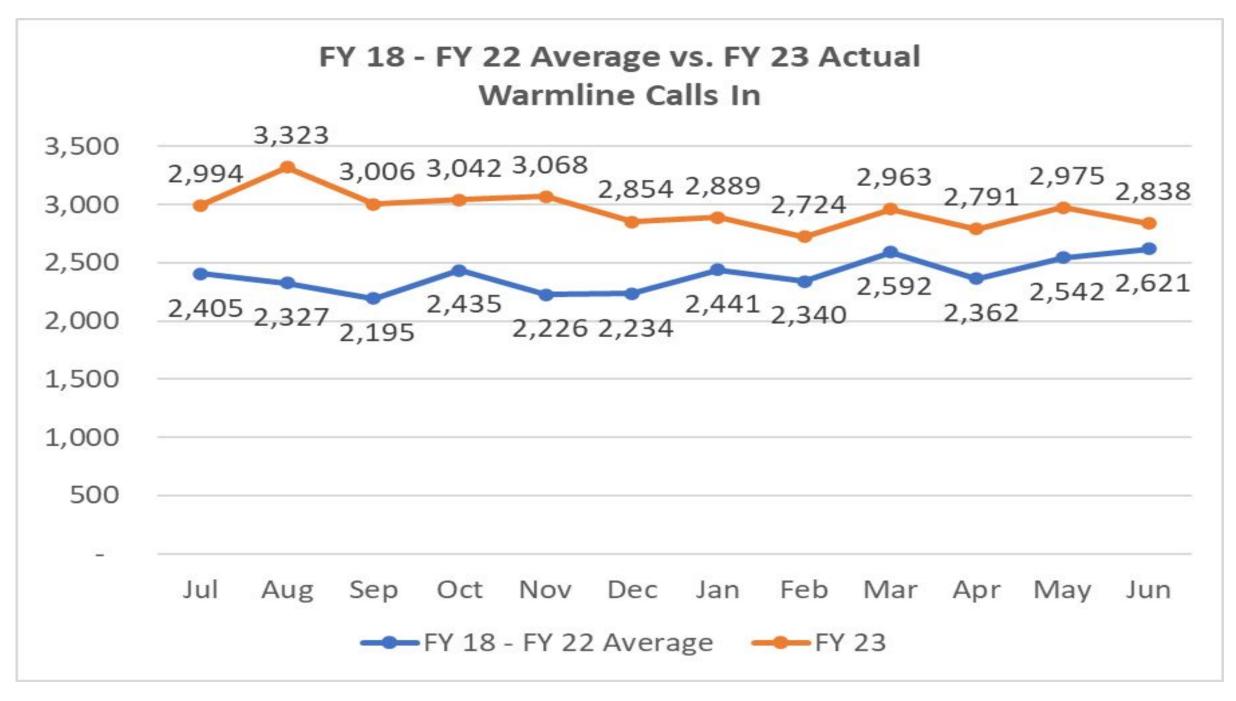
County residents can still call **410-768-5522** 24 hours a day, 7 days a week



Crisis Response Filling the Gaps

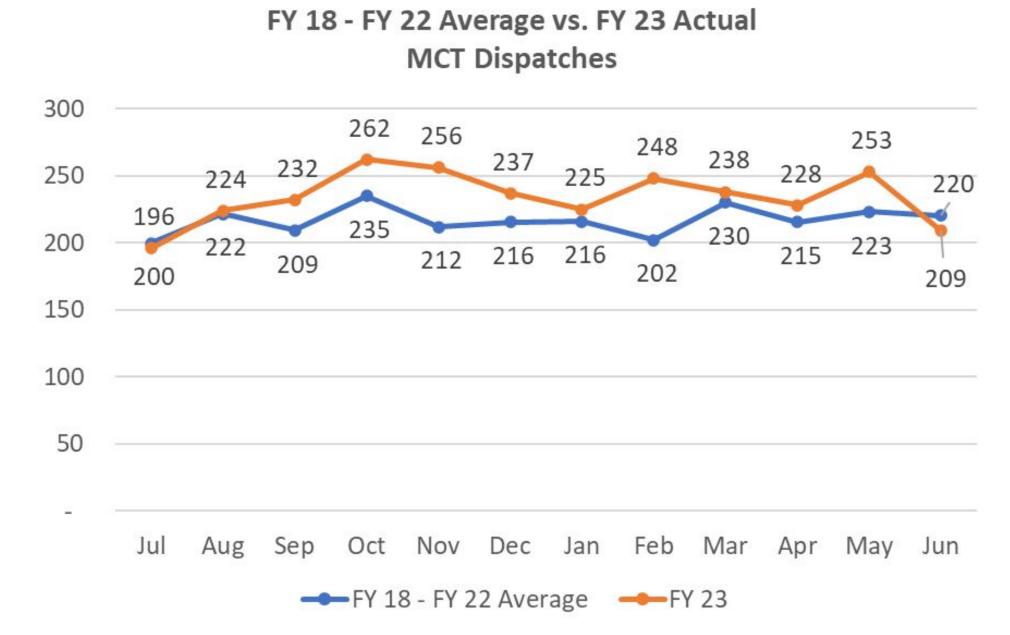


Crisis Response System Services - Warmline Calls



In FY 23, calls into the Warmline were 118% higher than the previous 5-years' average

Crisis Response System Services - Mobile Crisis Dispatches



- In FY 23, Mobile Crisis Team Dispatches were 8% higher than the previous 5-years' average.
- Post COVID, FY 23 showed the demand remains high. The acuity in mental health has been increasing and the cases are highly complex.

Crisis: Hospital Diversion

- Workers respond to Emergency Departments for care planning
- Provides support to most vulnerable residents who do not meet inpatient criteria
- Develop and coordinate plan of care with the individuals
- Reduces homelessness and/or incarceration
- Prevents suicide
- 118 assessments completed in FY 23
- Weekly meeting with Luminis Health and Baltimore Washington Medical Center hospital staff to improve patient flow, brainstorm challenging cases and improve quality



Safe Stations

Individuals seeking substance use treatment welcome into any police or fire station 24/7

- 6,637 assessments completed since program began
- 1,317 assessments were completed in the community, rather than a fire or police station
- 70% of all individuals who were assessed were connected to substance use treatment

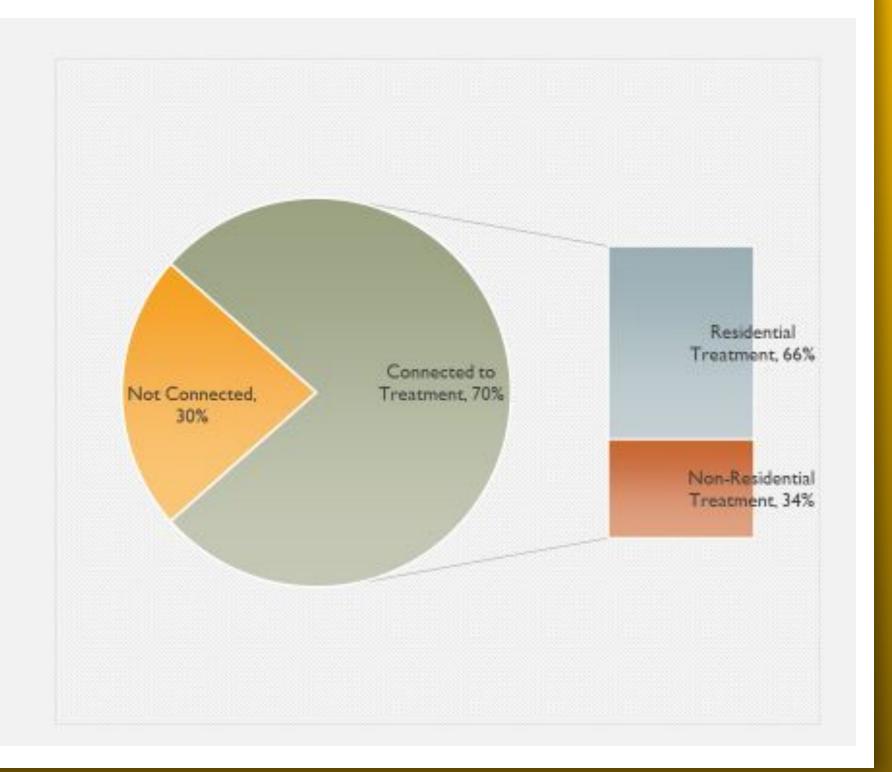
The Crisis Response clinicians respond and develop a plan of care together. Safe Stations reduce barriers for treatment including Transportation, Criminal Justice Involvement, Entitlements, Medical Supplies and more.



Safe Stations Outcomes

SAFE STATIONS CONNECTED TO TREATMENT

- Residential Treatment includes Levels 3.1 – 3.7 Inpatient Services
- Non-Residential Treatment includes Intensive Outpatient, Outpatient, Social Supports, Medical, Mental Health, and 3day Detox

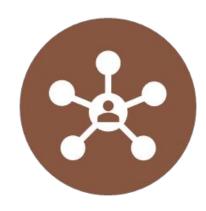


Mental Health Task Force

This partnership between the Anne Arundel County Public Schools and Anne Arundel County Mental Health Agency aims to:



Identify contributing factors to the increasing mental health needs of our children



Better coordinate services and communication between and among the school system, county government, and providers

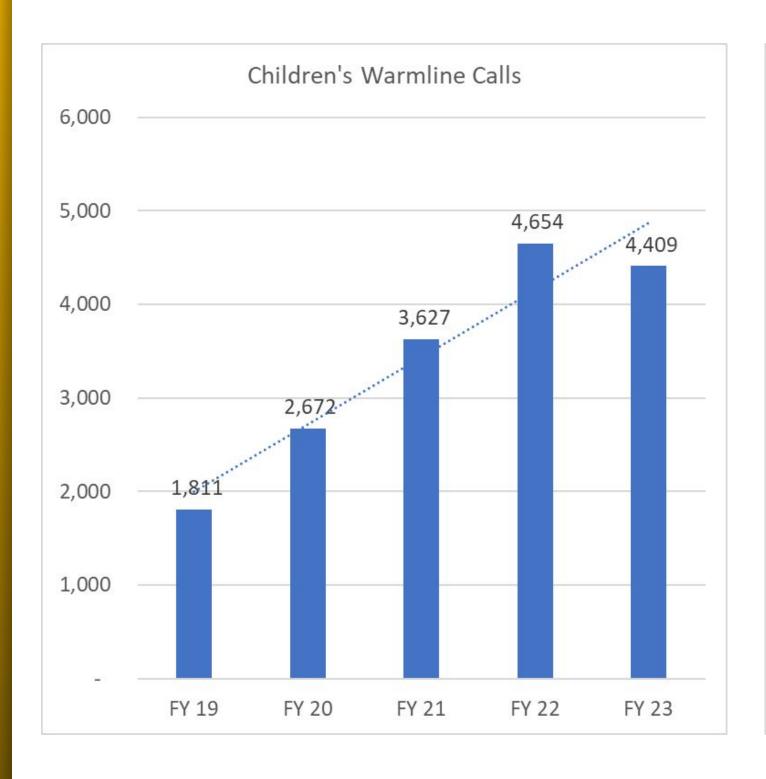


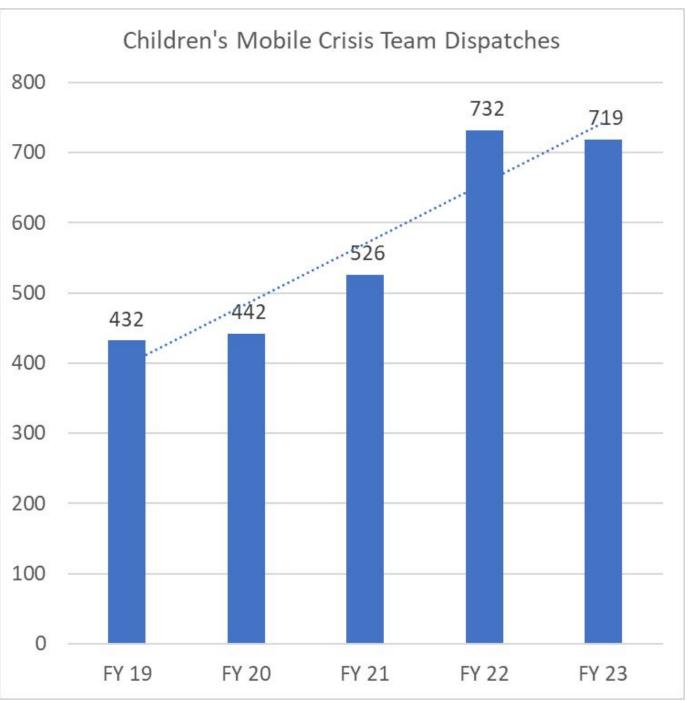
Identify proactive measures and best practices



Make recommendations for improved delivery of services to children and families

Crisis Response System - Increased Children's Needs



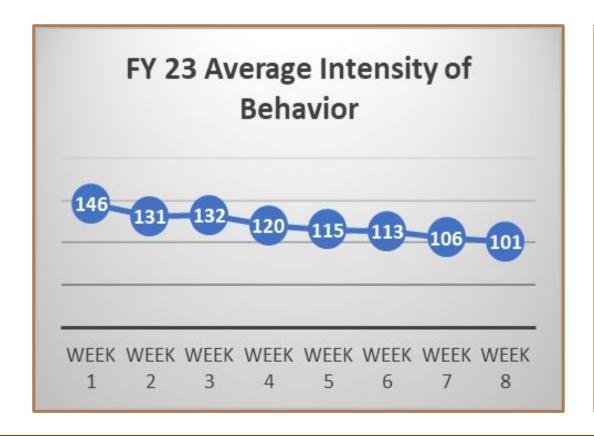


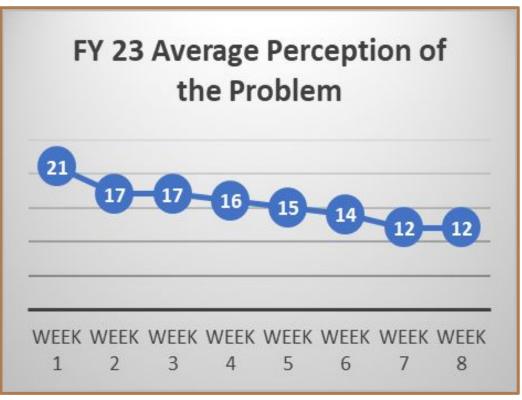
Youth Mental Health Programs

- Mentoring Program Collaboration between the Mental Health Agency and Partnership for Children, Youth and Families (Ages 12 - 21)
- Transitions Aged Youth (TAY) Project On Our Own of Maryland works to support and mentor TAY Peers as they become involved with peer support, leadership, advocacy and public policy (Ages 16 25)
- Healthy Transitions (HT) Utilizing evidence-based practices, this Arundel Lodge program supports youth in successful transition to adulthood (Ages 16 - 25)
- **Taking Flight** Maryland Coalition of Families provides peer support to young adults and advocates for issues that impact their health and well-being (Ages 16 25)
- Mental Health Stabilization Services Provides a family with stabilization services for 8 weeks after an initial crisis. Offered through the Anne Arundel County Crisis Response System. (All Ages)

Crisis: Mental Health Stabilization Services (MHSS)

- Responds to schools and to the community to assist youth and their families during a behavioral health crisis and provide follow up services and linkage to community-based services.
- Youth are referred regardless of insurance status, to the MHSS Clinician to continue to stabilize the family until they are connected to community-based services.
- 45 youth/families served in FY 23.
- Parents reported a 31% decrease in the Intensity of the Behavior and a 43% decrease in the Parental Perception of the Problem on average in FY 23.





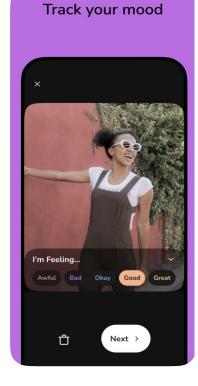
Mental Health Awareness

Youth Oriented

- The Mental Health Agency is partnering with Uneo Health.
- Recently launched Prosper, a wellness app.
- The app is free.
- Reduces barriers and supports the wellness journey.
- Appealing to Gen Z and Millennials.

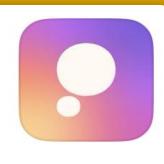
Prosper Provides:

- → Self care tools
- → Educational assets
- → Links to resources and support









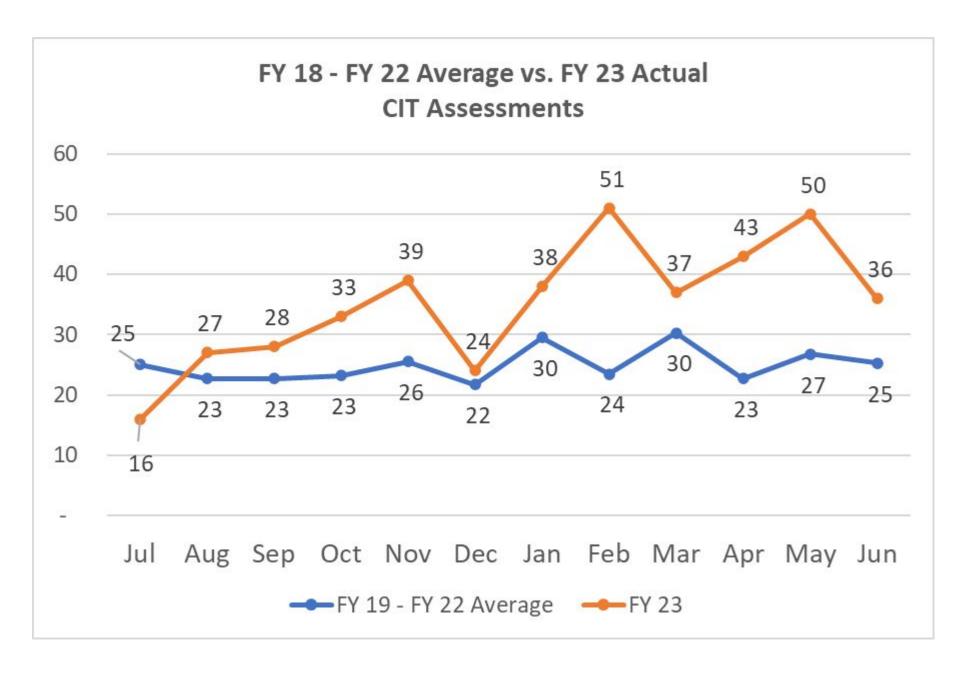


Crisis Response - Addressing Community Violence

Working with communities experiencing violence:

- Providing additional Mental Health First Aid Training to the community
- Community debriefs after traumatic events
- Utilizing trauma-informed care models
- Crisis Intervention team (CIT) providing support and additional resources as needed
- CIT Pilot with Police Department for Threat Assessments
- Trauma-Informed Care Training for Officers
 - All "On the Road"/Patrol Officers will be trained by December of 2023
- Work with Anne Arundel County Public Schools (AACPS):
 - Mental Health Task Force
 - Consortium for Coordinated Community Supports

Crisis Response System Services - CIT Assessments



- In FY 23, CIT Assessments were **41%** higher than the previous 5-years' average
- Demand for CIT has increased acuity/threats

Crisis: Jail Diversion

- Established in FY 2015, the program has a 9% Recidivism Rate (RR) (Average RR in MD is approximately 40% for rearrests in the first 3 years post release)
- Pre-trial: Screen positive for Mental Health/Substance Use Disorder
- Develop plan of care in cooperation with criminal justice partners
- Coordinate access to care to eliminate barriers for individuals to promote success (behavioral health treatment, transportation, housing, insurance and benefits)
- Assist individuals with judicial issues to support recovery goals
- Services resumed in-person in the detention centers on April, 1, 2022.









AAC Mental Health Agency in the Community

- Community Engagement
 - More than 60 events in FY 23
 - 30,000+ information items distributed
- Monitors 104 contracts for Mental Health
 Services in the community



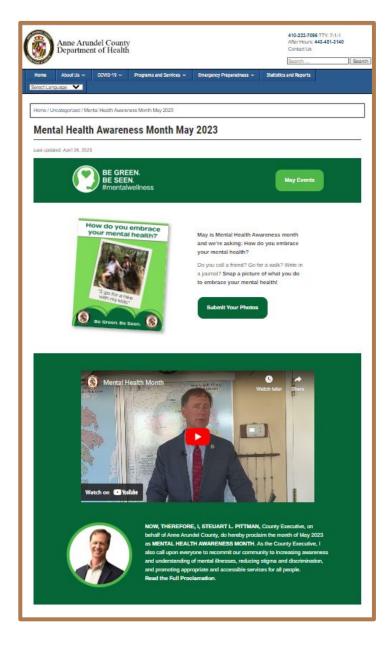
May is Mental Health Month - Community Events

P

- Kick-off event was held on May 6, 2023 Community Family Fun Day - hosted by the Mental Health Agency at Pip Moyer Recreation Center
- UnMasking Older Adult Mental Health Art Exhibit
- BWMC Community Wellness Day
- Wellness Weekend at Downs Park







Mental Health Training

Mental Health First Aid

Identify signs and symptoms of mental illness

- First in the country to train all police officers (now part of curriculum)
- Training to all AACPS administrators and librarians, school nurses, health aides and teachers,
 faith leaders, community organizations and local businesses as requested
- Scholarships for Train the Trainer to increase the number of available trainers

Crisis Intervention Team School

- 40-hour training to prepare police officers in specialized, intense mental health training
- 4 classes per year assisted the AAPD to achieve the One Mind pledge
- More than 10 Law Enforcement agencies from around the State requesting training

In addition...

- Assisting Individuals in Crisis and Group Crisis Intervention 5 Trainings in FY 23
- Applied Suicide Intervention Skills Training (ASIST) 3 Trainings in FY 23
- Train the Trainer Activities Planned



Disease Prevention and Management

- Breast, cervical and lung cancer screenings
- Childhood immunizations
- Chronic disease prevention/Education
- Disease surveillance/Outbreak Management
- HIV/AIDS case management
- HIV/Hep C/STI testing
- Immunization titers
- Quantiferon/TB testing/Treatment and Case
 Management
- Pregnancy testing
- PrEP
- Rabies prevention
- Safe sex kits
- Tobacco cessation/Enforcement
- Vaccines



HIV/STI Prevention and Care Program



HIV/AIDS Case Management

Provides medical, dental, nursing and psychosocial support to people who are living with HIV/AIDS.

From July 1, 2022 - June 30, 2023:

- Served 193 clients
- Enrolled **22** new clients
- Primary HIV Care Clinic (Johns Hopkins Counties Clinic) completed 310 clinic visits
- Johns Hopkins Counties Pap Clinic served 7 clients

FY24 Priorities:

- Obtaining and maintaining insurance coverage.
- Improving long term viral suppression.
- Increase percent of case management clients who are virally suppressed.

Healthy Communities Program

Overview

- Expand public health services at the Department of Health's standing community health centers.
- Health centers include:
 - Glen Burnie Health Center
 - Baymeadow Health Center (provides drive-through)
 - Parole Health Center
 - Lula G. Scott Community Center
 - Magothy Health Center (opening fall 2023)
 - Future Department of Health locations
- Offer mobile public health services to increase access to vulnerable communities.
- Taking public health services into communities to advance health equity.







Services

- TB testing
- Pregnancy testing
- Immunization titers
- Rapid HIV/Hep C/Syphilis testing
- Childhood immunizations
- COVID-19 vaccine
- Community flu vaccine
- Mpox vaccine/testing
- Rabies PrEP
- Tobacco cessation
- PrEP linkage
- Safe sex kits
- Other DOH bureau services

Healthy Communities Program

Mission

Expand access of quality public health services to vulnerable populations by leveraging community partnerships leading to a decrease in health disparities and negative health outcomes.

Purpose

To help community members we previously had not been able to reach and connect them to the care they need to advance health equity.



Main Components

- → Expand public health services at the Department of Health's standing community health centers.
- → Offer mobile public health services to increase access in vulnerable communities



Learn more about the Healthy Communities Program https://youtu.be/96_PoD8_byA

Healthy Communities Program:

AACPS Community Vaccine Partnership

Rising 7th Grade Vaccines for School Year 2023-2024

206 doses administered

Tetanus, diphtheria, pertussis (Tdap) and Meningococcal ACWY (MCV4)

COVID-19 Vaccines for School Year 2023 - 2024

82 vaccines administered

Influenza (2023 - 2024 season)

- FluMist being offered at 33 schools: Title I and community schools
- Injectable flu to be offered at three Special Centers









Healthy Communities Program:

Mobile Clinical Services to Vulnerable Populations

Senior Centers and Senior Housing

- 876 COVID-19 vaccines administered
- 191 Flu vaccines administered
- 11,280 rapid test kits distributed

Homeless Shelters / Recovery Houses / Food Pantries

- 18,751 rapid test kits distributed
- 18,520 KN95 masks distributed

Corrections

- Bi-monthly COVID-19 vaccine clinics administered 47 vaccines
- Jynneos vaccine offered for Mpox, 8 vaccines administered

Homebound - "no arm left behind"

- 339 COVID -19 vaccines administered
- 118 Flu vaccines administered

Vaccine Transfer Program

• 18,591 doses transferred to providers







HIV/STI Prevention and Care Program

Investigation, Prevention and Outreach

- Reduces the rate of HIV, Hepatitis C and sexually transmitted infections (STIs).
- Provides education, outreach, intervention and treatment for STIs.



From July 1, 2022 - June 30, 2023:

- 44 Syphilis cases*; 3 Congenital Syphilis cases
- **281** Gonorrhea cases*
- 651 Chlamydia cases*
- 463 HIV tests; 1 positive HIV case
- Provided 898 safe sex kits
- Referred 683 individuals to STI provider for testing and treatment

FY24 Priorities:

- Increase Congenital Syphilis and Syphilis education and awareness.
- Incorporate rapid Syphilis testing into STI testing services.
- Incorporate HIV/HCV and Syphilis testing into all health centers.

*Available data impacted by State security incident.

Infectious Disease Prevention and Control Program

Epidemiology/Disease Surveillance

Prevents infectious diseases through surveillance of 95 reportable diseases/conditions.

From July 1, 2022 to June 30, 2023:

- 34,716 COVID-19 cases with 18,769 confirmed (PCR), 13,487 probable (POC antigen) and 2,460 suspect (reported home tests)
- 298 outbreaks (254 COVID-19 and 44 other)
- **2,163** other disease investigations
- 1,929 incidences of possible human rabies exposure
- 127 residents completing recommended rabies post-exposure treatment
- 15 animals tested positive for rabies (9 racoons, 3 bats, 1 skunk, 1 cat, 1 fox)

FY24 Priorities

- Provide community based rabies education.
- Provide continued support to both individuals and organizations in our communities regarding emerging infectious diseases.

Infectious Disease Prevention and Control Program

Tuberculosis Control

Provides case management and treatment for confirmed active or latent tuberculosis.

From July 1, 2022 to June 30, 2023:

- 7 new active TB cases
- 32 case contacts evaluated
- 1,372 daily Directly Observed Therapy (DOT and vDOT) visits
- 45 cases of latent TB infection started treatment
- 909 Quantiferon TB tests and 36 TB skin tests





FY24 Priorities

- Provide education to health care providers regarding the importance of reporting and treating latent tuberculosis infection.
- Continue to work with the detention facilities on TB testing and treatment.

OSHA/Employee Health

Oversees employee compliance with OSHA guidelines

From July 1, 2022 to June 30, 2023:

- Provided 195 new employees required
 OSHA trainings
- Began quantitative fit testing of N95
 respirators utilizing the Portacount machine
- 309 employees have been fit tested



Healthy Communities Program: Community Health Centers

Community Health Centers (Glen Burnie, Parole and Lula Scott)

- Vaccine safety net for children and adults by offering Vaccines for Children (VFC)
- Outreach services to immunization-delayed children, residents, schools and private providers
- Provides other crucial public health services to increase access by reducing barriers such as cost, lack of insurance, distance and language for the community

From July 1, 2022 to June 30, 2023 Community Health Centers

- 4,462 children between the ages of 5-18 received vaccinations
- 11,209 vaccinations were provided
- 1,283 flu vaccines were administered
- 267 referrals were given for DOH provided services or other resources
- 84 pregnancy tests with education were administered
- 63 pre-exposure rabies vaccinations were administered
- 14 HIV tests performed

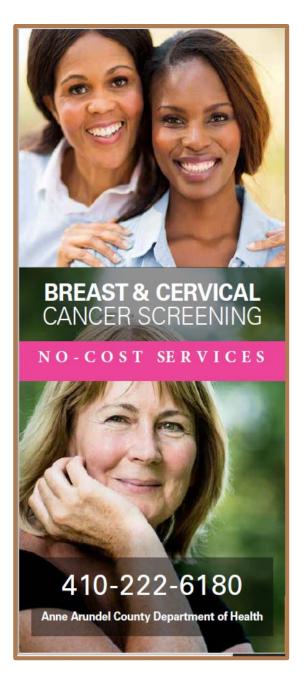


Chronic Disease Prevention Program

- Early detection and referral for treatment of breast, cervical and lung cancers
- Healthy eating education, cancer and tobacco-use prevention
- Tobacco enforcement and cessation programming

Cancer Screening Services from July 1, 2022 to June 30, 2023:

- 1,030 breast and cervical cancer screenings
- 947 clinical breast exams
- **881** mammograms, **7** breast cancer diagnoses
- 442 pap tests, 2 cervical cancer diagnoses
- 410 HPV tests



Chronic Disease Prevention Program

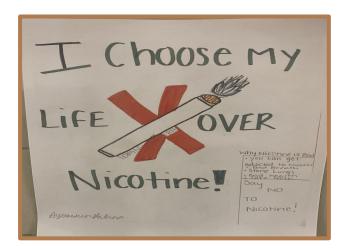
Community Education - Tobacco and Cancer Prevention from July 1, 2022 to June 30, 2023:

- 154 outreach, education, and media events conducted
- 353,436 individuals reached
- 221 participants in smoking cessation activities
- 93 referrals to the Maryland Tobacco Quitline

Partnership with Chronic Disease Prevention Program and AACPS:









Nicotine-free Pledge

Northeast High School



Monarch Academy



Chronic Disease Prevention Program

Community Education - Tobacco Enforcement from July 1, 2022 to June 30, 2023:

- 540 tobacco compliance checks
- 465 retailers passed compliance checks
- 43 retailers issued first time violations
- 32 retailers issued repeat compliance violations
- **136** retailers educated on tobacco sale laws

FY24 Priorities

- Increase clients in lung cancer screening program.
- Reach more African American Women for breast and cervical cancer services.
- Develop vaping and smoking cessation resources for youth.
- Implement Taking Off Pounds Sensibly (TOPS) program.



Brooklyn Park Healthy Food Pantry

- Healthy Food and Health Education
- North County Recreation Center
- Addresses Brooklyn Park residents' limited access to food by providing free fresh fruit and vegetables, meat, dairy and shelf stable foods

July 1, 2022 - June 30, 2023:

- **4,516** families (over **15,972** residents)
- **144,310** pounds of food (over **72** tons)
- 31% was fresh produce (over 21 tons)

FY24 Priorities

Create a Request for Proposals (RFP) and work with a community partner to take over food pantry operations as part of the sustainability plan.



South County Food Assessment - Themes Identified

Accessibility

 Easier access to food markets, health clinics and public transportation.

Diversity

- Wider range of food options, including Hispanic stores and Latino food.
- Services that cater to special needs and bilingual speakers.

Community

- More community spaces that are accessible and safe such as parks, recreation centers and educational centers that encourage physical activity and a sense of togetherness.
- Community-specific food and exercise options.

Next Steps

- Connect with community groups to present report findings.
- Work with community partners to identify potential interventions to implement.
- Research grant funding for future initiatives.

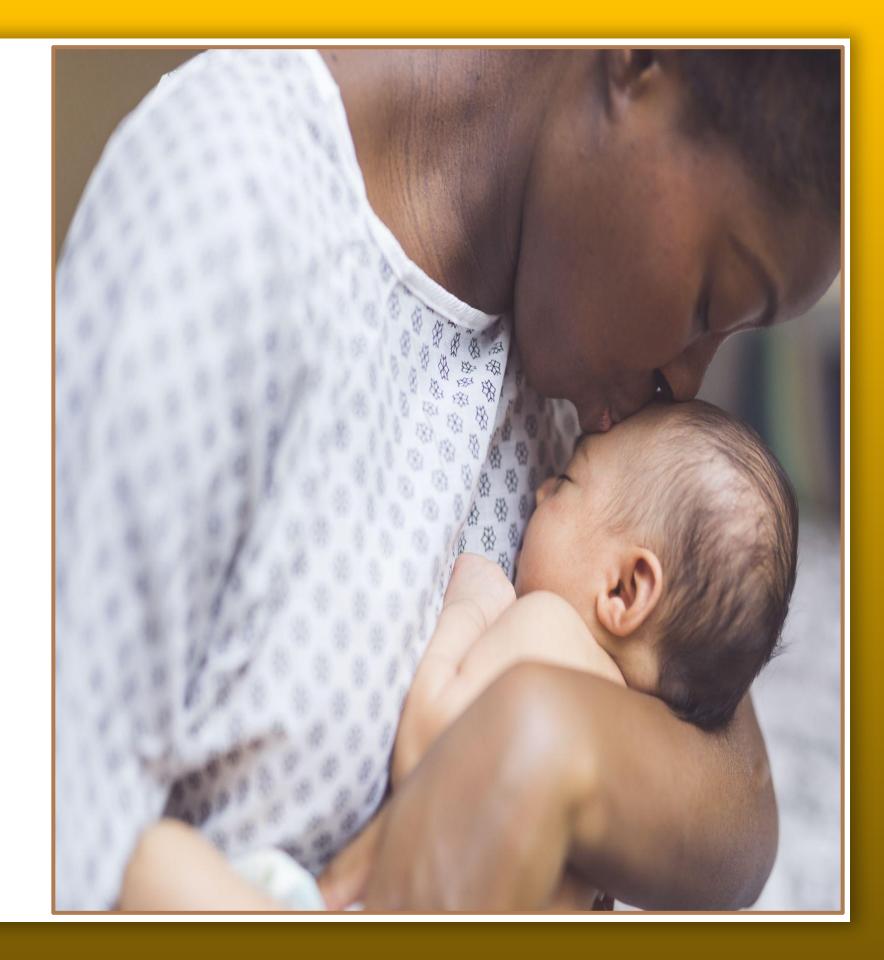
What are the changes that would make it easier for you to eat well and feel healthy?

Top three answers:

- More places to buy food within walking distance to my home
- Make fresh/whole foods at the existing store
- Make fresh/whole foods at stores cheaper

Family Health Services

- Access To Care
- Adult Evaluation and Review
 Services/Nurse Monitoring Services
- Childhood Asthma and Lead
 Environmental Case Management
- Dental Program
- Maternal and Child Health Program
- Medical Assistance Transportation
 Office
- Women, Infants, and Children (WIC)



Healthy Start Home Visiting Program

Provides wrap around support to include:

- Mental health, interpersonal violence prevention, and substance use screening
- Health information
- Referral to community resources and providers
- Parenting education through nurses, parent educators, and mental health therapists
- Referral to peer support for high-risk pregnant, postpartum women, and caregivers with Substance Exposed Newborns (SENs)

During FY 2023, this program served:

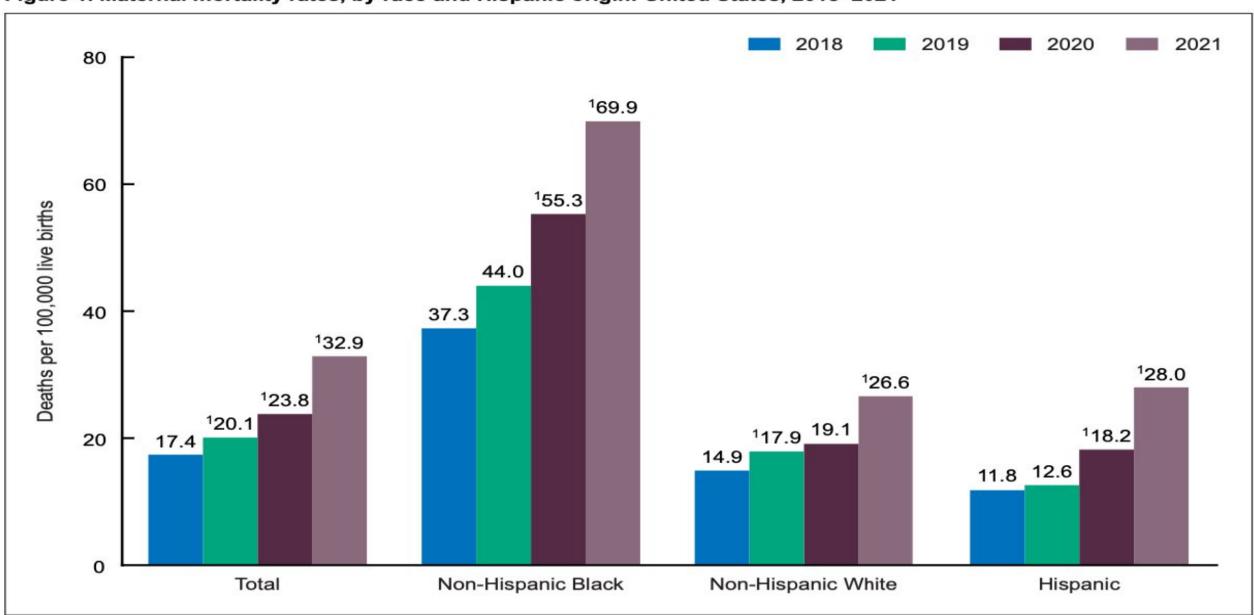
- 17 newly enrolled women with Substance Use Disorder or SENs
- 147 newly enrolled pregnant women, 106 of which resided in high risk census tracts
- 127 newly enrolled infants
- 61 out of 67 babies born weighed more than 5.5 lbs
- 6 babies were born weighing between 2500 and 1500 grams



Maternal Mortality Rates

The Maternal Mortality Rate in the U.S. reached its **peak** in 2021 at **32.9 deaths per 100,000 live births**

Figure 1. Maternal mortality rates, by race and Hispanic origin: United States, 2018–2021



¹Statistically significant increase from previous year (p < 0.05).

NOTE: Race groups are single race.

SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.

Maternal Mortality Rates in Maryland

- In Maryland, there is also a large disparity between the rates among Black non-Hispanic women and White non-Hispanic women.
- In 2020, rates for non-Hispanic Black women were significantly higher than rates for non-Hispanic White and Hispanic women.

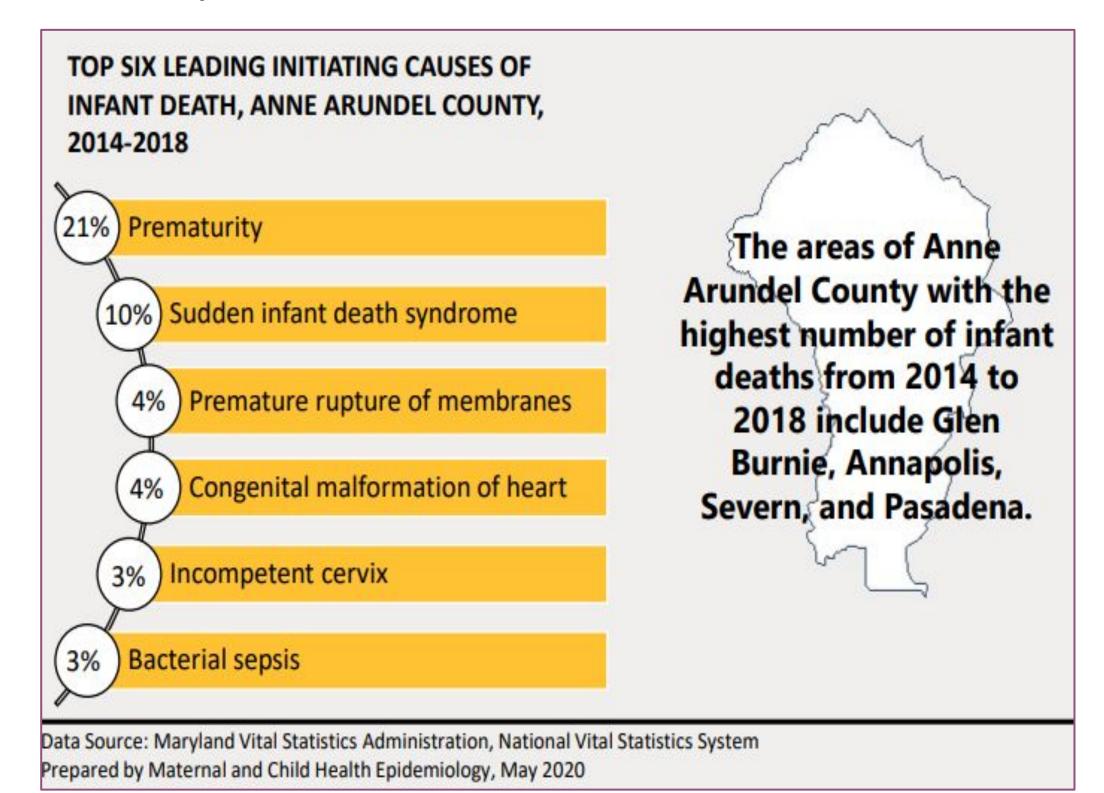
The Maternal Mortality Rate in Maryland for non-Hispanic Black women was 55.3 deaths per 100,000 live births.

This rate is **2.9 times the rate** for non-Hispanic White women.

 The increases from 2019 to 2020 for non-Hispanic Black and Hispanic women were significant.

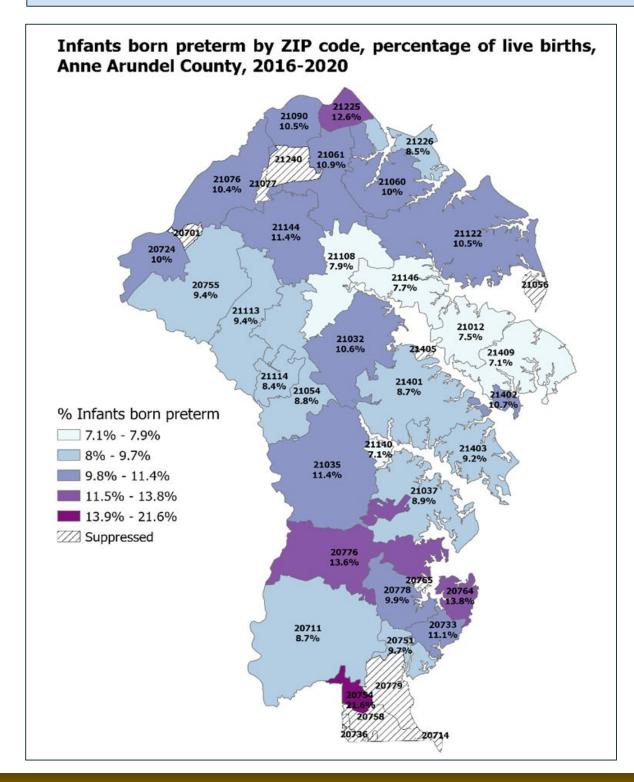


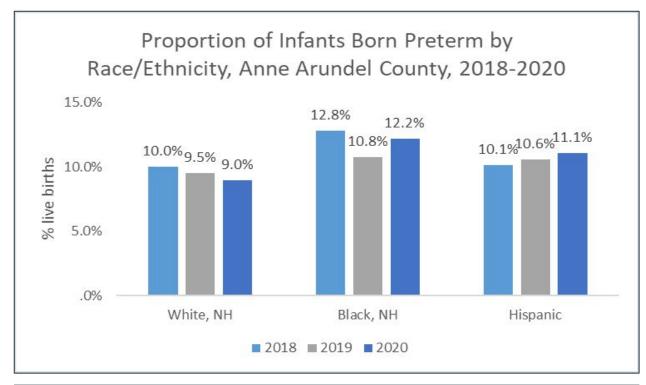
Infant Mortality

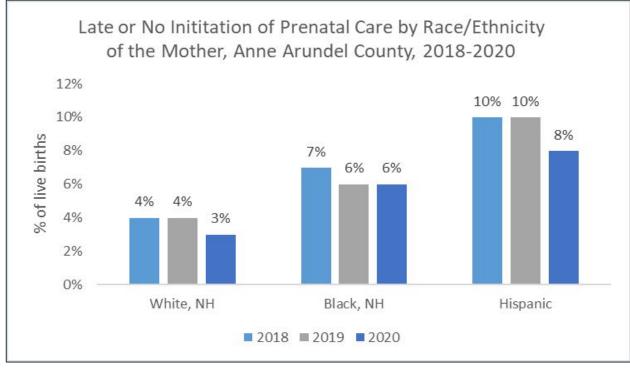


Infant Mortality

Selected Risk Factors for Infant Mortality

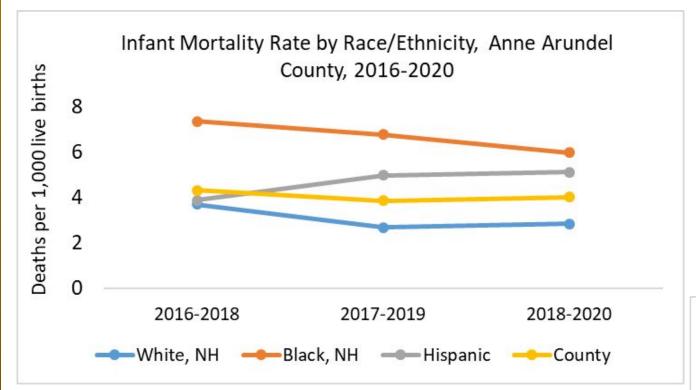


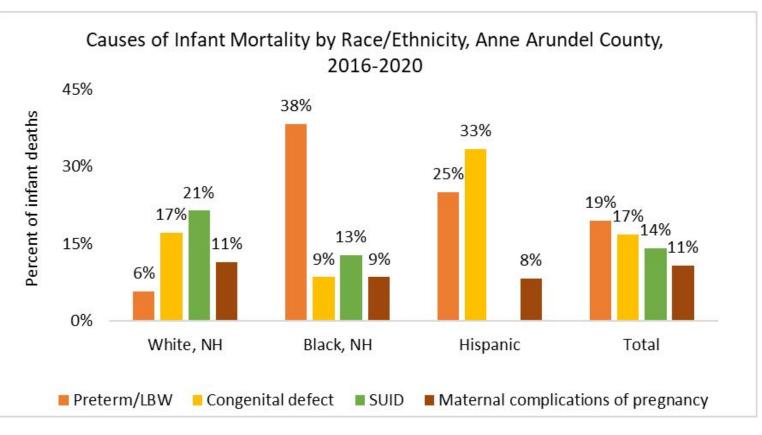




Infant Mortality

Selected Risk Factors for Infant Mortality (continued)





Maternal Health

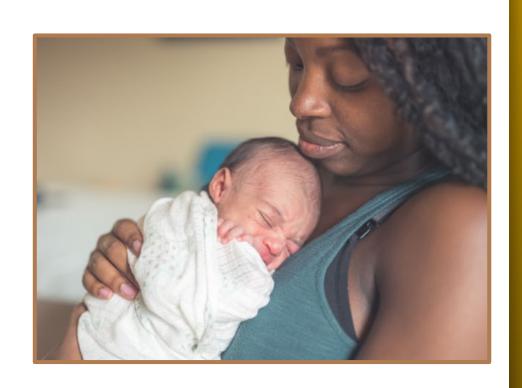
Social determinants of health prevent many people from racial and ethnic minority groups from having fair opportunities for economic, physical and emotional health.

In the U.S., Black women are three times more likely to die from preventable pregnancy-related causes than White women. Multiple factors contribute to these disparities:

- variation in quality health care
- underlying chronic conditions
- structural racism
- implicit bias

The DOH is committed to addressing these disparities head-on. In 2023, the DOH commits to improve maternal outcomes by:

- exploring the use of doulas
- implementing an educational campaign
- performing outreach
- partnering with community members and local providers to form a Maternal Health Task Force



Maternal and Infant Health Task Force

Bringing together stakeholders to identify solutions and improvements for women and infant care in the Anne Arundel County to address health disparities that cause disproportionately poor outcomes for pregnant Black women and their babies.

Chair:

Dr. Tonii Gedin Health Officer AA County

Co-Chair:

Dr. Monica Jones
System Chair of Luminis
Health Women's and
Children Services Line

Group membership to include partners from:

AACDOH Behavioral Health Services

AACDOH Healthy Start

Annapolis Pediatrics

Baltimore Washington Medical Center

Chesapeake Birth and Baby

Department of Social Services

Harbor Hospital

Kingdom Kare

Partnership for Children, Youth, and Families



PSA to raise awareness

Childhood Asthma and Lead Environmental Case Management Program

Asthma

In 2018, children aged 19 and under required emergency interventions at a rate of 7.2 per thousand for asthma-related complications. This program aims to reduce this number by **20%** by **2026** by:

- Home visiting model for 110 families since program began accepting clients in March 2023
- Parenting education to:
 - reduce exposure to tobacco smoke
 - increase caregiver knowledge in managing asthma symptoms
 - increase the use of spacers and controller medication
 - decrease the use of oral steroids
- Address the disparity of Black children requiring emergency care at more than double the rate of the general population

Childhood Asthma and Lead Environmental Case Management Program

Lead

In 2019, only 30% of children under age 6 were tested for serum lead levels. Early interventions help reduce the ill effects of lead exposure in children, this program aims to increase testing to **45**% of children under 6 by **2026**.



79 clients have received home visits to determine the source of exposure and facilitate mitigation strategies

This program will also address the disparity among Asian children exposed to lead due to cultural uses of spices and pottery containing lead.



All children entering a public pre-kindergarten program, kindergarten or first grade are required to have a Maryland Department of Health Blood Lead Testing Certificate completed.

Pediatric Asthma Patients per 1,000 Population With At Least One Emergency Department Visit from 2016-2020 by ZIP Code of Residence, Anne Arundel County 21090 21226 21240 21076 21144 4.4 20724 21108 4.5 20755 3.5 21054 21012 21032 21113 21409 4.3 21114 2.8 **Asthma patients** aged 0-17 years per 1,000 population 1.7 - 2.6 21035 1.7 2.7 - 3.2 3.3 - 3.8 4.6 - 8.1 Suppressed 20776 20711 20751 3.5 4.1

20779

20714

20754

20736

20758

Data source: HSCRC Outpatient Files,

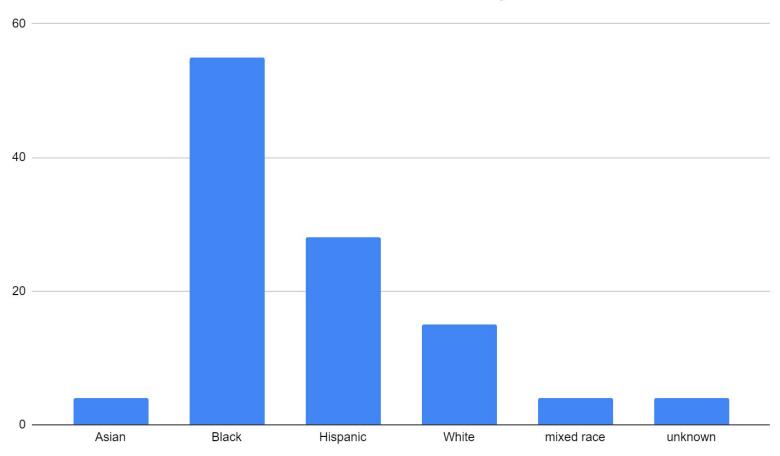
Office of Assessment and Planning

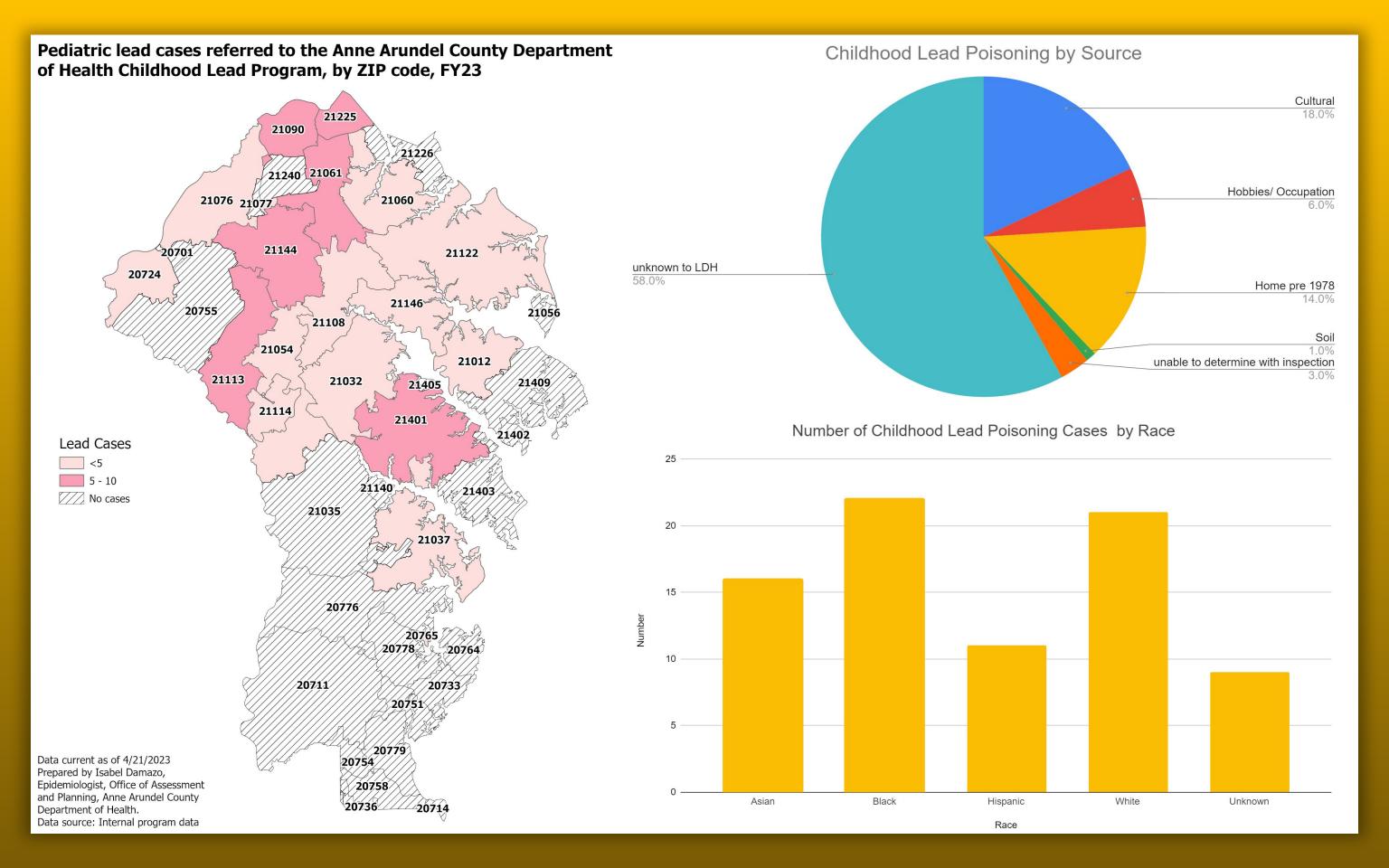
2016-2020; ACS 5-year population estimates

Prepared by Isabel Damazo, Epidemiologist

Black Children in Anne Arundel County are more than 2x more likely to visit the ED for asthma than children of ALL other races/ethnicities combined.







Dental Services

During FY 2023

- 2193 children
- 367 adults
- 74 emergencies
- 88 maternity clients
- 130 immigrant children received services at no cost through ARPA funding
- 429 uninsured adults referred to dental resources for care







Dental Sealant Program

Dental sealants are a quick, easy, and painless way to prevent most of the cavities children get in the permanent back teeth, where 9 out of 10 cavities occur.

- The Blueprint for Maryland's Future initiative at the Kirwan-designated Community Schools focus on providing wraparound services like dental sealants for students
- Screenings performed and sealants applied for children in the 3rd grade at the 15 Community Schools: 237 AACPS school children were treated during the 2022-2023 academic year
- For academic year 2023-2024, this program will be expanded to accommodate for the additional Community Schools
- Clinic staff reports increased uptake by almost 50% among schools served so far this academic year due to increased outreach efforts





REACH

Provides access to low cost primary, preventive and specialty health care to uninsurable, low-income individuals.

In FY23, REACH coordinated care for 1,277 enrolled members and 27 emergency cases for the following services:

Primary Care Adult: 1,683

Primary Care Pediatric: 117

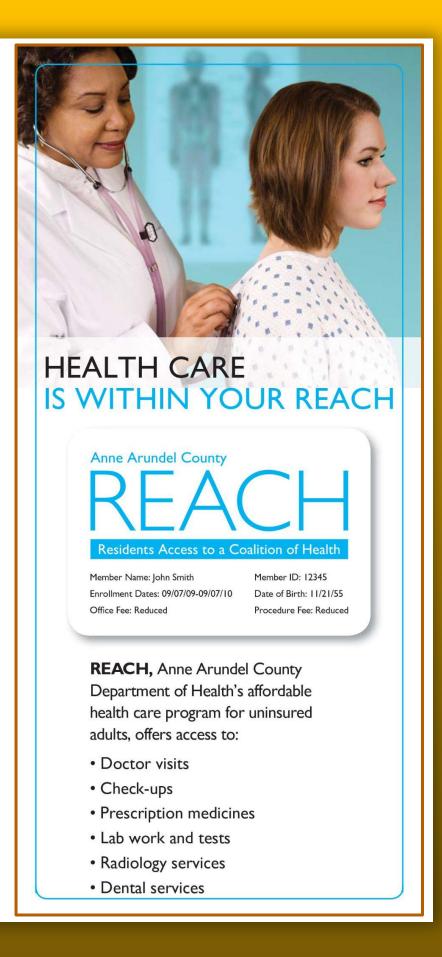
• Specialist: **571**

Emergency Room Visits: 138

Inpatient Hospitalizations: 35

Outpatient: 829

Program enrollment is limited due to the shortage of network providers willing to provide services and REACH staff to coordinate care.



Women, Infants and Children (WIC)

- Provides nutritional counseling and dietary supplements for pregnant and postpartum lowincome women and children.
- Provides lactation counseling and support to nursing mothers.
- Average monthly participation rate is 6,100 individual participants and 4,000 families.
- Locations where services are provided include:
 - Annapolis Health Center (daily)
 - North County Health Services (daily)
 - Lula G. Scott Community Center (biweekly)



AERS and Nurse Monitoring

Adult Evaluation and Review Services (AERS)

- Provide initial comprehensive, annual and significant change evaluations
- Develop a plan of care which recommends services needed to help the individual remain at home in a safe environment

Nurse Monitoring Services (NMS)

- Provide quality oversight by regularly assessing the participants' needs
- Monitor activities of residential service agencies and the health, welfare, and safety of participants enrolled in the program
- Ensure plan of care is implemented in accordance with COMAR regulations and high-quality care

During FY 2023

- AERS completed a total of 1,331 assessments. Of these, 86 were pediatric clients and 53 were PASRR (hospital to nursing home with ID/SMI) clients
- NMS served 636 patients, excluding those who passed away and participants who are dis-enrolled
- Revenue generated from MA, non-MA, and other assessments: \$622,315.05

Medical Assistance (MA) Eligibility Administrative Care Coordination

Health insurance program for Maryland residents with qualifying income

Currently 124,097 county residents receive Medical Assistance benefits.

Medical Assistance Eligibility Program Completed:

- 14,952 verifications
- 2,637 applications from special projects
- 4,193 new Medicaid applications and renewals
- 2,090 applications over the phone, and 1,487 in person, 1,519 by telephone

Services are provided at Annapolis, North County, and South County.

This program has conducted extensive outreach throughout the county to inform the public about changes coming to Medicaid as a result of the end of the Public Health Emergency and Healthy Babies Equity Act

Changes in Medical Assistance (MA)

KEEP YOURSELF INSURED.



End of Public Health Emergency:

- Medicaid Renewals were no longer automatic as they were during the pandemic
- Over 124,000 county residents are in danger of losing MA coverage if they did not renew

Beginning of Healthy Babies Equity Act:

Pregnant Maryland Residents, regardless of immigration status, are entitled to Medicaid coverage from pregnancy through four months post-delivery

AACDOH Response:

- Extensive Outreach
 - Poster campaigns (English and Spanish)
 - Provider and Client education with HERJ
 - Community events
 - Messaging (aahealth.org, social media)
- Increasing capacity for higher case volume
 - Hired and trained 2 new case managers
 - Extended face-to-face office hours

AACDOH Results:

- Disproportionately fewer procedural disenrollments
 - AACo has 8% of MD's Medicaid population, yet only 1% of the recipients dropped were residents
 - ZIP codes most affected:
 - **21061**
 - **21060**
- Serving 450 new Healthy Babies Equity
 Act Recipients since July 2023

Medical Assistance Transportation (MAT)

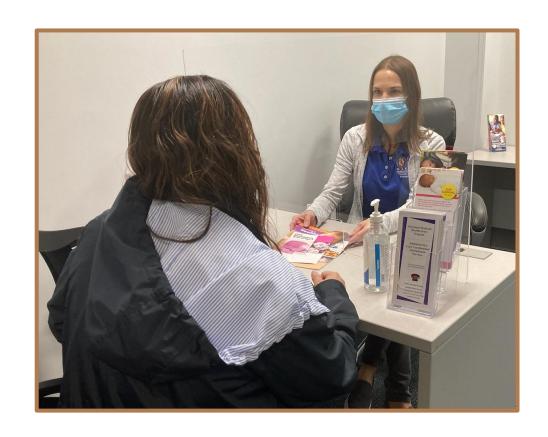
- MAT provides non-emergency transportation to Medicaid covered medical services.
- In FY23 the program saw a slight increase in service utilization over previous years as pandemic restrictions were lifted and adult dental eligibility was added.
- From July 1, 2022 March 31, 2023:
 - 2104 clients screened and scheduled for transportation
 - 1257 of the clients were new to MAT
 - Provided 45,696 rides to medically necessary appointments
 - 91 of these were adult clients who needed transportation to dental services, a new eligibility



Administrative Care Coordination Program

- Educates and helps MA recipients to navigate the Medical Assistance system
- Received 2,393 unduplicated referrals in FY23
- Received 1,474 prenatal risks assessments and 198 infant referrals
- Responded to more than 9,200 telephone calls/emails/texts
- Spanish-speaking clients accounted for 24% of our business





School Health

Program Overview

School Nursing Programs

- Health Services
- Screening Teens to Access Recovery (STAR)/Opioid Awareness and Overdose Prevention
- Telehealth

Support Programs

- Birth to Five
- Vision and Screening
- Audiology





Accomplishments

- → Total Health Room visits = **585,433**
- → Crisis Intervention = **11,560**
- → Health Screenings = **55,636**
- → Provided Health Education = 27,656+ students
- → Conferences with student, parent and AACPS staff = 21,112
- → Home Visits = **62**







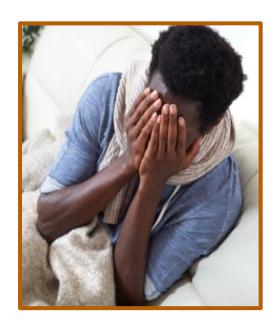
Chronic Health Conditions 2022-2023

- Anaphylaxis 2,851
- Asthma − 3,814
- Diabetes:
 - Type I = 228
 - Type II = 27

- Seizure Disorders 428
- Heart Conditions 286
- Mental Health Disorders 4,074
- Other Chronic Conditions 1,204







School Health Screening Teens to Access Recovery

The STAR Program allows school health nurses to utilize technology to connect middle school and high school students to a tele-session with a licensed therapist. Sessions take place through a secure portal to ensure privacy.



The STAR program is now in every AACPS Middle and High School.

So far the program has screened:

- High School Students = 36
- Middle School Students = 3



School Health - AACPS Community Schools

New Initiative School Year 2023-2024

Telehealth Model:

Department of Health, AACPS, Total Healthcare (Federally Qualified Health Center)

Pilot Program Launching at Tyler Heights and Van Bokkelen Elementary Schools

It offers:

- Increased Access to Care
- Less missed school time
- Less missed work time
- Prescriptions delivered to student's home



Teleconference visits between medical provider and parent, facilitated by school nurse Goal is to Expand this Telehealth Model to All Community Schools

Birth to Five Program: Infants and Toddlers: birth - 2 years, Child Find: 3-5 years

Goals: Eliminating health barriers and ensuring school readiness



Services: July 1, 2022- June 30, 2023

- Assessments 34
- IFSP/IEP Plan meetings 69
- Home Visits 14

Other Services:

- Developmental support services
- Liaison with medical specialists
- Care coordination
- Referrals

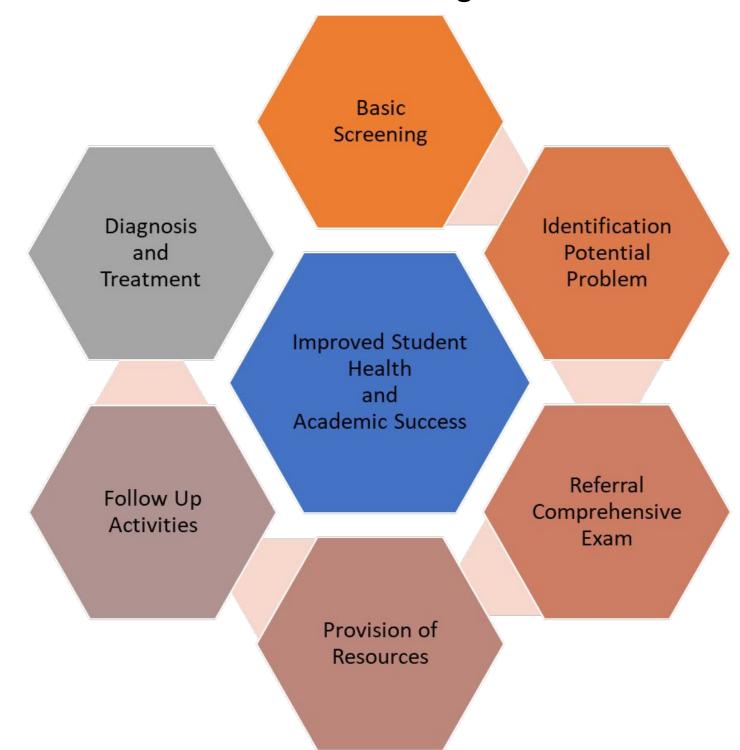
For all Anne Arundel County children and families with qualifying delays or disabilities

School Health - Vision and Hearing Screening Program

Eliminating the barriers hearing or vision loss have on a student accessing their education







School Health - Vision Screenings Follow Up Rates

AACO Vision Screening Program: July 1, 2022- June 30, 2023

60% Received Confirmed Follow Up Exams:

- Ophthalmologist or optometrist
- Glasses or treatment, if needed

40% Did Not Receive Confirmed Follow Up Care:

- Continued parent outreach
- Collaboration with school teams
- Resources
- Students re-screened next school year

26,944

Total Screened for Vision

3,497

Total Referred

2,100

Total Confirmed Exams





School Health - Follow-Up Rates

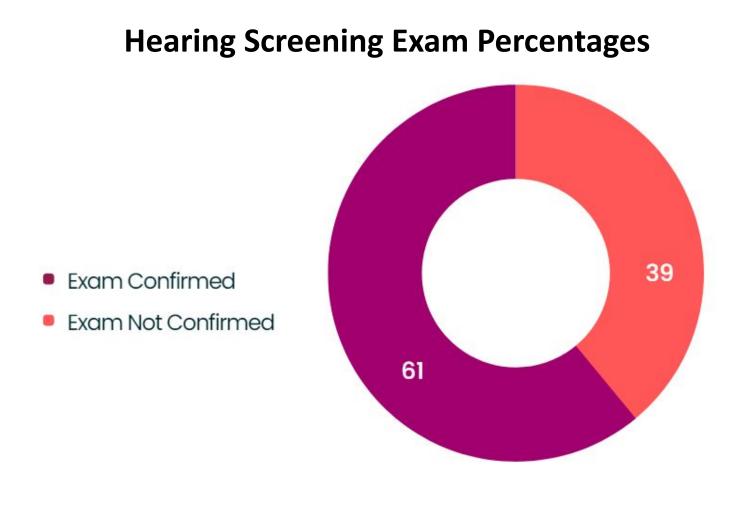
Hearing Screening Program: July 1, 2022- June 30, 2023

61% Received Confirmed Follow Up Exams:

- Primary Care Provider
- ENT or Audiologist
- Treatment or hearing aids, if needed

39% Did Not Receive Confirmed Follow Up Care:

- Continued parent outreach
- Collaboration with school teams
- Resources
- Students re-screened next school year



26,943

Total Screened for Hearing

561

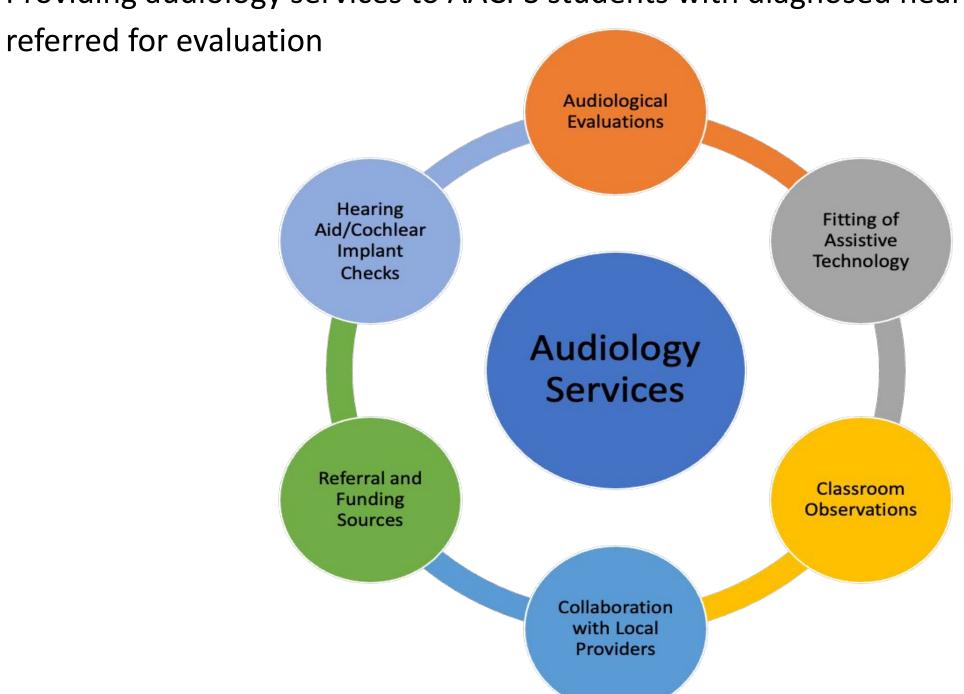
Total Referred

340

Total Confirmed Exams

Audiology Program- July 1, 2022- June 30, 2023

Providing audiology services to AACPS students with diagnosed hearing loss or



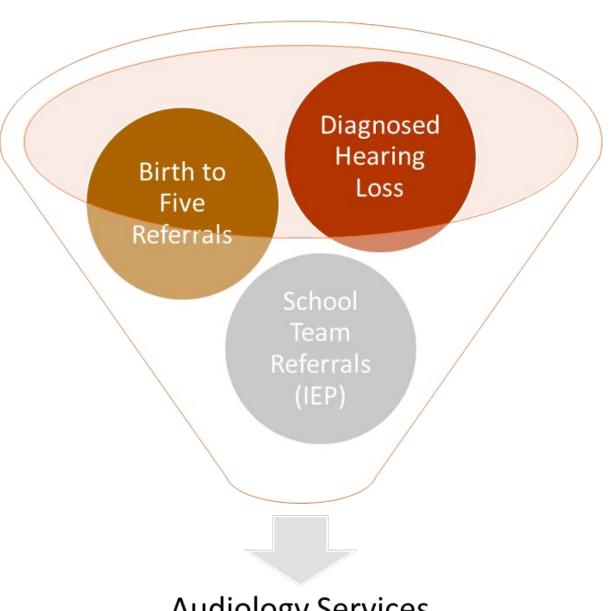




Audiology Program - July 1, 2022- June 30, 2023

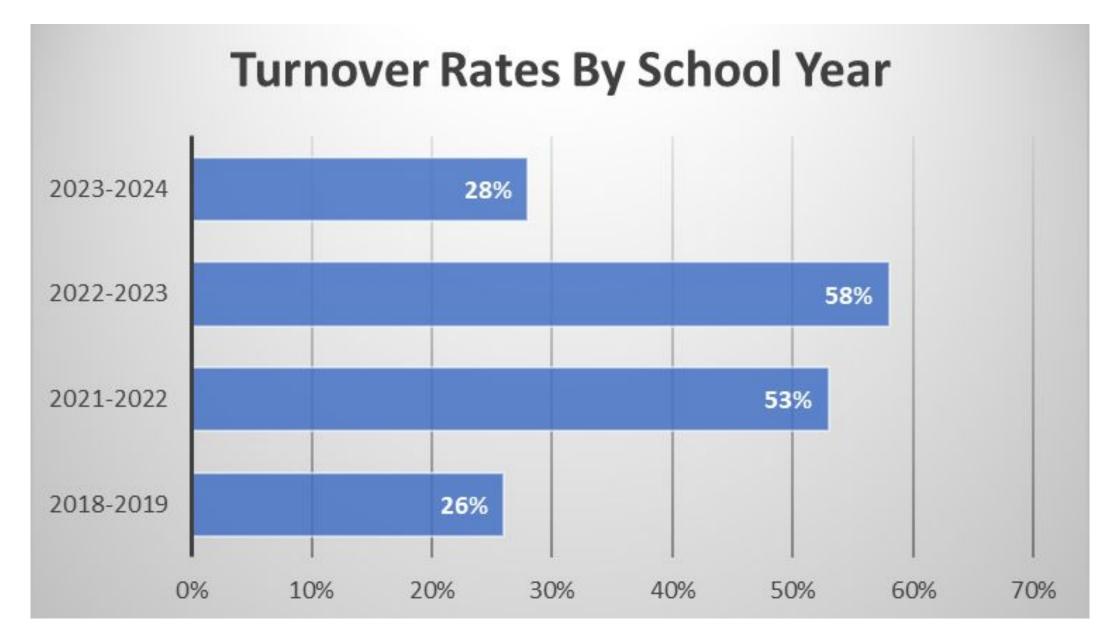
Caseload: 370 students

- 2,247 Meetings (IEP/IFSP/504)
- 101 In-Services (Parent/Teacher)
- 51 Clinic Appointments
- 54 Student Observations
- 231 Equipment Checks



Audiology Services
Caseload

Challenges-Record High Turnover Rates



Out of School Health's 314.7 FTEs, 217 employees have resigned in the last 15 months

Note: School years 2019-2020/2020-2021 were not included in this chart due to school closures from the COVID pandemic

School Health Services

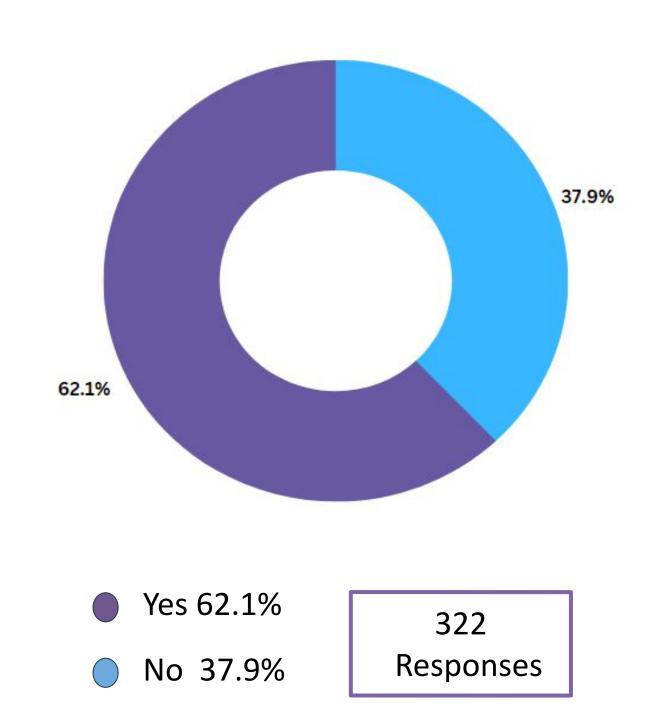
Employee Survey, June 2023 - Benefits

- → Surveyed all School Health staff
- → Issues of most importance- Salary and Benefits

Employees were asked:

County Merit employees receive retirement benefits (pension plan and retiree health insurance), as well as paid holidays, paid time off, rollover leave and access to an employee assistance program.

Due to the expense of adding these benefits for employees, salary increase percentages would be impacted. Given this fact, would you prefer to have retirement benefits even if it meant that annual salaries might be less than if no retirement benefits were offered?



Recruiting, hiring and training

Recruitment Efforts

- Hosted six job fairs
- Participated 17 recruitment events
- Weekly School Health info sessions
- AACPS Listening Sessions
- Social Media advertising
- Targeted direct mail
- Recruitment videos

Recruitment Stats



2,798 Applications



13,875 Contacts



854 Interviews



Total of 122 staff hired

July 1, 2022-June 30, 2023

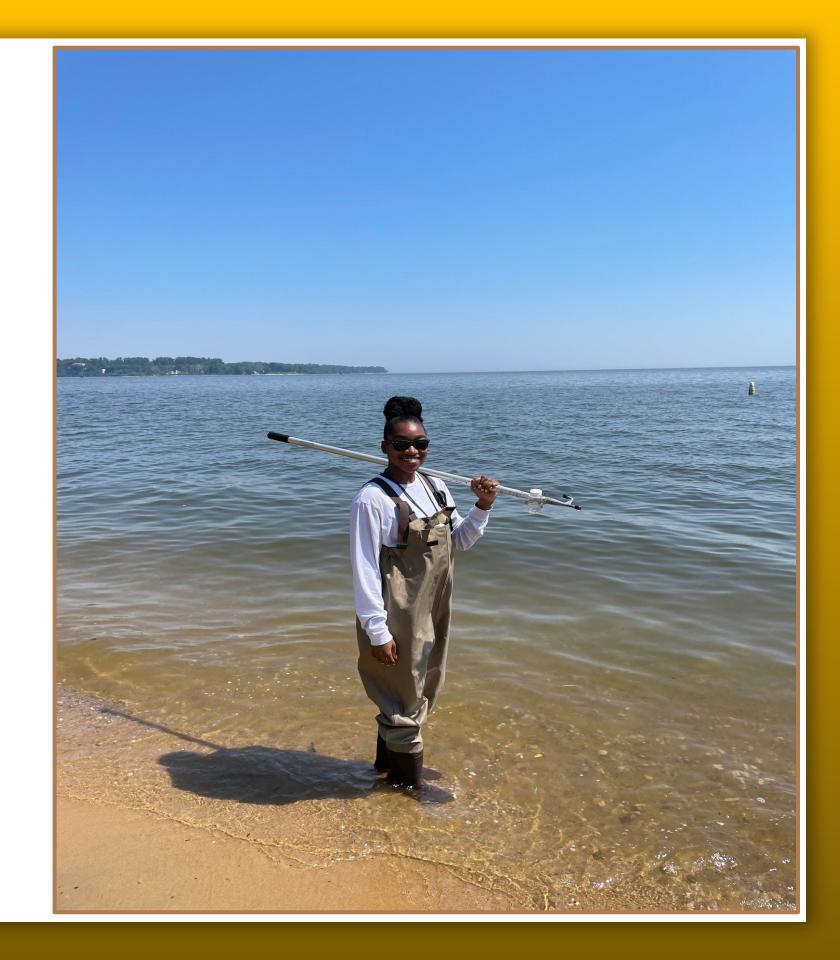
Training

Total Staff Completed Orientation - 100

- o RNs 55
- Health Assistants 41
- LPNs 4

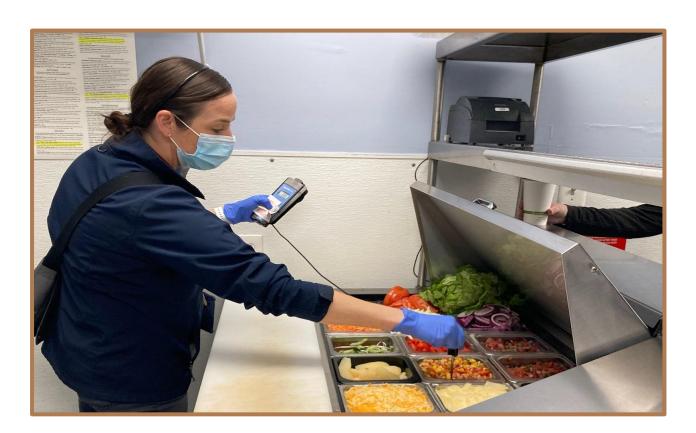
Environmental Health

- Bay Restoration Fund
- Financial Assistance for Environmental Programs
- Food Inspection and Regulation
- Housing Inspection
- Public Swimming Pools/Spas
- Rabies Prevention (ORV)
- Recreational Water Quality
- Rodent Control
- Wells and Septic
- Wildlife Control



Environmental Health: Food Protection Services

- Responsible for the licensing and/or inspection of all food service facilities: restaurants, grocery stores, bars, mobile food trucks, bed and breakfasts and temporary events
- Respond to complaints of food service facilities not operating properly or in a sanitary manner
- Provide guidance to food service facilities on operating safely during the pandemic



Food Service Facility Inspections

- 5,320 inspections at more than 2,900 licensed food service facilities from 7/1/2022 through 6/30/2023
- **3,337** routine inspections on permanent food service facilities (63% of the COMAR 10.15.03 mandate)
- 639 re-inspections on permanent food service facilities to ensure correction of critical item violations or numerous minor violations cited
- 816 complaint investigations and miscellaneous inspections for licensed and illegally operating food service facilities
- 202 routine inspections and re-inspections on mobile and temporary food service facilities
- 326 pre-opening/opening inspections for new and remodeled facilities









Rodent Control Program

In 2023, services were expand to include three City of Annapolis communities:

- → Eastport Terrace
- → Harbour House
- → Robinwood
- Communities with the most complaints are surveyed for rodents and issues that can lead to rodents
- Surveys are performed from June October
- Educational materials are provided when contributing factors are found (improper trash storage, exterior maintenance) that could lead to rodent harborage
- Free pesticide services are provided when rodent harborage is found and no contributing factors exist
- Contributing factors must be eliminated prior to pesticide services being offered
- If contributing factors are not eliminated by the end of the assessment period, enforcement actions are taken







Rodent Control Program (2023 Season)

- 6521 properties were selected to be surveyed from June October
- 489 free pesticide services were provided
- As of 9/8/2023 4158 property assessments have been performed. 1235 violations were found and investigated on 1115 properties. Some properties had multiple violations. The violations consisted of 505 rodents, 137 improper trash storage and 304 exterior maintenance violations. 349 pesticide service referrals have been made



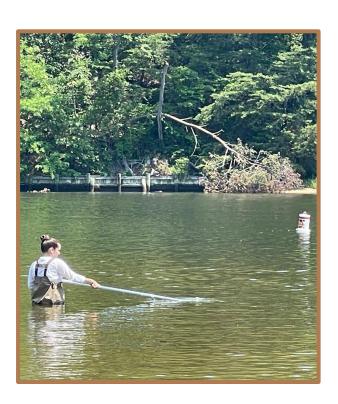


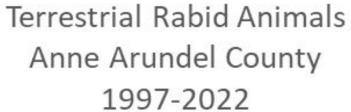
Beaches Program

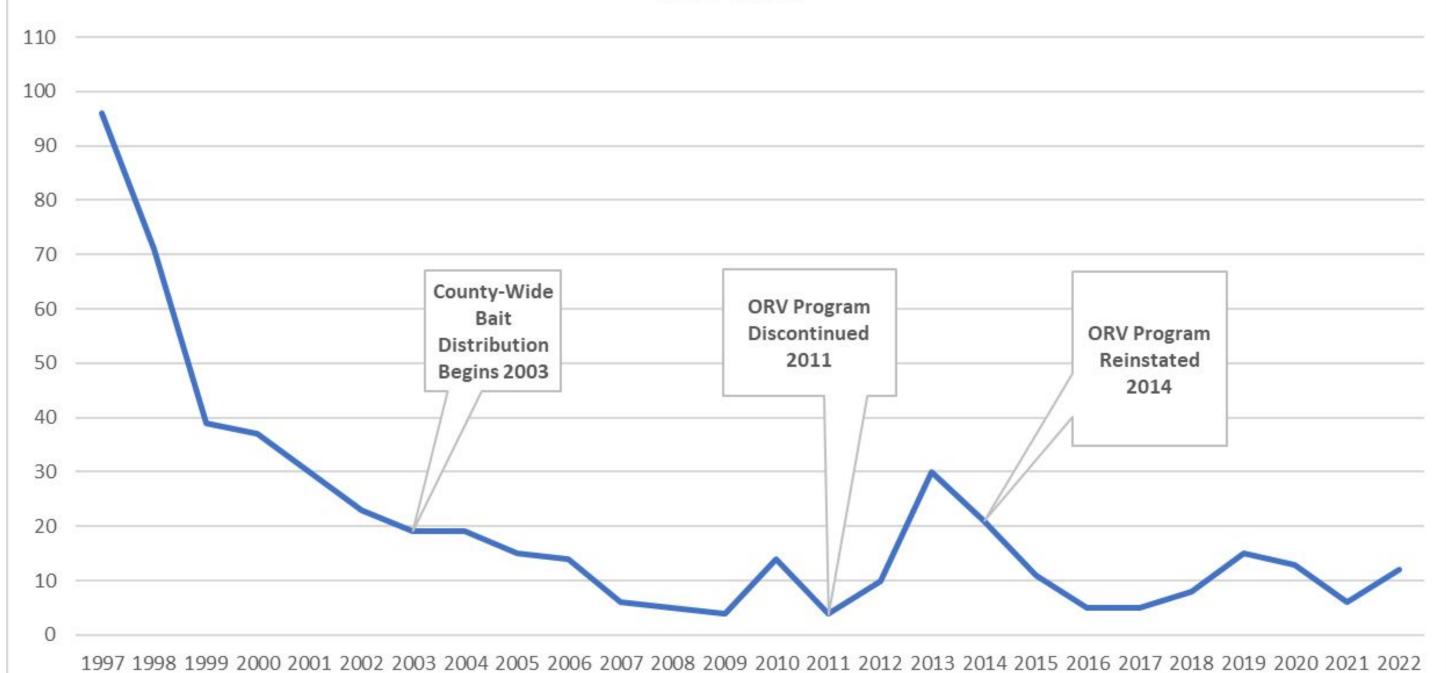
- Environmental Health samples 80 community beaches from Memorial Day Labor Day
- If samples show an exceedance of the EPA acceptable level of enterococci an advisory is posted advising against swimming and no direct water contact
- All public sewage spills into a waterway are posted advising against swimming and no direct water contact until enterococci levels are acceptable
- There is a preemptive rainfall advisory against no swimming/no direct water contact for at least
 48 hours after a rainfall due to predicted high bacteria levels











Oral Rabies Vaccination Program

In 1997, Anne Arundel County had the highest number of terrestrial rabid animals in Maryland with 97.

- 1998 A piloted Oral Rabies Vaccination (ORV) program began on the Annapolis Peninsula.
- After successfully expanding the program to Gibson Island and the Broadneck Peninsula, the program goes countywide.
- Federal grant funding is eliminated due to funding. At the time, AA County only had 4 rabid animals.
- No vaccines were distributed. By the end of 2013 the total number had increased to 30 rabid animals, including 27 raccoons.
- Funding was included in health operating budget and vaccine was distributed again.
- Rabid animals were down to 5, including 4 raccoons.
- In 2023 there are currently 8 rabid raccoons, 1 rabid fox and 2 rabid bats.



Oral Rabies Vaccination Program (ORV)

- 84,540 vaccines have been distributed by air and ground teams
- The Anne Arundel County Police helicopter is utilized to distribute vaccines by air
- The Police partners in making this program successful in distributing a large amount of vaccine by air
- This is performed in the large, wooded areas that are undeveloped







Water Wells and Onsite Sewage Disposal Systems

- Approximately 48,000 properties are served by private water wells and 41,000 by onsite disposal systems.
- 399 permits were issued from July 1, 2022 to June 30, 2023 for private water wells.
 Restrictions and requirements for drilling are made including depth and grouting of the well.
 The water is tested before the well is certified for potability.
- 385 applications to construct onsite disposal systems were approved from July 1, 2022 to June 30, 2023. The type of system is based on the soil evaluation and expected water use of the dwelling.
- Best Available Technology (BAT) for Nitrogen reduction is required for septic systems at properties in the Critical area and the Bog contributing area.







Bay Restoration Fund

- Seeks to improve water quality in the bay by reducing nutrient runoff, especially nitrogen, that lead to algal blooms
- For FY 2023, the Department of Health had \$2.95 million, and funded:
 - 18 public sewer connections
 - 158 BAT (Best Available Technology) installations
- For FY 2024, the Department has received \$2.5 million



MORE PORTON



aahealth.org



aahealth.org/covid19data



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THANK YOU!