

Anne Arundel County Board of Health Presentation

Dr. Tonii Gedin, RN, DNP
Health Officer

Anne Arundel County Department of Health

October 15, 2024

Anne Arundel County Council
Annapolis, Maryland



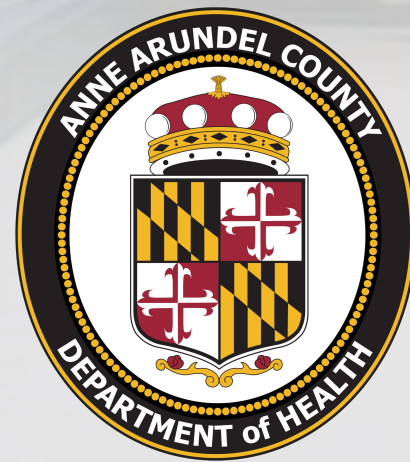
Mission and Vision

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
- Dr. Oluwafunmilola T. Bada: Deputy Health Officer, Public Health
- Shawn Cain: Deputy Health Officer, 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: \$93,100,000 FY25

Employees: 922 budgeted positions | 93 currently vacant positions

DOH Offices:

Annapolis Health Center (DOH Headquarters) | B&A Boulevard | 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:

AAHealth.org/strategic-plan



Anne Arundel County Department of Health: Programs and Services



What's New at DOH

Viral Respiratory Dashboard





New online tool:

- Offers transparency
- Allows residents to view data
- Shows how we collect data
- Is updated weekly

The dashboard shares data from:

- Wastewater Activity Levels
- Emergency departments and Urgent Care facilities
- COVID-19 Cases and Deaths
- COVID-19 Hospitalizations
- Influenza Hospitalizations
- RSV Hospitalizations
- Vaccinations

Offers data on:

-  Influenza (Flu)
-  COVID-19
-  Pneumonia
-  RSV

View at:

AAHealth.org/viral-respiratory-illness

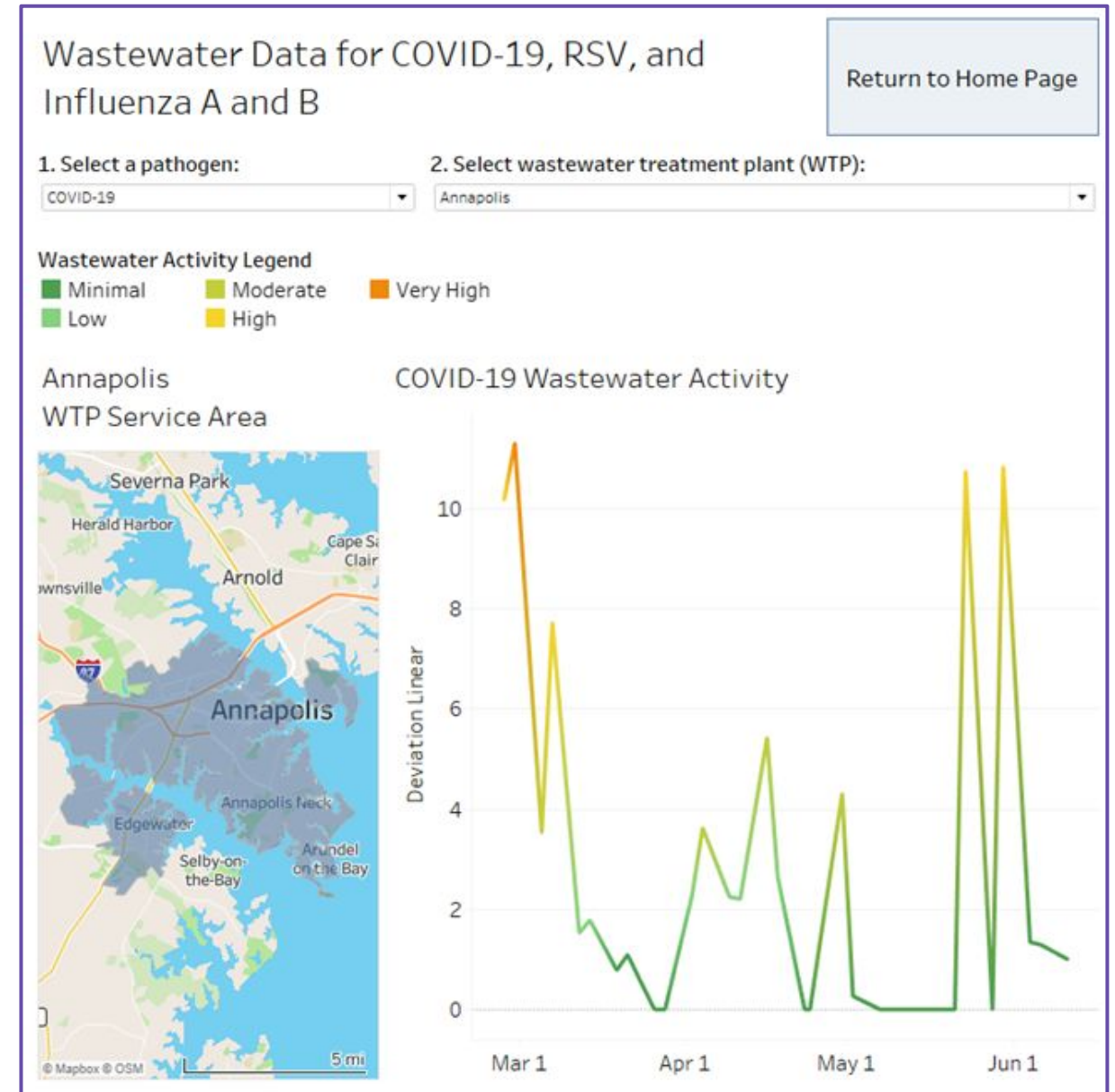


Sources:

- Maryland Department of Health
- Chesapeake Regional Information System for our Patients
- Emerging Infections Program
- FluWatch, Maryland immuNet

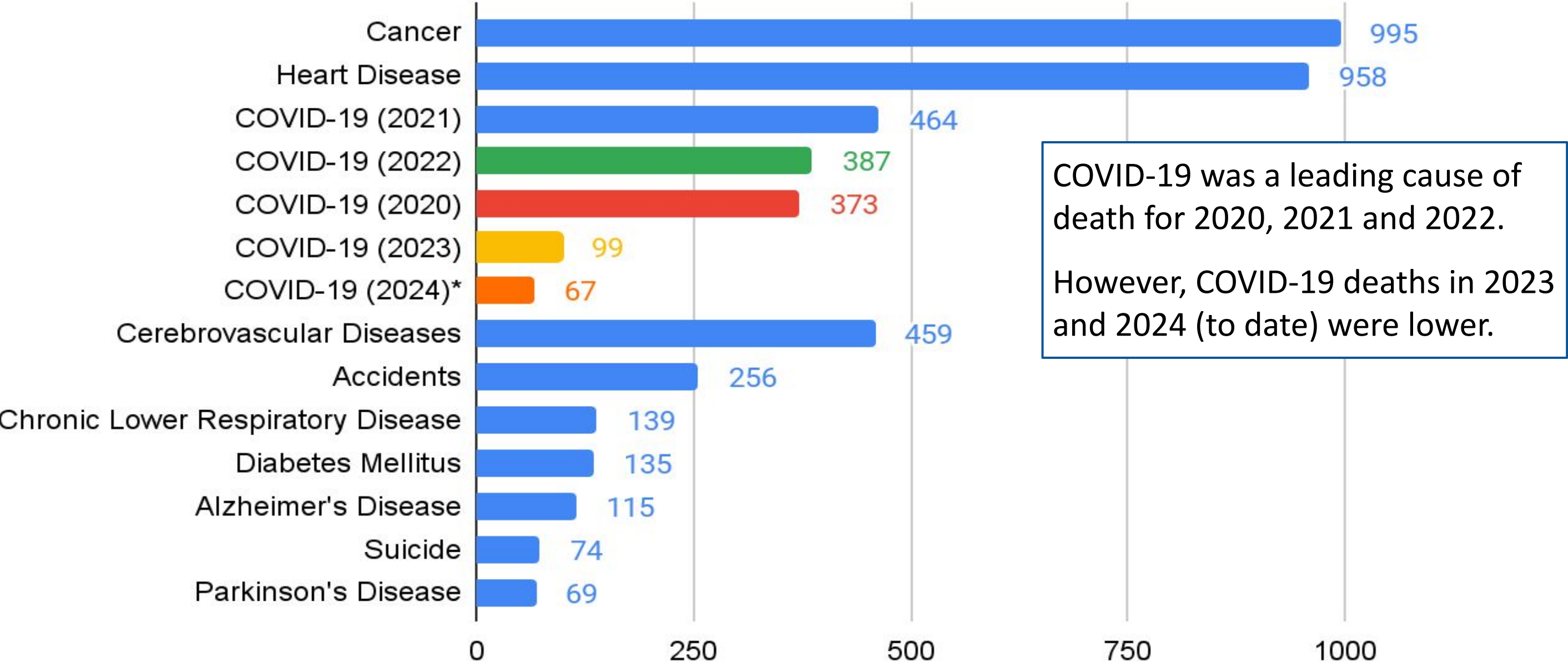
Wastewater Monitoring: Beyond COVID-19

- Using wastewater for disease surveillance continues to evolve and the DOH is in the process of updating how we analyze wastewater data based on the latest methods.
- The DOH is expanding wastewater monitoring to include flu and RSV in a new Viral Respiratory Illness Dashboard.
- The dashboard also includes data on vaccinations, hospitalizations, and emergency department and urgent care visits for these illnesses.



Leading Cause of Death in Anne Arundel County

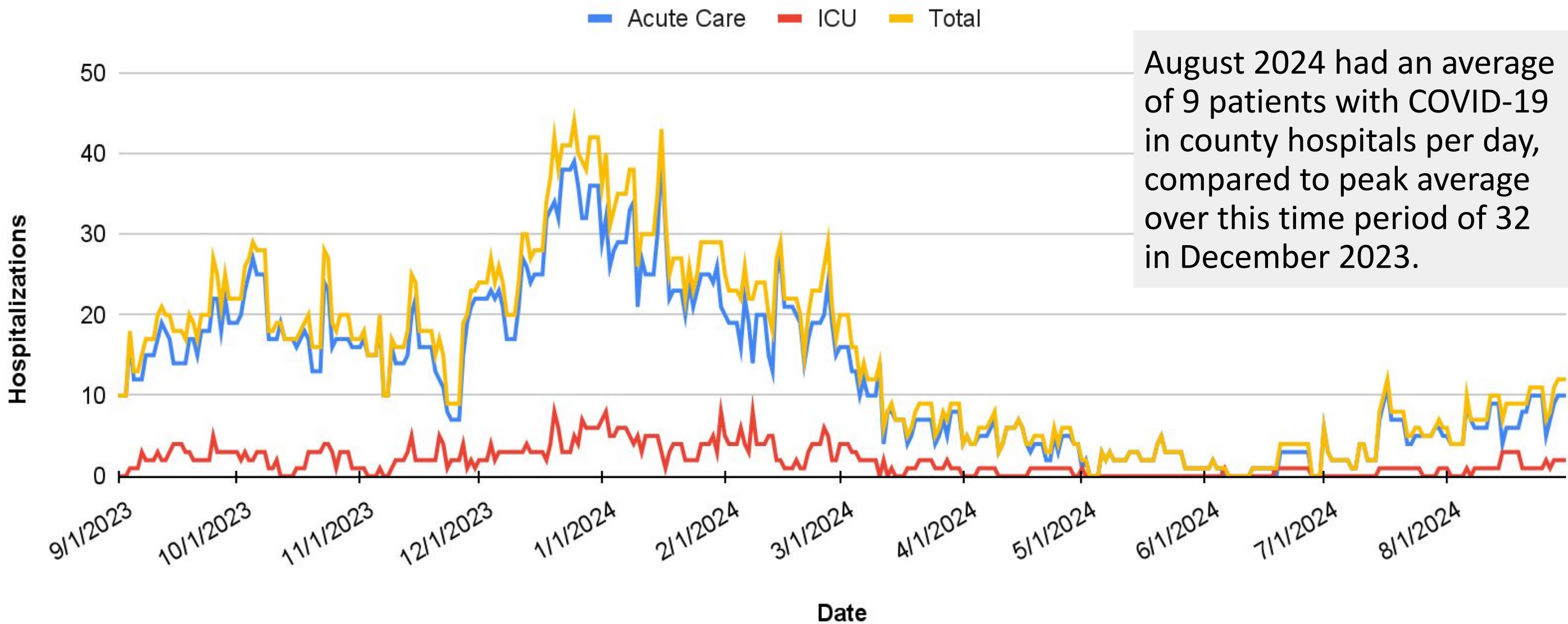
COVID-19 Deaths Compared to Leading Causes of Death (2021), Anne Arundel County



*Through 9/16/2024
Source: Maryland Vital Statistics Administration Yearly Death Files, 2020; COVID-19 Deaths Files as of 9/16/2024

COVID-19 Hospitalizations

COVID-19 Hospitalizations, Anne Arundel County, September 2023 - August 2024



Source: Chesapeake Regional Information System for our Patients (CRISP) as of 9/18/2024
Hospitalizations may be an undercount due to reporting issues after April 2024.

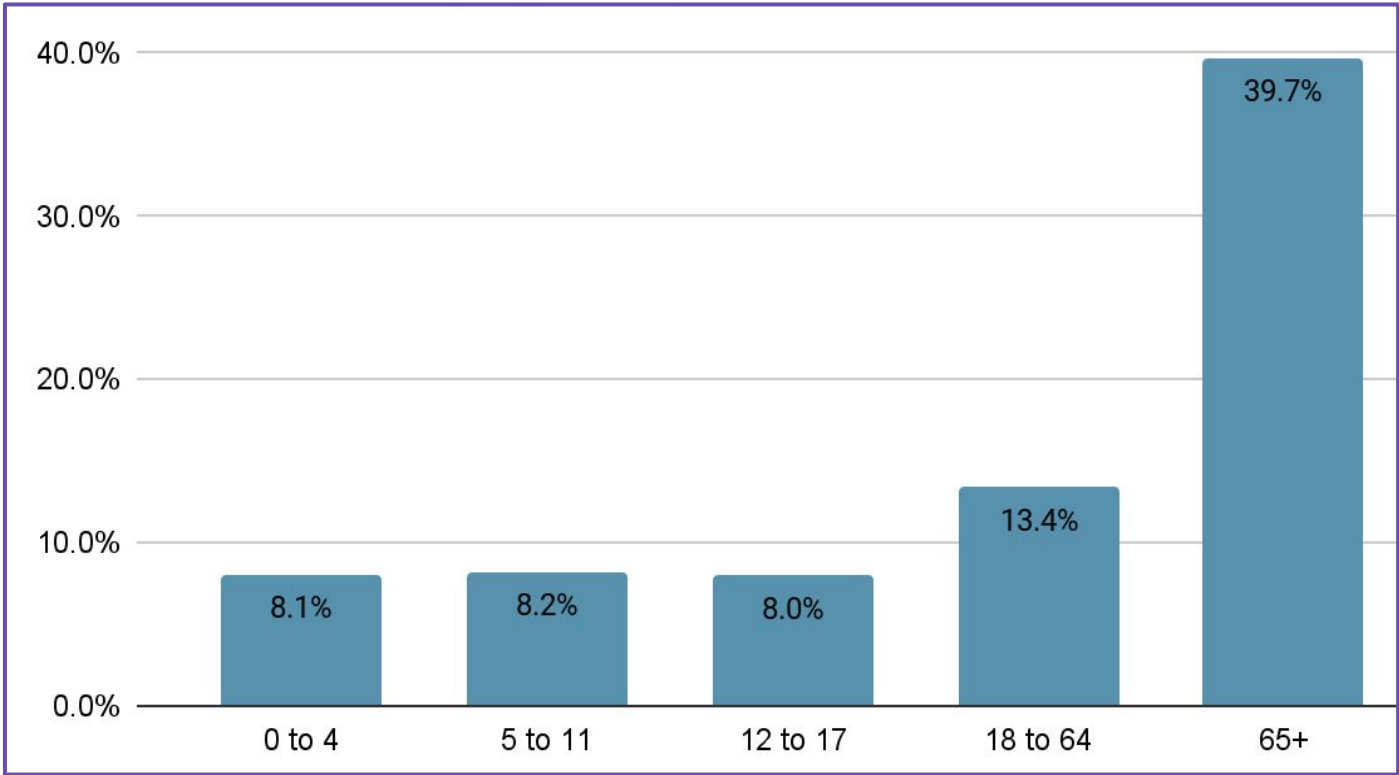
COVID-19 Vaccinations

73% of Anne Arundel County residents completed their primary series, and **16%** of residents have received the 2023-2024 formula.

Anne Arundel County Resident COVID-19 Vaccination Totals

	Doses Administered	Percent of Population (593,286)	Doses Administered by DOH	Percent of Population (593,286)
Primary Series Complete	430,316	72.5%	78,238	13.2%
2023-2024 Formula Additional Dose	94,220	15.9%	263	0.0%

Percent of County Residents Vaccinated with Updated COVID-19 Formula (2023-2024) by Age Group



40% of county residents ages 65+ have received a current booster.

*Data as of September 5, 2024, Maryland ImmuNet (does not include vaccinations through federal entities)

Influenza in Anne Arundel County



Vaccinations

County population with influenza vaccination per season:

- 2023-2024: 36.0%
- 2022-2023: 37.5%
- 2021-2022: 36.4%
- 2020-2021: 35.8%



Hospitalizations

2023-2024

11,809 with Influenza like illness

- Over half of these visits were made by ages 18-64 (52.5%), about 40% were for ages 0-17.
- Black, Non-Hispanic were overrepresented for visits at 29.3%, and Hispanic residents were overrepresented at 13.6%

2022-2023

11,892 visits by residents to Maryland Emergency Departments and select Urgent Cares

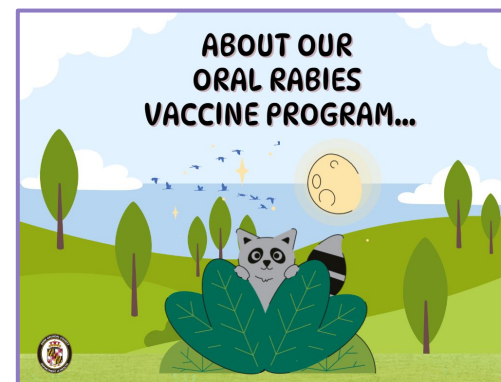
What's New at DOH

Oral Rabies Vaccine Program

So far in 2024, the county has had five rabid raccoons and three rabid bats. Baiting for the ORV began this month. This year:

- 90,720 vaccines will be distributed by air and ground
- AACo Police helicopter is utilized to distribute vaccines by air
- AACo Police partners and is essential in making program successful in distributing large amount of vaccine by air
- Performed in large, wooded areas that are undeveloped
- DOH has an increase of residents reaching out reporting wild animals on their property

New campaigns in circulation to make residents aware of rabies and [ORV program](#).



What's New at DOH

School Health Expansions

Telehealth

Launching this school year at the following schools:

- Van Bokkelen Elementary - October 2024
- Maryland City Elementary - November 2024
- Belle Grove Elementary - January 2025
- Park Elementary - To be determined





School-Based Health Center Planning Grant

- Purpose** - From the perspective of School Health staff we were able to:
1. Assess the perceived health needs and barriers of students and families
 2. Identify specific regions most in need of additional resources
 3. Gain early buy-in from School Health staff for the future success of School-Based Health Center implementation

School Health

School-Based Health Centers

-  Provide comprehensive primary, acute and preventative health services to students, families and communities in clinics physically located on a school campus.
-  Known to improve both the health and educational outcomes of students.

Awarded \$100,000 for a Maryland School-Based Health Center Planning Grant

\$100,000 awarded the first year

- Steering committee
- Focus groups
- Community needs assessment

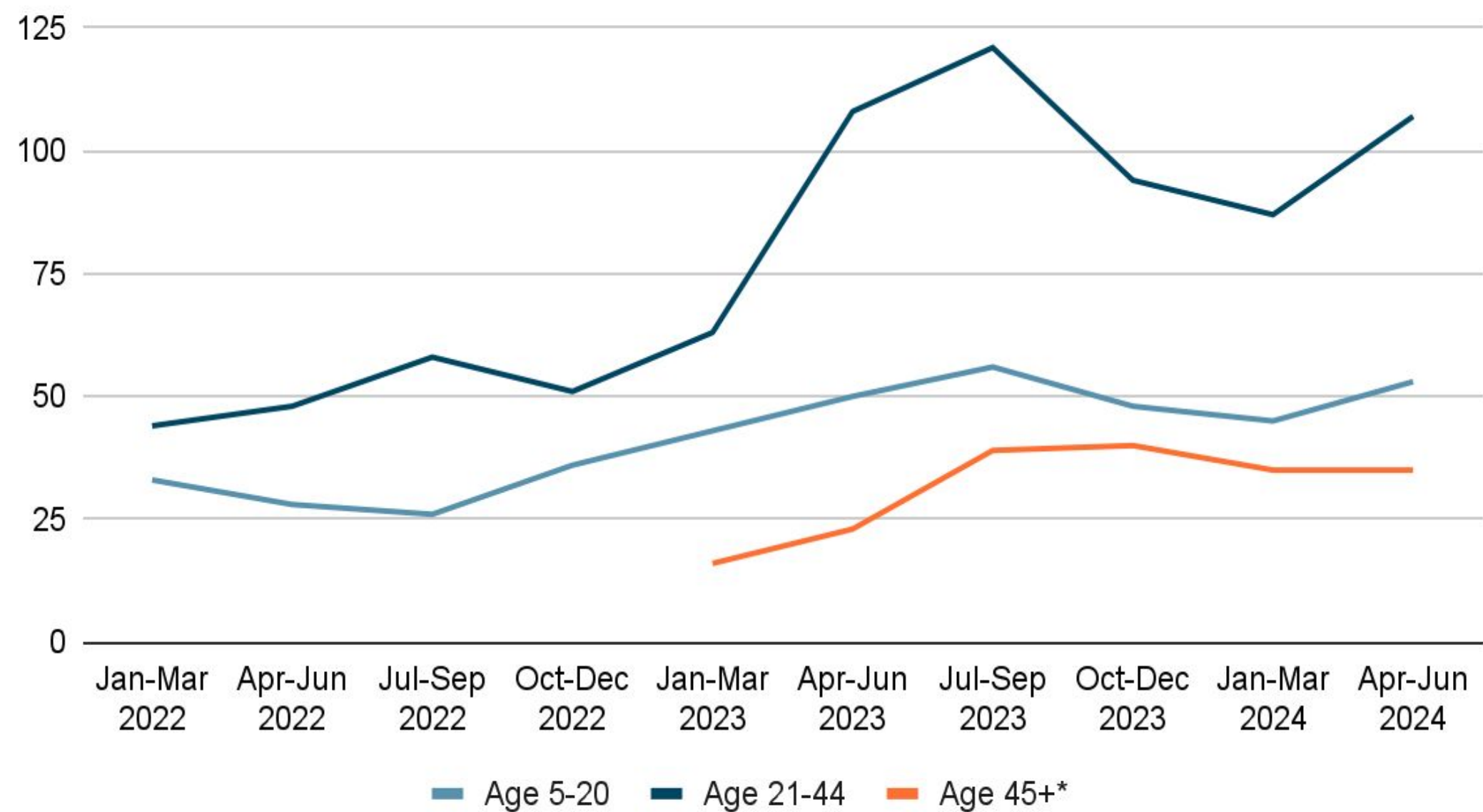
\$100,000 awarded for the second year, if approved



What's New at DOH

Cannabis in the County

Cannabis-related Hospital Visits by Age Group, Jan 2022 - Jun 2024
Anne Arundel County 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 increased **18%** from 169 visits Jan-Mar 2024 to 199 in July-Sept 2024.

However, they are still below the high of 216 visits July-Sept 2023.

Behavioral Health Services has increased awareness with outreach, storage bags and public awareness campaigns.

Source: Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE), Chief Complaint and Discharge Diagnosis: Marijuana v3, accessed 9/6/24

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

What's New at DOH

Cannabis in the County

While legal, cannabis use can lead to adverse health consequences for populations such as, youth, those pregnant and breastfeeding, and motorists.

Additionally, unsafe use by adults can increase without effective communication. In response, the Department of Health has public awareness campaigns to:

- encourage safe use among adults
- protect vulnerable populations
- inform the public about the health and safety risks of cannabis

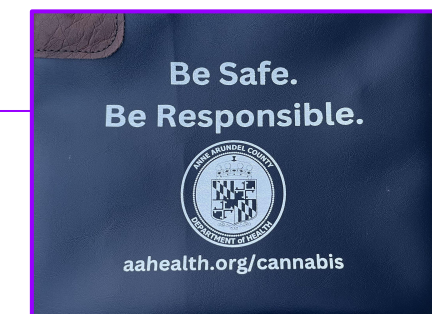


Cannabis PSA

The Importance of Proper Storage

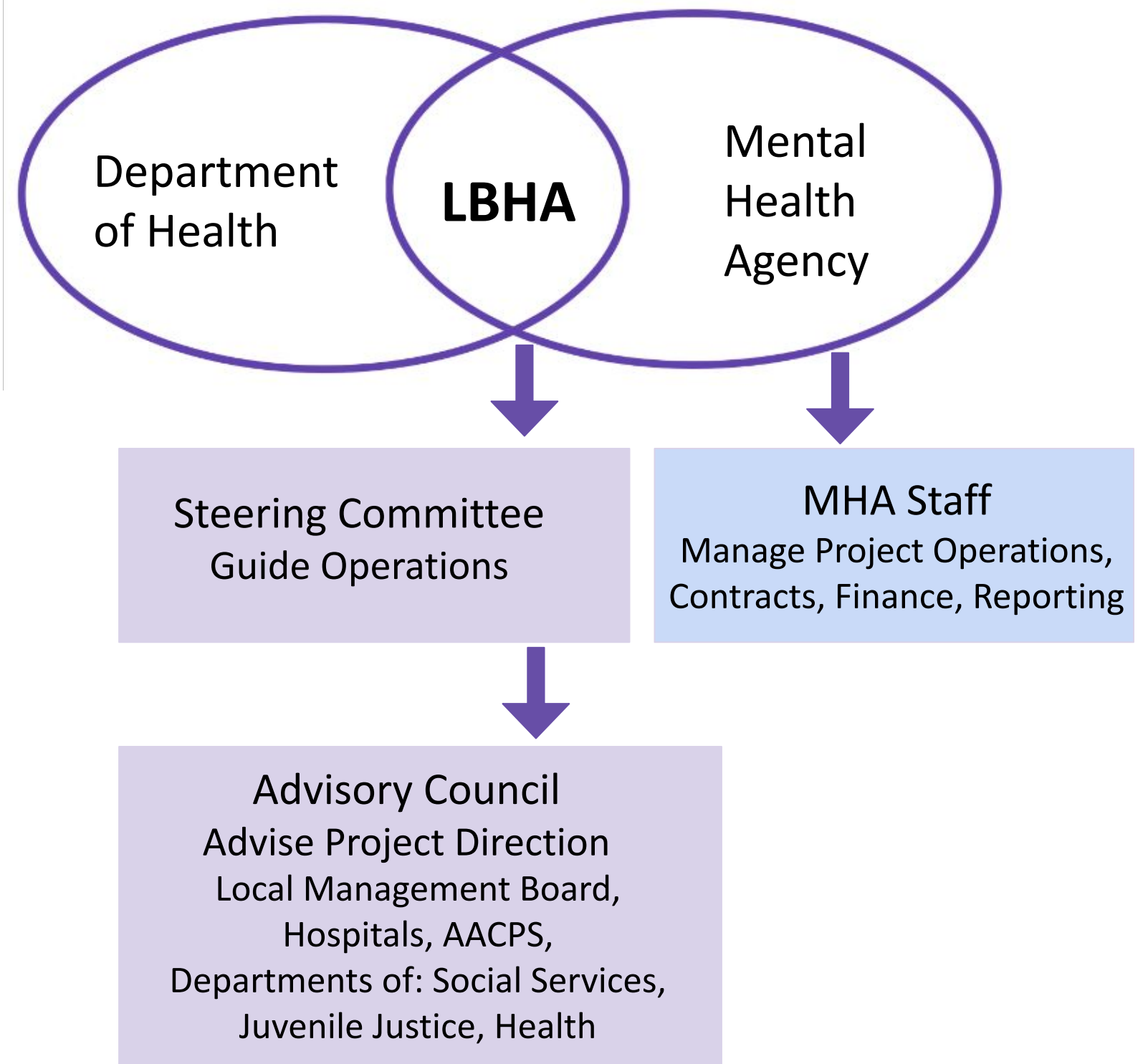
Proper storage is critical to preventing accidental ingestion, not only by children and pets but also by adults who may unknowingly consume cannabis-infused products.

Storage bag →



Maryland Consortium on Coordinated Community Services

- Developed from Blueprint for Maryland's Future Legislation - Hub and Spoke Design.
- Goal is to meet student behavioral health needs and other related challenges in a holistic, non-stigmatizing manner.
- Local Behavioral Health Authority was selected by the Maryland Community Health Resources Commission as a "Pilot Behavioral Health Hub" under the Coordinated Community Supports program.
- Mental Health Agency serves as lead agency and fiscal agent for Hub.



What's New at DOH

Community Advisory Council: Maternal and Infant Health Task Force

About the Council

Members voice community perspectives and priorities to lessen the harms of maternal health disparities.

- Will center the lived experience of those who were pregnant, gave birth or experienced a loss in AACo.
- Training and compensation will be provided for participation
- Council works with the Task Force to develop and implement solutions



Stages of Council

1

Formation

Council design, purpose, member roles.

- 10/2 Planning meeting included five community members
- Planned the meeting structure and kick-off

2

Operation

Develop infrastructure for proposed Council activities. Planned launch in early 2025.

3

Maintenance:

Continuous improvement of Council to solicit input and improve activities.

What's New at DOH

Gun Violence Intervention Team

Cure Violence Annapolis Report

How Violence Interrupters spend their hours

April - June 2024



1,126 Hours: Interruption

Staff canvass the community, intervening in crisis, mediating disputes between individuals, and interceding in group disputes to prevent acts of violence.



146 Hours: Norm Change

Staff work to change the thinking on violence at both the community level and society at large.



72 Hours: Behavioral Change

Staff work to change the thinking on violence at both the community level and society at large.

Work in Progress



Intentional Recruitment



Building Trust and Credibility

Challenges and Barriers



Community Presence

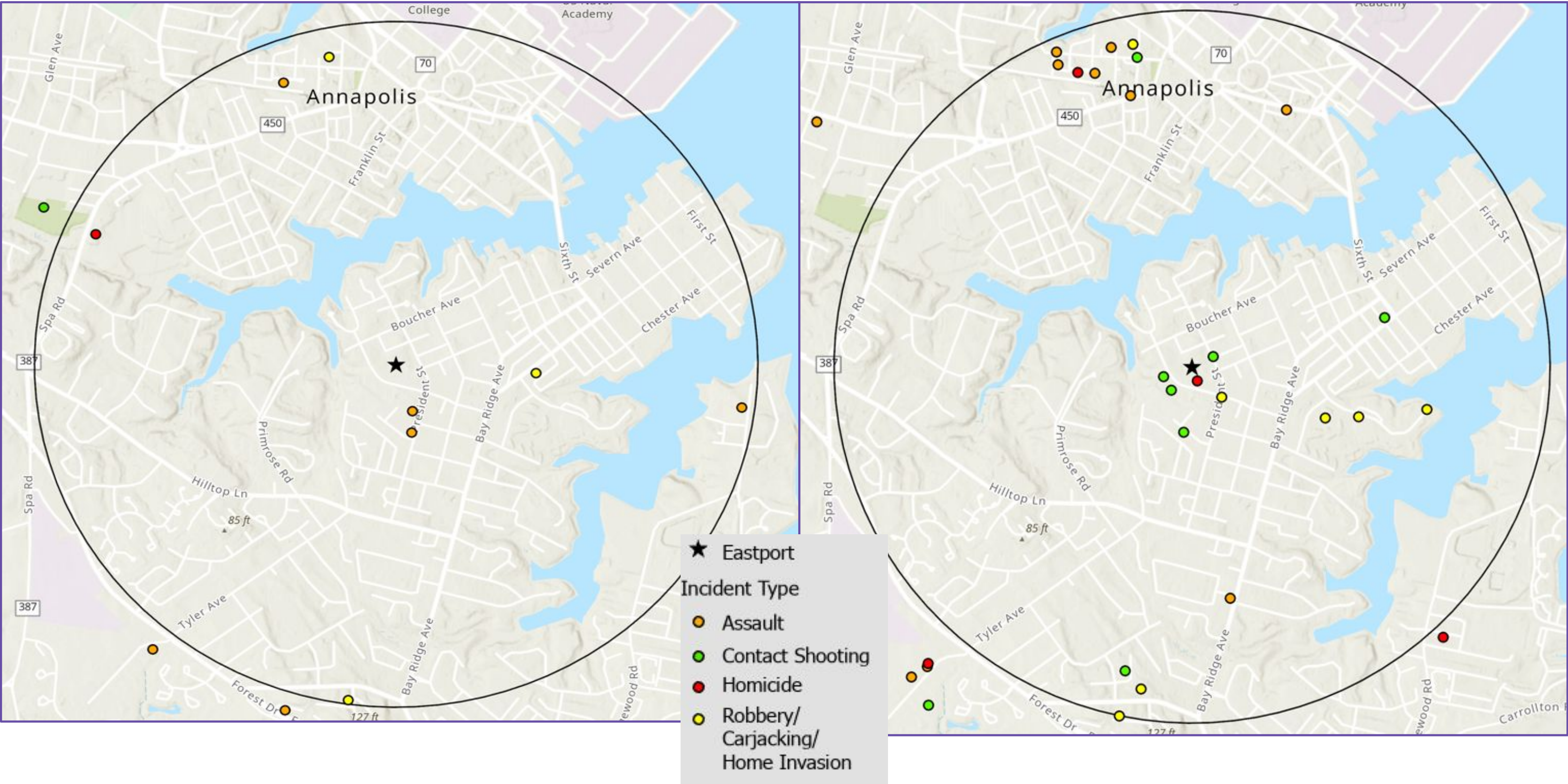


Operational Issues

Gun Violence Within 1 Mile of Eastport

January - October 7, 2024

2023



Cure Violence North County Assessment

- DOH invited Cure Violence Global to conduct an assessment in Northern Anne Arundel County to determine if a Violence Interruption Program could be successfully implemented.
- Area of the assessment was selected based on gun violence data provided by Anne Arundel Police Department
- Assessment included tours of impacted neighborhoods as well as meetings with government officials, and community- and faith-based organizations.
- Results are expected to be shared at the **GVIT Community Meeting on October 24.**



Gun Violence Intervention Team

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.



Gun Violence Intervention Team

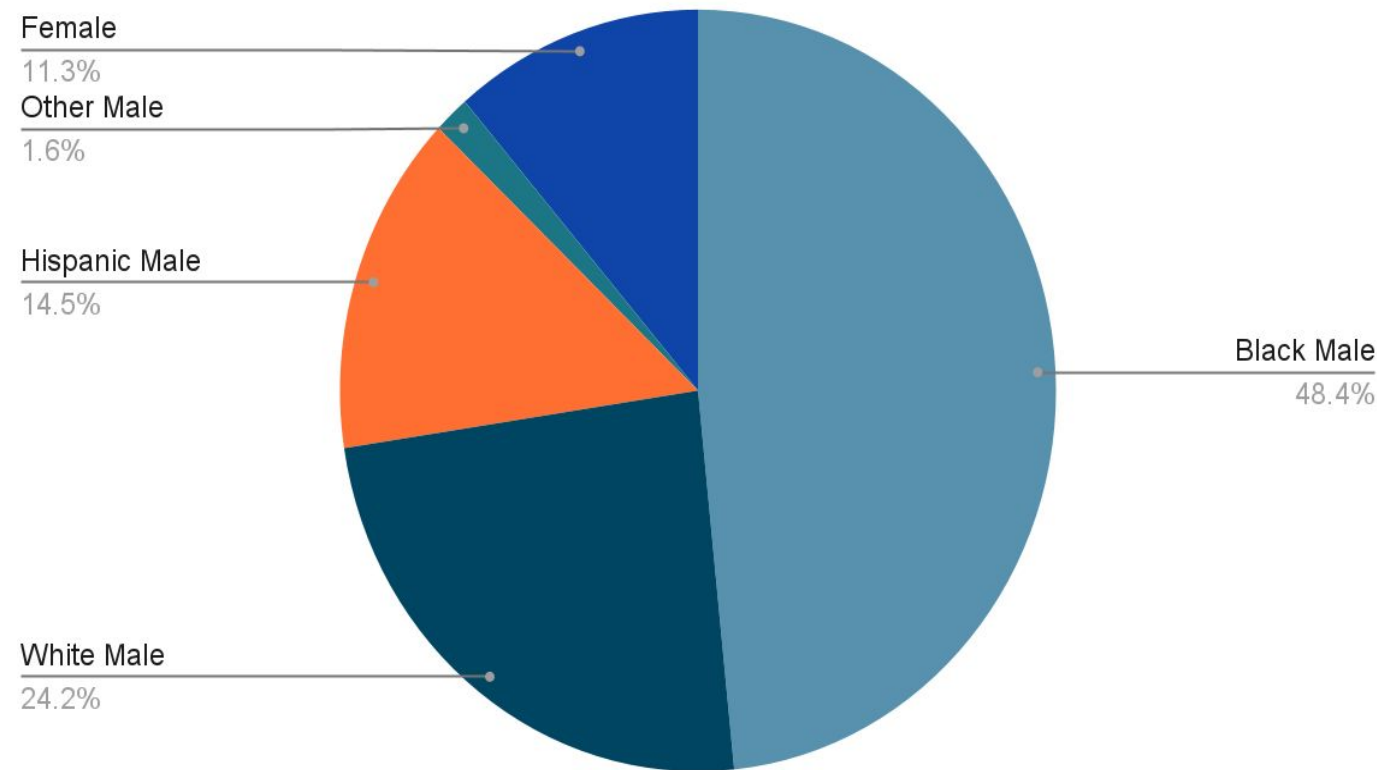
FY24 Accomplishments

Goal 1 Coordination	<ul style="list-style-type: none">• Monthly GVIT meetings (52 members)• Three active work groups: Data, Education and Policy, and Environment
Goal 2 Gun Laws	<ul style="list-style-type: none">• Ongoing legislation monitoring and testimony/letter preparation• Development of policy briefs highlighting current evidence and laws
Goal 3 Education	<ul style="list-style-type: none">• Focus on senior firearm safety: Provider letter about suicide risk and senior safety rack card• Developed suicide prevention and gun lock rack cards• Utilization of Community Health Ambassadors to promote gun locks and community safety
Goal 4 Data	<ul style="list-style-type: none">• Implementation of a new user friendly data dashboard (Tableau)• ERPO data tracking through court system and police partners
Goal 5 Community Violence Disruption	<ul style="list-style-type: none">• Implemented pilot Violence Interruption Program (VIP) in Eastport, Annapolis• Hosted community meetings in preparation of VIP pilot and throughout county• Developed Action Plan to address north county gun violence• Ongoing gun lock distribution program with Anne Arundel County Public Library (AACPL) and partners
Goal 6 Victim Support	<ul style="list-style-type: none">• Conducted Adverse Community Experiences and Resilience trainings for community members and organizations (Summer 2023 and Spring 2024)

Gun Violence

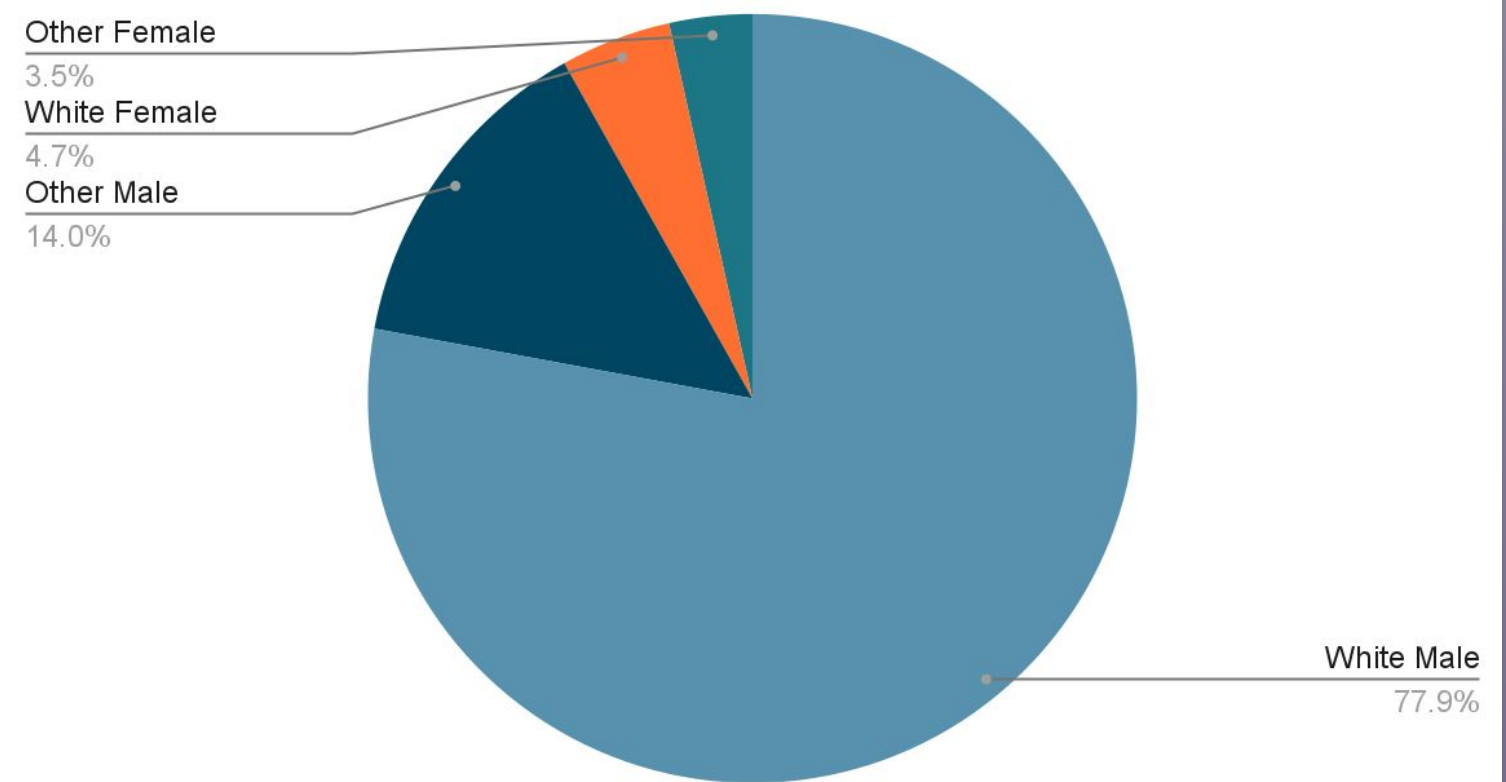
A leading cause of premature death in the U.S. The DOH recognizes that a comprehensive public health approach is necessary to address this growing crisis.

AACo Resident Gun-Related Homicide Deaths 2020-2022



- **62 residents** lost their lives between 2020-2022 due to gun-related homicides
- About half were Black males
- About one-third of resident homicide victims are Black males between ages 15-34

AACo Resident Gun-Related Suicide Deaths 2020-2022



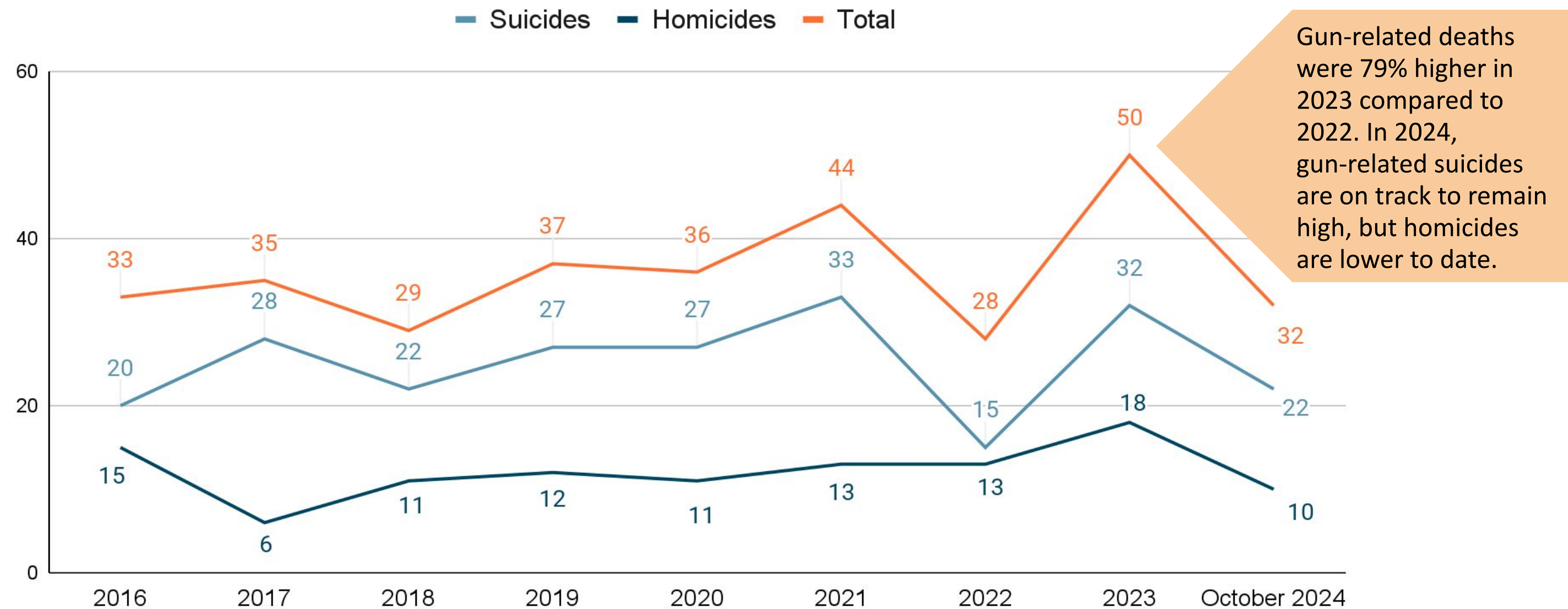
- **86 residents** lost their lives between 2020-2022 due to gun-related suicides
- About three-fourths were white males
- Half of residents who took their own lives using a firearm were white males ages 45+

*Data source: CDC Wonder Underlying Causes of Death

Gun Violence Intervention Team

Data Dashboard (2016 - October 4, 2024)

Gun Deaths Occurring Within Anne Arundel County

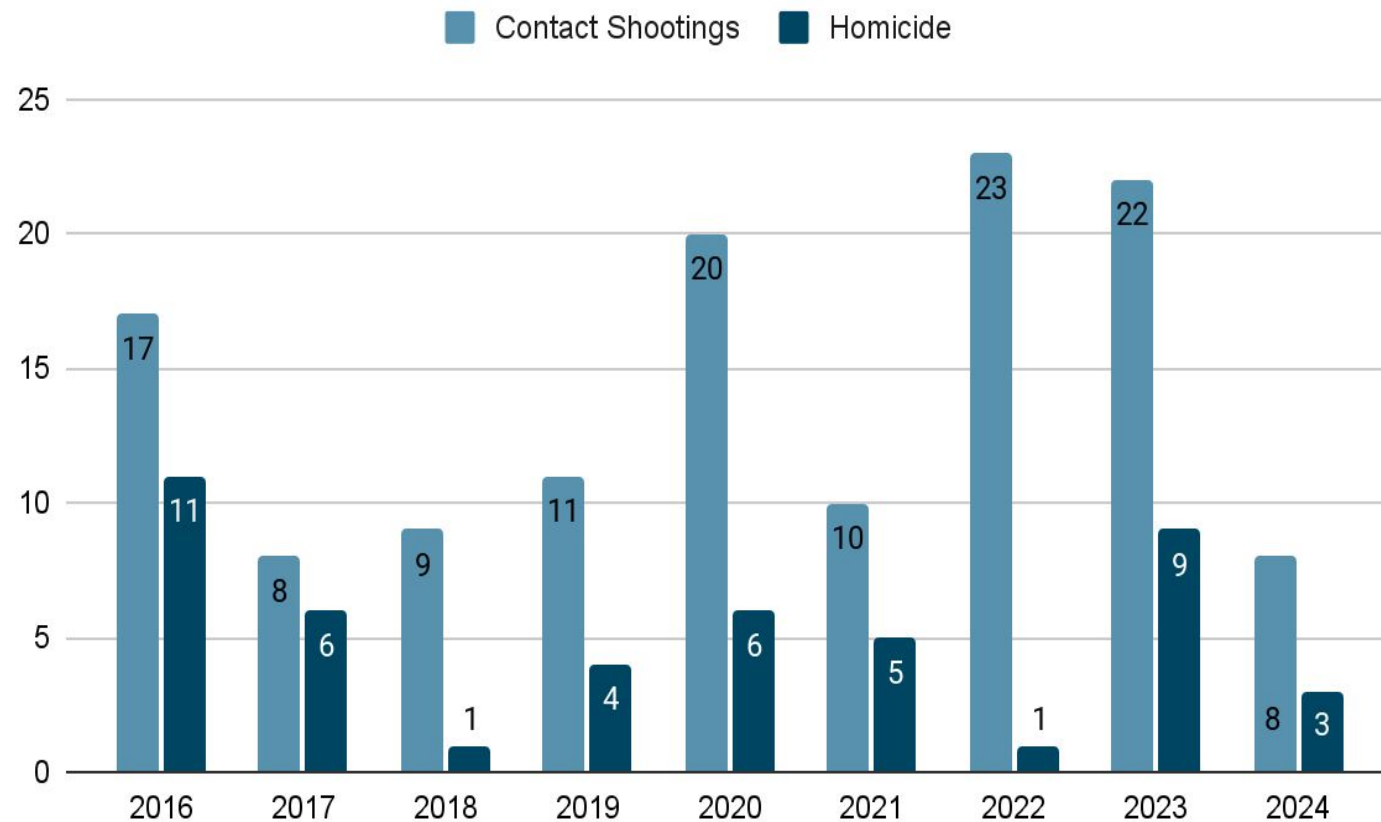


*Data provided by the Anne Arundel County Police and Annapolis Police Department as of 9/18/24

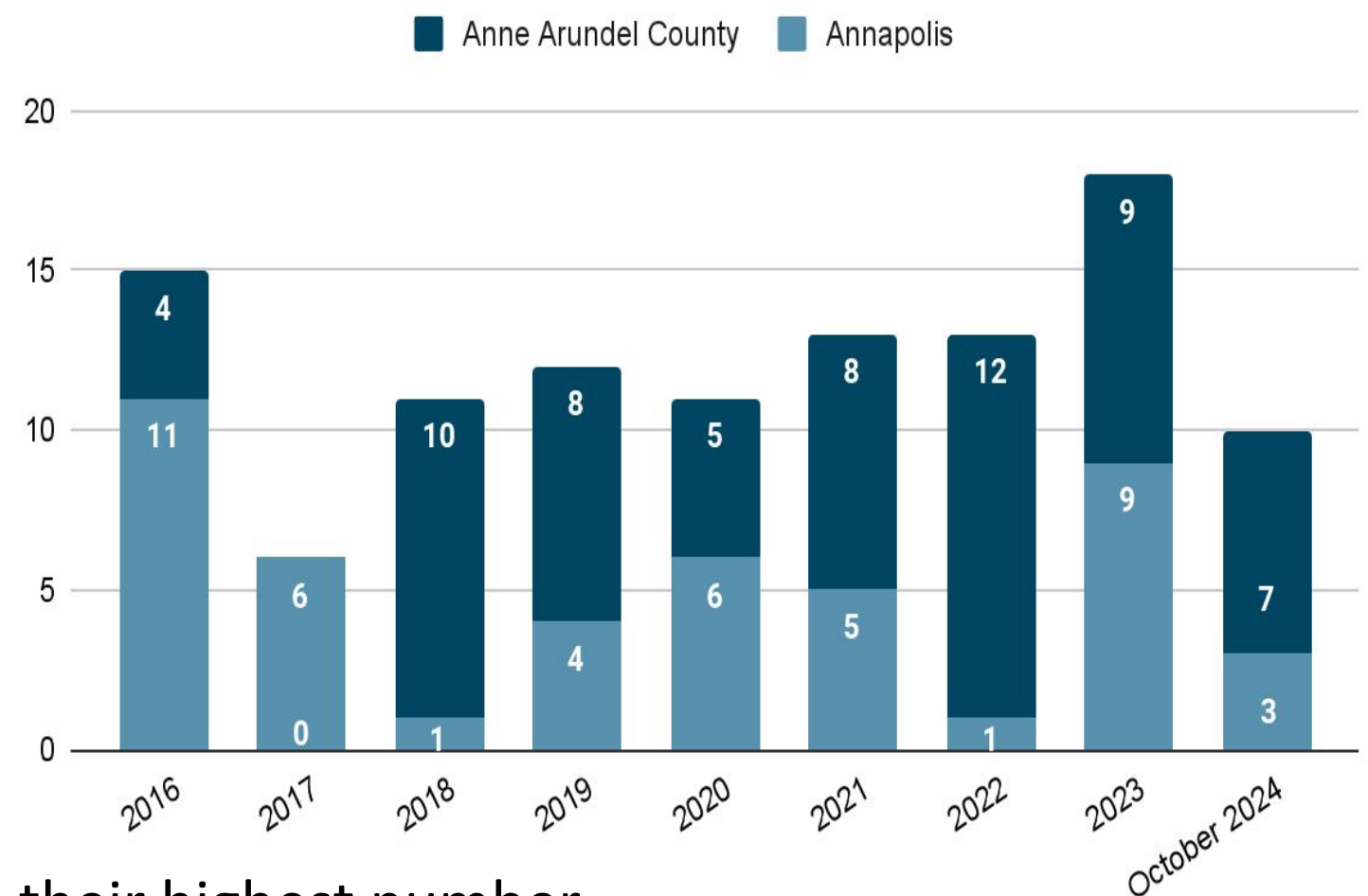
Gun Violence Intervention Team

Data for Gun Violence Occurring in the County (2016-October 4, 2024)

Annapolis City Gun Violence (2016 - October 4, 2024)



City and County Gun Homicide Totals (2016 - October 4, 2024)



- Homicides in Annapolis City in 2023 reached their highest number since 2016, comprising half of homicides occurring in the county.
- The majority of homicide victims are Black and male.
- Half (46%) of homicide victims in Annapolis City between 2016 and 2024 were between 14-24 years of age.

*[Data provided by the Anne Arundel County Police and Annapolis Police Department](#) as of 10/4/2024

Gun Safety Lock Distribution

April 2023: DOH and AACPL partnership began distributing free gun locks to residents in an effort to promote safe storage to reduce suicides, deaths and injuries.

As of September 19, 2024: 7,307 gun safety locks have been distributed. The DOH is partnering with additional organizations, including:

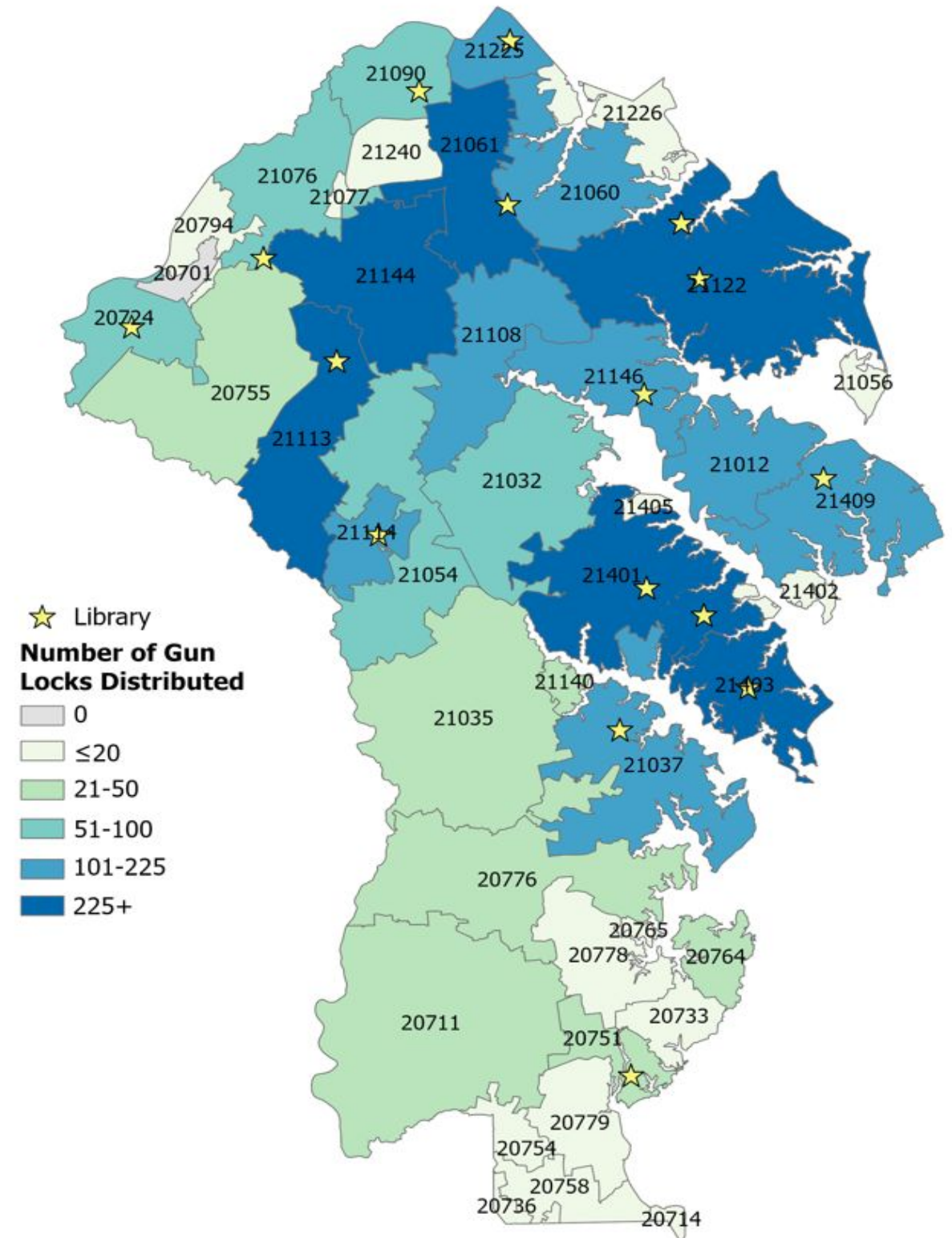
- Man Up Anne Arundel
- No HARM, City of Annapolis
- Anne Arundel Community College
- Anne Arundel County Department of Social Services

Up Next: Annapolis Pediatrics

Anne Arundel County Residents:

- ➔ **141 residents** go to a Maryland hospital or emergency department due to a gun-related injury each year on average.
- ➔ **56%** of these injuries are due to accidental discharge meaning the injury was due to the mishandling of a gun.

Residential ZIP Code of Persons Obtaining Gun Locks, N = 3,647



Gun Locks distributed as of 9/19/24

Cure Violence Annapolis

What is 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.

What is the Impact?

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

Violence Interruption Includes:

Street Outreach:

- Youth mentorship
- Conflict mediation
- Resource navigation

Programs and Skills:

- Employment
- Education
- Life Skills

Collaborate with system partners to track:

- Goals and performance measures
- Progress updates
- Impact reports

2024 Cure Violence Annapolis

- Hired staff
- Conducted training for Violence Interruption
- Held trainings for database use and program management
- Moved into Eastport office space
- Started data collection
- Published reports
- Host community events



Violence Prevention Action Team Grant: North County

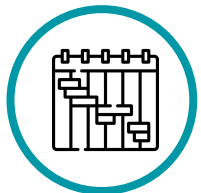
Grant Accomplishments



Needs Assessment



In-Person
Cohort Meeting



Action Plan

Methods of Gathering Information:

- **Youth input survey:** 78 youth participated - shared experiences and perceptions on school and community violence
- **Action team members:** 8 organizations represented, including county council, community organizations and government agencies

Recommendations:

- Establish a framework for violence prevention
- Implement school-based programming
- Build grant capacity for local organizations
- Engage youth in leadership

Summary Report

Goals for building capacity to address youth violence in north county.

1. **Community and Partnership Engagement:** Engage community stakeholders to establish a youth violence reduction team.
2. **Evidence-informed Programming:** Drive new equitable, community-led initiatives and programs for youth violence prevention.
3. **Policy and Systems Change:** Establish measurable outcomes for youth violence prevention.



GVIT

June 2024 Community Meeting

Location: Severn

Focus Area:

Aligned with annual Wear Orange Day to remember all impacted by gun violence.

Updates for the Cure Violence pilot in Eastport and a “data walk” to review trends were provided.



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)



FY25 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
- Non-profits



Healthy Anne Arundel Coalition: FY25 Goals

Mental Wellness Workgroup

Promotion

- Bi-weekly email county happenings with over 500 subscribers (ongoing) ★
- Crisis Warmline/Mental Health Resources PSA (planning) ★
- May 2025 Mental Health Awareness Month Campaign (planning soon)

Policies

- Weekly email to communicate 2024 Maryland General Assembly mental health bills (January - April) ★
- Promote policy to include mental health resources in employee orientation for county employers (starting soon) ★

★ These goals align with the Local Behavioral Health Authority (LBHA) Plan priority for Education and Prevention to increase programs that promote mental well-being, reduce trauma, and prevent substance misuse, suicide, and other risky behaviors.

Healthy Eating, Active Living Workgroup

Promotion

- Training on Find Help resource platform for Community Health Ambassadors (ongoing)
- Partner showcase (ongoing)
- 2025 Healthy Anne Arundel Day (planning soon)
- Healthy Food Drives


Policies

- Support work of the Food Council (ongoing)
- Promote disability inclusion policies (in progress)

Healthy Anne Arundel Coalition

The FindHelp tool allows us to track what types of programs and services community members are looking for.

- Community Health Ambassadors (CHA) received training to use FindHelp in outreach efforts
 - 26 active CHA accounts
- Widget available for HAAC partners to feature on their websites
 - Currently used by AA County Food Bank

 [Support](#) [Sign Up](#) [Log In](#)

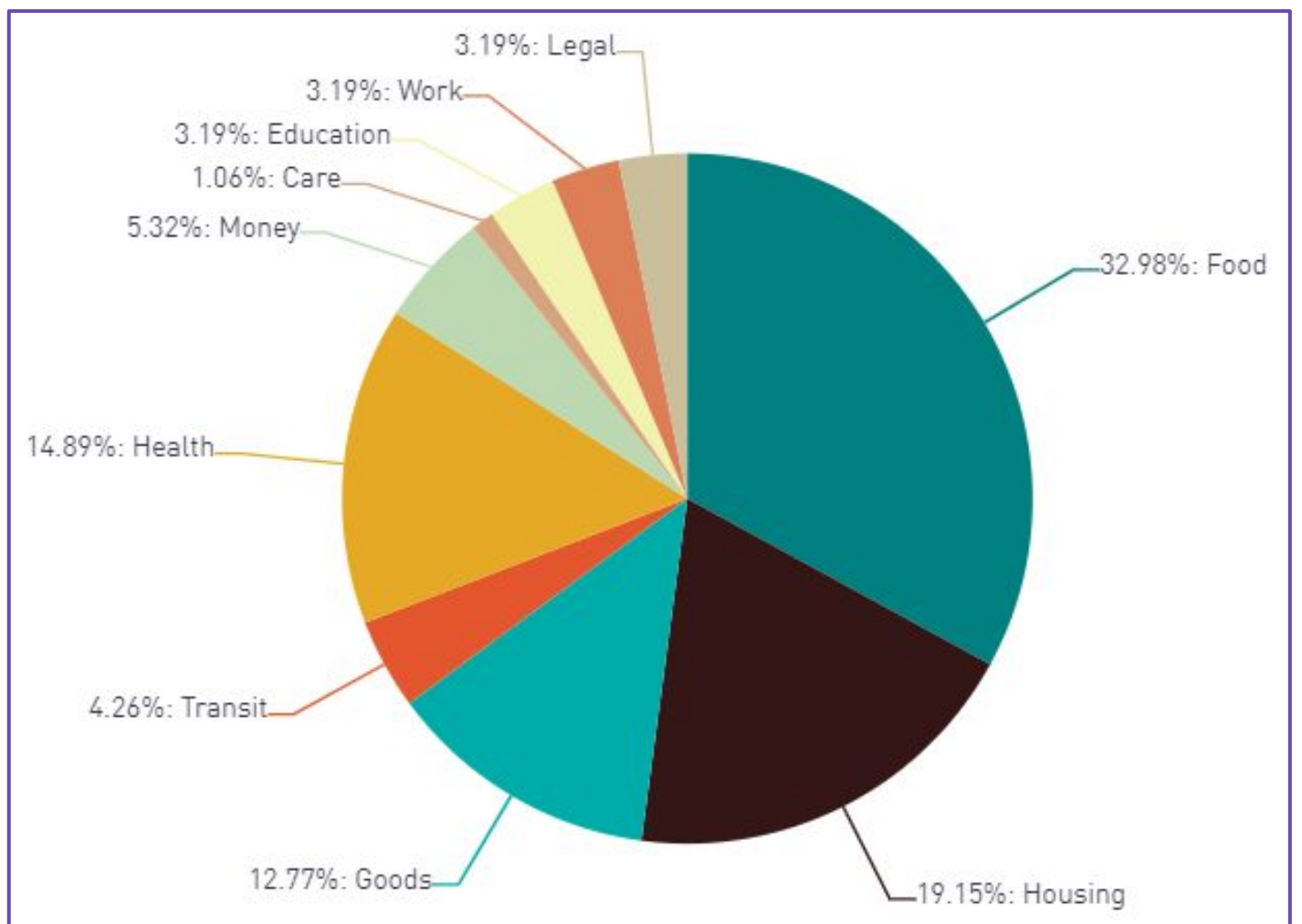
Find free or reduced-cost resources like food, housing, financial assistance, health care, and more.

Help starts here.

ZIP

52,030,570 people use it (and growing daily)

If you or someone you know is in crisis, call or text 988 to reach the [Suicide and Crisis Lifeline](#), chat with them online via their website, or text HOME to 741741 (multiple languages available). If this is an emergency, call 911.



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, 2022							
ZIP Code	Area	Poverty Percentage	Percentage Without High School Diploma	Percentage of Households with SNAP	2023 ED Visit Rate per 1,000	Percentage Low Birthweight Infants (2017-2021)	Minority Population
20711	Lothian	11.0%	17.4%	5.2%	289.4	10.2%	39.1%
20724	Laurel	12.1%	7.9%	8.8%	220.6	9.5%	73.3%
20765	Galesville	9.1%	5.2%	17.9%	188.7	Suppressed	30.0%
20776	Harwood	3.9%	11.0%	7.9%	271.7	5.8%	17.5%
21060	Glen Burnie (East)	7.7%	8.3%	10.2%	298.0	8.2%	40.1%
21061	Glen Burnie (West)	7.7%	10.3%	12.4%	317.6	9.3%	47.4%
21122	Pasadena	5.2%	7.1%	5.5%	225.0	7.4%	19.7%
21144	Severn	6.2%	6.8%	7.6%	232.3	8.9%	55.0%
21225	Brooklyn	24.3%	21.8%	25.0%	178.6	12.2%	66.0%
21226	Curtis Bay	10.3%	14.2%	21.9%	153.0	8.5%	42.6%
21401	Annapolis	7.5%	6.2%	7.3%	276.0	6.7%	32.4%
21403	Eastport	7.6%	7.1%	5.8%	245.8	7.7%	35.5%
	Anne Arundel	5.8%	6.9%	6.1%	229.9	7.8%	35.4%

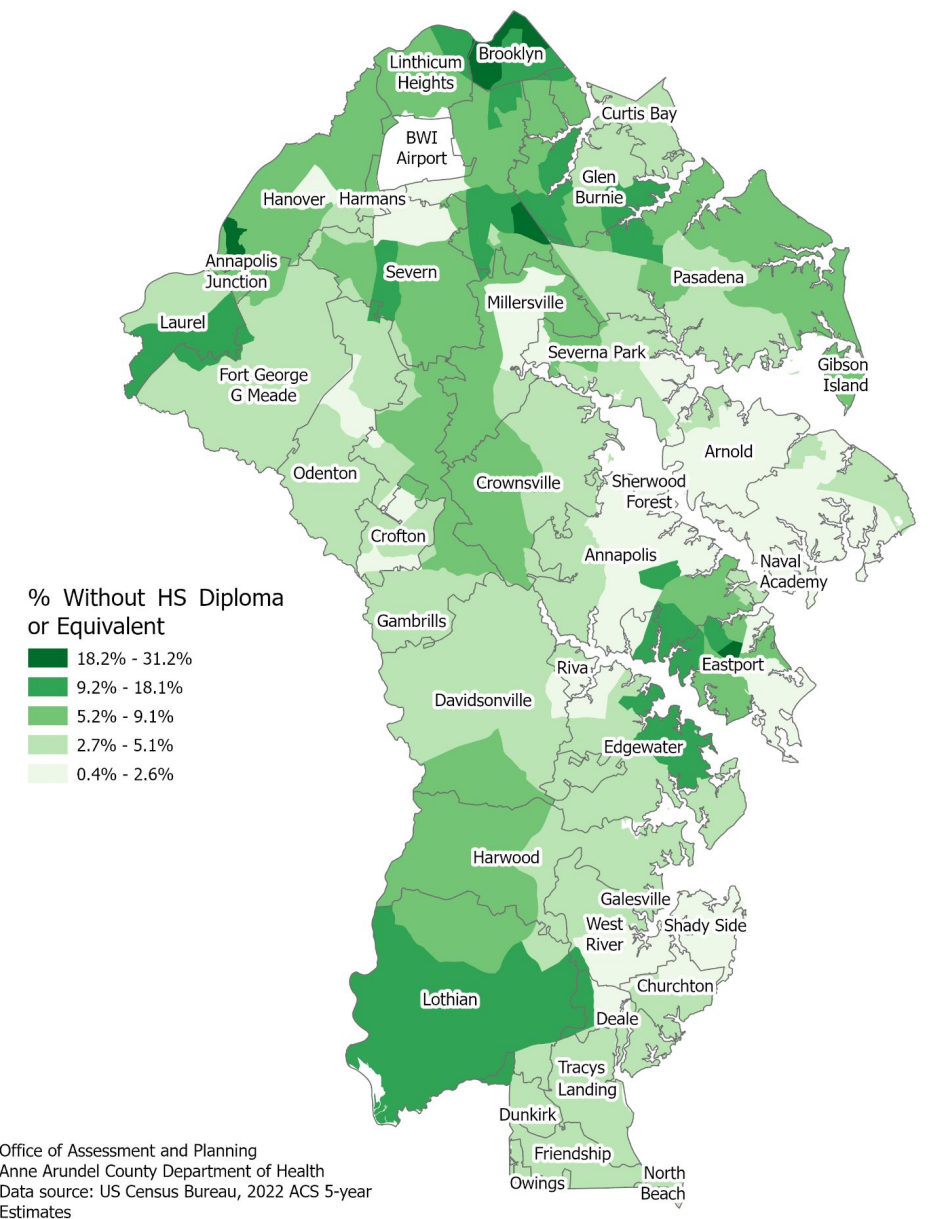
Red = Higher than county average

Source: U.S. Census American Community Survey 5-year Estimates 2018-2022; Maryland Health Services Cost Review Commission Outpatient Files, 2023; Maryland Vital Statistics Administration Birth Files, 2017-2021

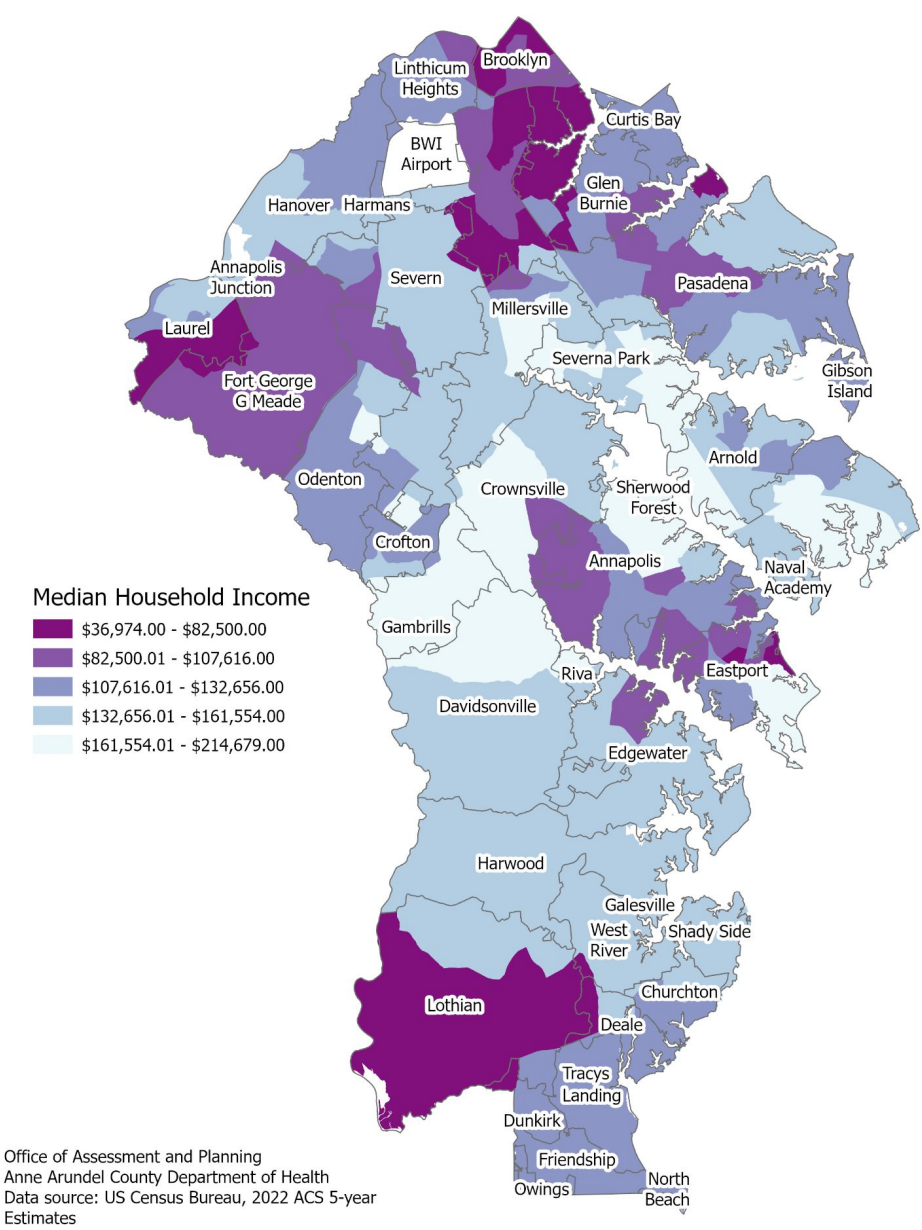
Education, Income and Race in Anne Arundel County

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

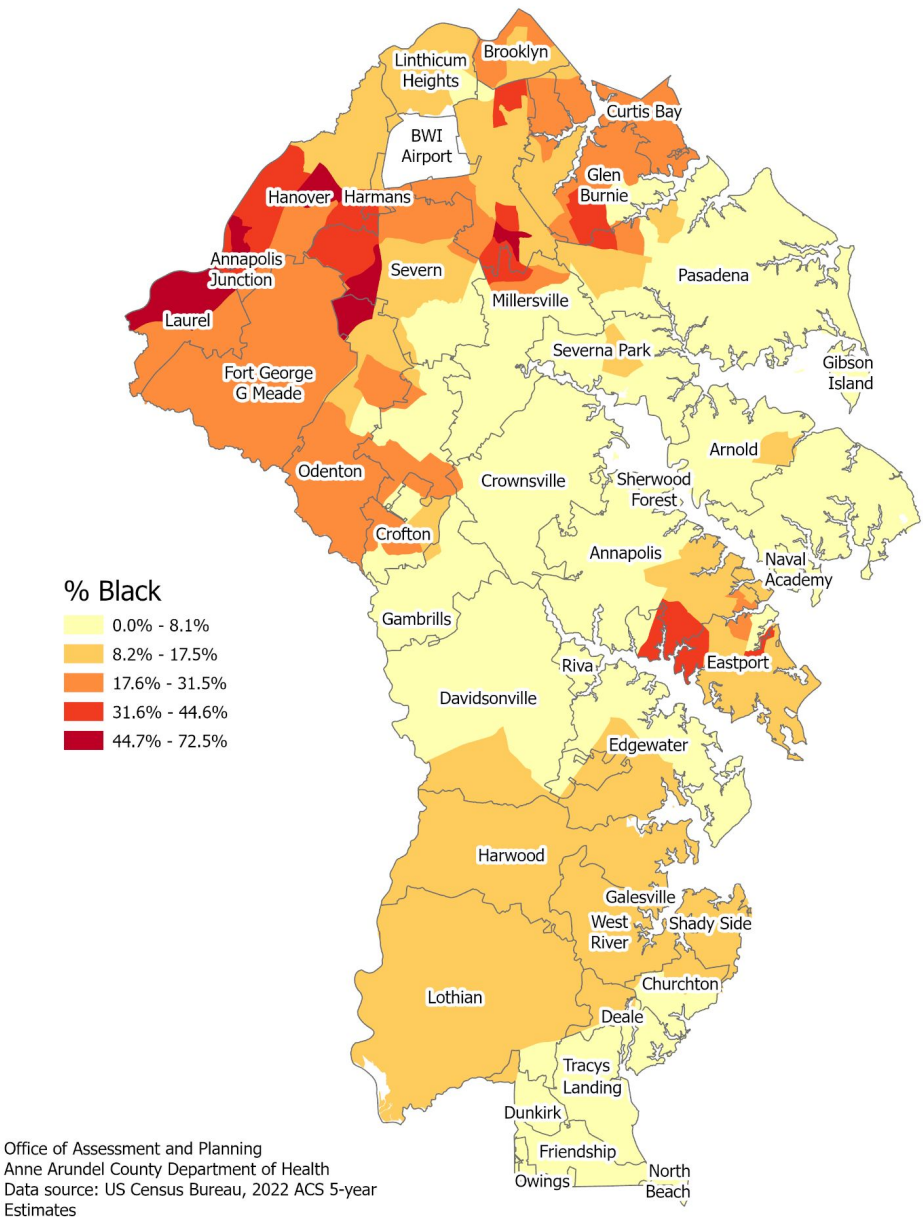
Percentage of Population with Less than a High School Degree
Anne Arundel County, 2022



Median Income (\$), Anne Arundel County, 2022

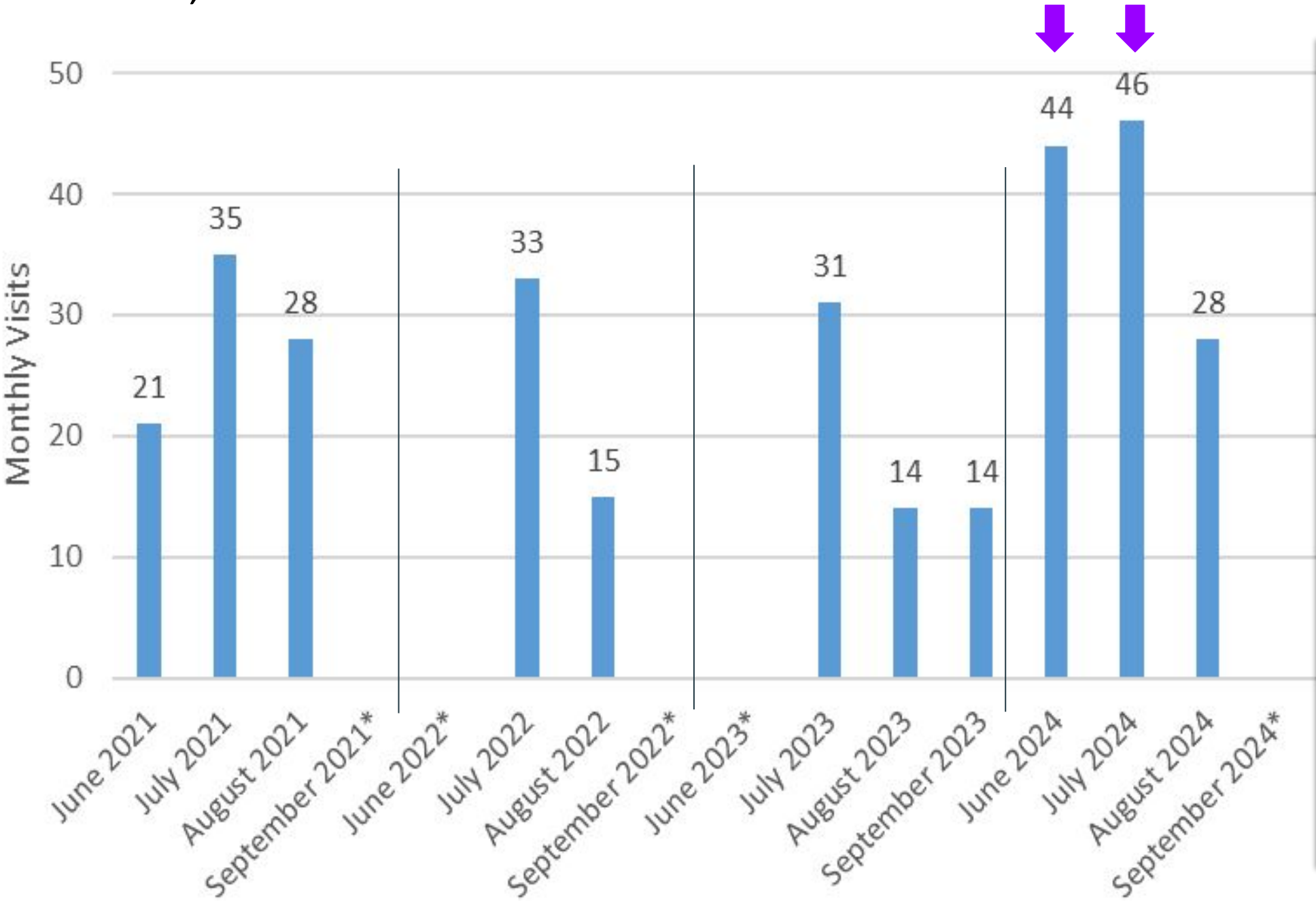


Percentage of Population Identifying as Non-Hispanic Black,
Anne Arundel County, 2022



Heat Related Illness

Emergency Department/Urgent Care visits for **heat-related illness** for Anne Arundel County residents, Summer 2021-Summer 2024



In 2024:

The average max temperature in **July was 92.4 F**, with **19 days at 90 F or higher**, including 5 days that reached at least 100 F.

The average max temperature in **June was 89.2 F**, with **15 days at 90 F or higher**. However, the last half of the month had an average temperature of 92.9 F during which time 35 of the visits occurred.

Overall, July is the hottest month with an average maximum temperature over 90 F.

* Suppressed due to small numbers; Data Source: ESSENCE, National Weather Service BWI Airport

Motor Vehicle Traffic Deaths and Injuries

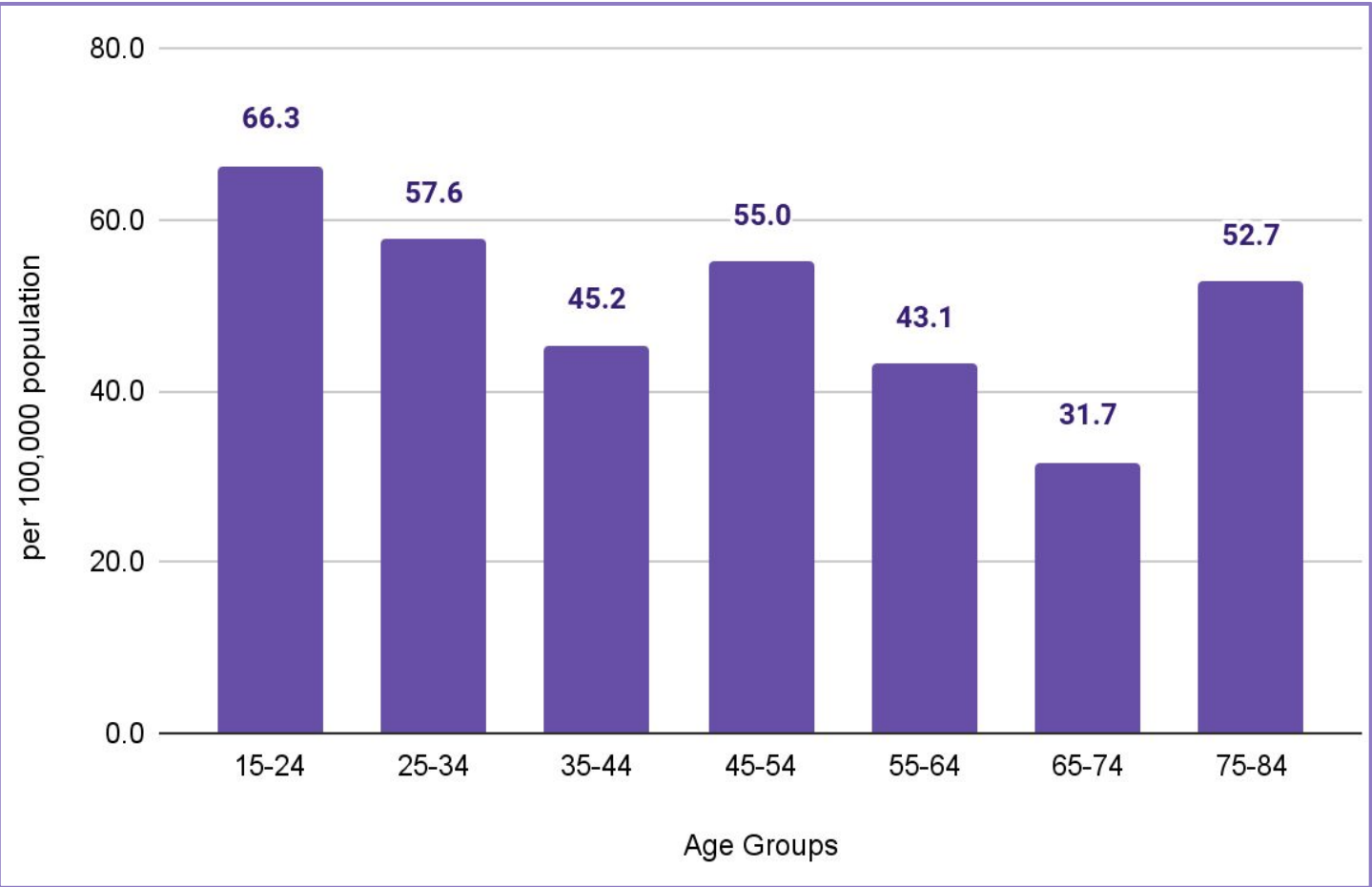
Total of **253** County Resident Deaths 2018-2022

- 73% were Male
- 71% were white, non-Hispanic
- 37% were ages 15-34 years

53 (21%) of the 253 Deaths were Pedestrians

- 79% were Male
- 62% were white, non-Hispanic
- 36% were ages 15-34 years

Age-specific Rate of Motor Vehicle Traffic Deaths, 2018-2022



- 2020-2023: around **4,000** emergency department (ED) and hospitalization visits by county residents related to motor vehicle traffic injuries, **down from about 6,000** per year from 2017-2019.
- ED visits for pedestrians ages 0-17 years **decreased by 26%** from 76 in 2018-2020 to **56** in 2021-2023.
- Among children pedestrian ED Visits from 2021-2023, Black and Hispanic children are overrepresented:
 - 36% are Black, non-Hispanic
 - 21% are Hispanic
 - 21% are white, Non-Hispanic

Health Equity Racial Justice

The Health Equity and Racial Justice (HERJ) Office hosts monthly forums bringing together nearly 70 health equity experts, decision-makers, stakeholders, leaders and community members who live, work, play, worship and learn in Anne Arundel County.

Community Health Workers attended over 40 community events from July 2023 - June 2024.

Between July 2023 - June 2024: 10 Health Equity forums were held, discussing a range of topics through a health equity lens and amplifying related resources.

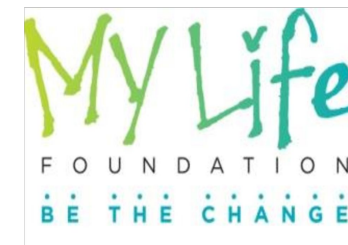
- Back To School Vaccinations
- Cancer Screening Services
- Community Spotlight Youth Panel
- Community Data Walk
- Equity in Policies
- Flu Vaccines
- Gun Violence Interventions
- Heart Healthy Campaign in Maryland
- Healthy Communities Program
- Hispanic Health Festival
- Maternal Health Listening Sessions
- Mental Health Legislation
- Minority Mental Health Awareness
- Public Health and Gun Violence
- Recovery Awareness
- Suicide Prevention Awareness

To register for upcoming forums and watch forum videos, visit: AAHealth.org/health-equity-forums

Community Health Ambassadors Program

FY24 Goal: Authentic engagement with Anne Arundel County community members burdened by unfair and unjust conditions that impact health.

- Engage, educate, inform and share resources on **access to care, behavioral health, community safety, COVID-19 and weather preparedness.**
- Hire, retain and train culturally and linguistically diverse Community Health Ambassadors who are from and trusted in local neighborhoods.
- Support community capacity building through grant awards to seven community partners.



Community Health Ambassadors

Supports community capacity building through grant awards to seven community partners. The Health Equity and Racial Justice Office provides technical assistance through meetings, site visits, field support and ongoing learning opportunities.

FY23 Capacity Building Included:

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

FY24-25 Expanded Capacity Building Includes:

- Access to Care
- Behavioral Health (Narcan, Cannabis, and Alcohol Use Disorder)
- Community Safety
- Extreme Weather Preparedness
- COVID-19



Community Health Ambassadors

FY25 Trainings

Trainings either taking place or planned include topics such as:

- Mentorship Programs - AACPS Office of Equity and Innovation
- Prevention Training
- Intimate Partner Violence Training
- Community Advocacy Training
- Psychological Body Armor Training
- Instruction Training for Youth Mental Health First Aid

How's it going?

To better serve county residents, Community Health Ambassadors participated in a total of 8 trainings between July 2023 and March 2024.

80% of participants were either “very satisfied” or “satisfied” with the quality of the training events.

97% of participants either “strongly agree” or “agree” with the statement, **“I will use what I have learned from this training.”**



Community Health Ambassador FY24 Outreach

Community Engagement

FY 24 Outreach

- 50 Mental Health Awareness Sessions
- CHAs and community members trained as Naloxone Instructors
- Mental Health First Aid Trainings

Distributed:

- ➔ ~5,000 masks
- ➔ ~3,000 hand sanitizer
- ➔ 427 Naloxone Kits
- ➔ ~4,000 COVID-19 Test Kits

Total Impact

26,994 Community Members Engaged

170 Community and Educational Events

Mental Health First Aid Training

- ➔ 12 CHAs certified (including Korean and Spanish speaking)
- ➔ 9 MHFA 8-hour sessions facilitated by Mental Health First Aid Association certified CHA totaling 108 participants
- ➔ 7 MHFA full day sessions hosted and organized by CHA organizations totaling 76 participants

FY25: Community Health Ambassadors will be certified as **instructors** in **Youth** Mental Health First Aid (MHFA).



What Our Partners Say

Stories and Insights from some of our Community Health Ambassador Program Partners.

“A Korean woman realized she was mentally exhausted and dealing with stress after attending the mental health classes. With the knowledge she gained from the class she enrolled her mother in a senior care center while regaining her own health by eating a healthier diet and exercising regularly. Now she is on a healthier diet, and she exercises regularly. She said she didn't want to think about what her life would be like if she hadn't met us .”

- My Life Foundation



“During a mental health awareness session, one of the attendees...shared how one day her student had a breakdown and she gave her the safe space to express why she was having trouble during her presentation. She expressed how important it is to be self aware and how it’s not a weakness to take care of your mental health but a strength that can prevent other chronic health issues, and [that’s] why mental health awareness events and sessions are so important in African American communities.”

- Kingdom Kare, Inc.



Emergency Preparedness and Response

The CDC Division of State and Local Readiness provides funding to ensure all state and local health departments are prepared to prevent, detect, respond to, mitigate and recover from a variety of public health threats by implementing an all-hazards approach to preparedness and resiliency.

FY24 Highlights

Migrant Resettlement Planning

- Facilitated a Migrant Resettlement and Immigration Law Overview for state and local partners.
- Participated in local, regional and state migrant shelter planning.

Support for Emergency Operations Center (EOC) activations

- EOC representation provided for 4 extreme weather events
- Support for 1/27 traffic incident on Bay Bridge, 2/29 active assailant threat in Annapolis and 3/26 Key Bridge Collapse.

Collaborative planning and preparedness

- City of Annapolis and AACo planning to support Family Information Center (FIC), mass care and migrant resettlement plans.
- Maryland Region III Health and Medical Coalition planning: Hazard and Vulnerability Assessment (HVA), Chemical Surge, Crisis Standards of Care.
- Procured supplies for School Health Services bleeding control kits, preparedness items for individuals experiencing homelessness in partnership with the AACo DSS Street Outreach Program, Annapolis and AACo heating/cooling centers, and DOH Community Health Ambassadors.

Emergency Preparedness and Response

FY25 Objectives and Highlights

Incident Command System (ICS) Staff Training and Exercise

On 9/10/24, the Office of Emergency Preparedness and Response (OEPR) facilitated a training event designed to apply ICS principles and explore how they structure our preparedness and response efforts.



Education and Outreach

- Development of extreme heat and cold outreach materials to educate and share resources available to individuals, communities and through the DOH Community Health Ambassador program.
- Supported the annual HERicane camp hosted by the AACo Office of Emergency Management by assisting with Stop the Bleed and CPR training, and providing all attendees with tourniquets and personal aid kits.

Collaborative Planning and Preparedness

- OEPR will partner with AACo Office of Emergency Management to update the Department's Continuity of Operations Plan (COOP) as part of the countywide COOP standardization process.
- City of Annapolis and AACo planning and training to support Family Information Center (FIC) operations, hazard mitigation and medical surge initiatives.

Anne Arundel County Local Behavioral Health Authority

What is the Local Behavioral Health Authority?

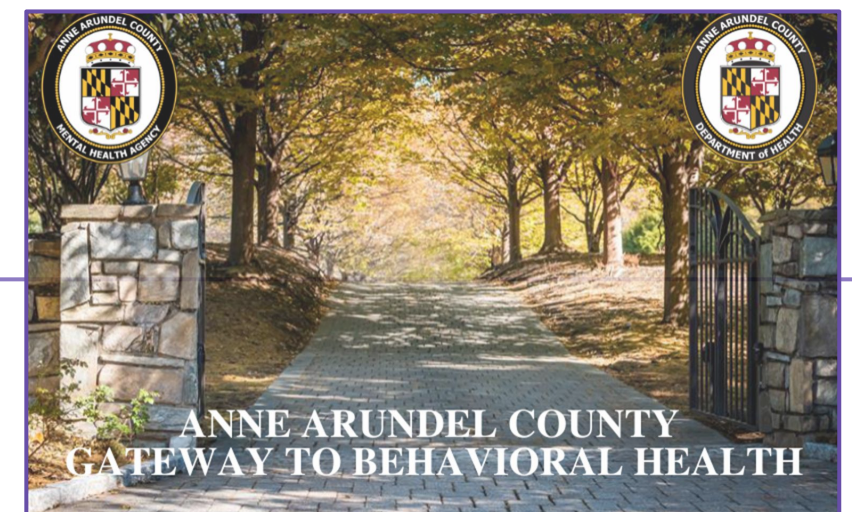
The LBHA of the DOH is responsible for planning, managing and monitoring publicly funded behavioral health services.

Plans, develops and oversees an accessible, quality, equitable and comprehensive public behavioral health system that meets the needs of individuals, families and communities in Maryland. Our county extends this to include meeting the needs of all residents.

September 2024

Behavioral Health Provider Meetings and Symposium

- Collaboration between the Department of Health and the Mental Health Agency.
- Annual Symposium included free continuing education credits and national speakers.
 - **5** Free Continuing Education Units for attendees
 - **207** attendees
- Monthly Meetings are open to all stakeholders



Behavioral Health in Anne Arundel County

Agenda 2024-2026

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.



EQUITY

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



QUALITY

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



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

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



DOH Behavioral Health Services FY24

- Adolescent and Family Services delivered via telehealth and in person.
 - 333 families served
 - 85 new admissions
- Road to Recovery clinics in Glen Burnie and Annapolis (including ORCC) providing opioid medication treatment with counseling (methadone, buprenorphine and naltrexone).
 - 596 individuals served
 - 195 new admissions
- Peer Support Services (PSS) providing recovery support services as well as overdose outreach to individuals in the community.
 - 2012 individuals served
 - 276 individuals outreached to post overdose with 127 individuals engaged in peer support services
- System Planning and Management continues to process requests for funding.
 - 261 served in SUD crisis beds
 - 84% 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; 212 individuals served

Total Graduated: 43 families graduated; 139 individuals graduated

Total Percentage Graduated: 68% families; 66% individuals



Wellmobile - Virtual and In Person

On demand initiation of buprenorphine services



Telehealth services for entire county Monday-Friday

- Expanded hours
- New weekend hours



In person treatment:

- Incorporates STI and HIV testing and treatment
- Naloxone distribution
- Syringe Services
- Wound care

Locations in:

- Annapolis (two locations)
- Glen Burnie
- South County
- Severn
- Brooklyn Park



Wellmobile Numbers

- **88%** of those served referred to a community provider
- **93%** of those referred keep their initial appointment
- **79%** of those who keep their initial appointment are still active >30 days
- **640** residents served

Opioid Intervention and Prevention



Overdose Prevention Team (OPT)

- 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 from local, state and federal government agencies as well as private and non-profit sectors.
- Coordinate stakeholders operations to achieve the unified strategy.
- Develop Opioid Abatement/Restitution Funding Strategies



Strategic Priorities

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



Accomplishments

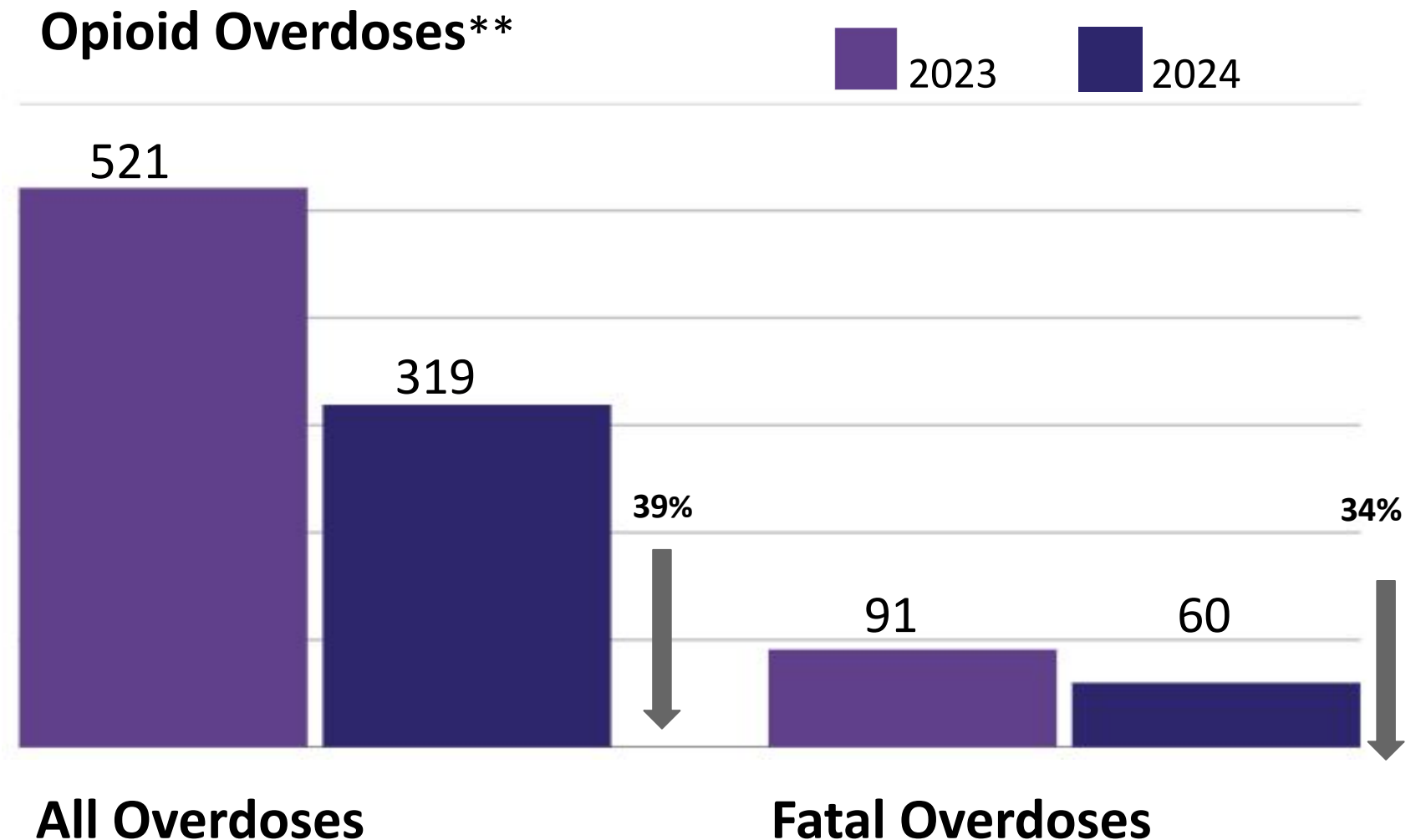
- Joint County/City Dashboard
- Public Service Announcement: Signs and Symptoms of Overdose
- Expansion of Sounds of Silence
- Low barrier naloxone availability
- Community Grants for Opioid Abatement Funding Projects

Behavioral Health

Joint-Opioid Related Data Dashboard*

Overdoses Occurring in Anne Arundel County as of September 26, 2024

- 2024 has seen the **fewest amount of opioid overdoses**, fatal and non-fatal, since tracking began in 2019 YTD
- More than 90% of **non-fatal** overdoses received at least one dose of naloxone
- Approximately 4 out of 5 fatal overdoses **did not** receive naloxone



* Source: Anne Arundel County and Annapolis City Police Departments

** Data may be preliminary and final numbers may fluctuate.

Road to Recovery

Detention Centers

Jennifer Road

Grant application to offer medication for the treatment of opioid use disorder. Includes:

- ➔ Innovative model to leverage existing resources and expand services.
- ➔ Assures 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

FY2024

- 157 individuals provided Methadone
- 183 individuals provided buprenorphine
- 258 individuals provided peer support services
- 100% of individuals screened for OUD

Ordnance Road

- Provides methadone and naltrexone to incarcerated inmates and connects them to care on release
- 85 inmates enrolled in program YTD FY24
- 100% of those enrolled in RTR were connected to community treatment upon release

This year buprenorphine was added to the medications offered by RTR at Ordnance Road Correctional Center.



Behavioral Health

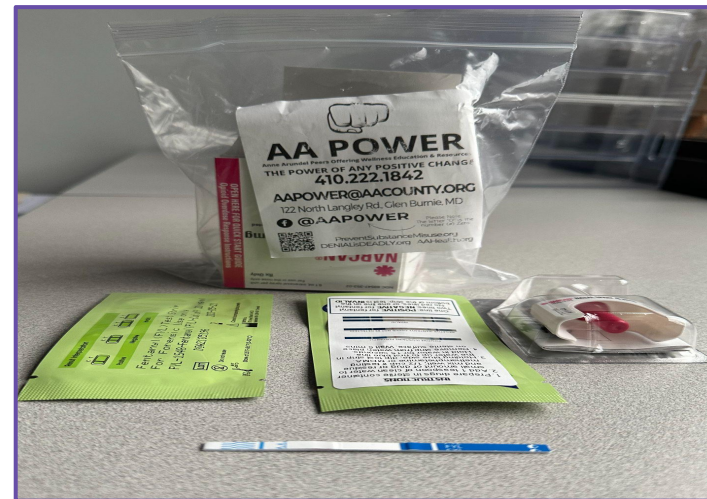
Harm Reduction

What is Harm Reduction?

A set of practical, public health strategies designed to reduce the negative consequences of drug use and promote healthy individuals and communities.

Harm Reduction...

- provides services
- is non-judgmental
- non-stigmatizing
- Acknowledges 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

Developed with the goal of enhancing the quality of life for People Who Use Drugs by a coordinated effort through education and promotion of harm reduction principles.

- HRAC Recommendation Report was finalized March 2024 and will be posted to the DOH website.
- Current work is prioritizing the strategies in these five key areas:
 1. Community Partnership and Engagement
 2. Education and Awareness
 3. Service Delivery
 4. Research and Data
 5. Equity

Behavioral Health

Health-To-Go-Machines

Seven machines across the county in partnership with:

- County Libraries
- Correction Centers
- Department of Aging and Disabilities
- Housing Authority of the City of Annapolis

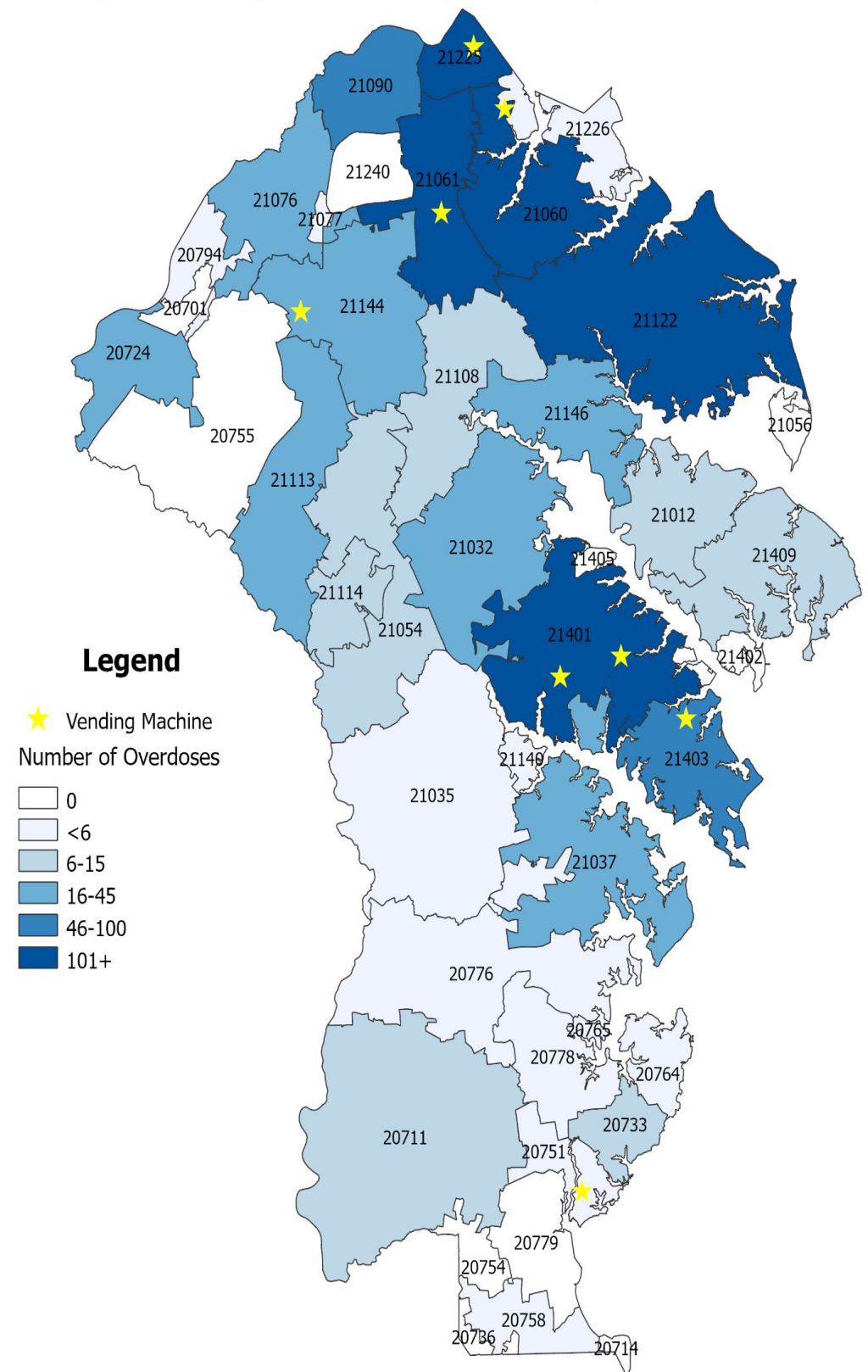
March - September 2024:

- 1,999 Narcan Kits dispensed
- 1,800 Fentanyl Test Strips dispensed
- 19,680 Xylazine Test Strips dispensed
- 556 COVID-19 Tests dispensed



Funding: Six machines were purchased using state Overdose Data to Action funds and one with Opioid Abatement funds. The DOH has an ORP and currently receives naloxone from the state. All machines have information on recovery services.

Opioid Overdoses Occurring in Anne Arundel County,
January 2023-Sept. 5, 2024 (N=1,009)



Behavioral Health

Harm Reduction

Overdose Survivors Outreach FY24

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

276 Overdose Survivors

- 100% attempts to outreach
- 45% direct contact made
- 32% linked to treatment

FY25: Began to receive Health Information
Exchange and EMS Overdose Data

Syringe Services FY24

596 Individuals received harm reduction materials

Referrals made:

- **700** Substance Use Disorder Treatment
- **690** Mental Health Treatment
- **697** Health Care
- **1,249** Housing

67,690 Syringes Distributed

27,820 Syringes Collected

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.

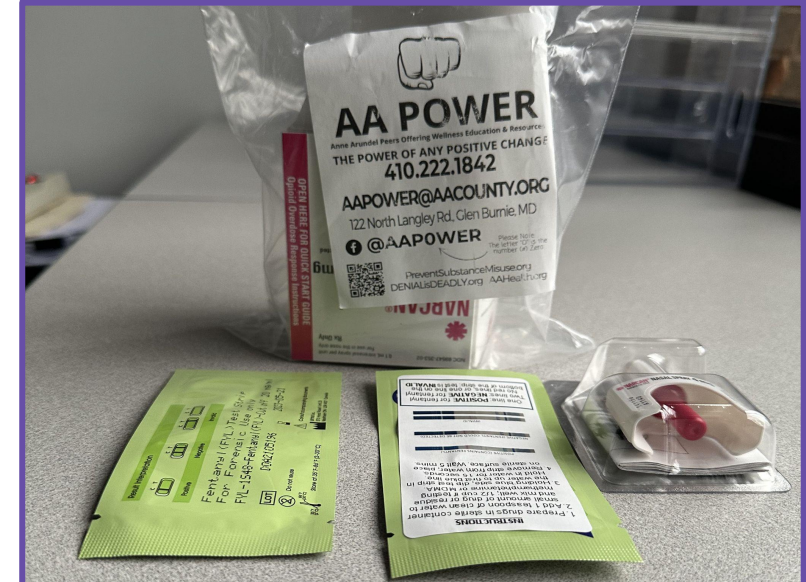
Behavioral Health

Harm Reduction: AA POWER








A peer-delivered and judgement-free street outreach program, with a person-first approach and a focus on quality of life outcomes.

Partner with communities to provide:

- Overdose Prevention: Naloxone 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 lubricant), sexually transmitted infection (STI), hepatitis, and human immunodeficiency virus (HIV) testing education and referrals.
- Syringe Services Program



Anne Arundel County High School Student Substance and Alcohol Use

Measure	% of Students 2022	Change Since 2018	Students Impacted 2022
Currently drink alcohol	20.5%	 Decrease	12th Grade (33.6%) White, NH (25.4%)
Currently binge drink	11.6%	 Decrease	12th Grade (21.6%) White, NH (15.5%)
Current cigarette use	3.5%	 Decrease	Male (4.8%)
Current cigar product use	4.5%	 Slight Decrease	Male (5.5%)
Current electronic vapor product use	14.3%	 Decrease	12th grade (19.7%) Female (17.3%)
Current marijuana use	14.0%	 Decrease	12th grade (21.8%) Female (15.6%)
Ever used prescription pain meds outside prescribed use	10.9%	 Decrease	Multi-Race, NH (19.6%) 9th Grade (15.7%) Hispanic (15.5%)

NH - non-Hispanic. Data source: Maryland Youth Risk Behavior Survey, 2018 and 2022

Decrease = 2% or more difference
Slight Decrease = 1-2% difference

Suicide Prevention Initiatives

- Hired Suicide Prevention Coordinator
- Community Training Offered to stakeholders:
 - Counseling on Access to Lethal Means (CALM)
 - Question. Persuade. Refer. (Q.P.R.)
- Help, Healing and Hope: Making Connections that Matter
- Promoted mental wellness and the normalization of mental health through media campaigns, including BeWellAA and Change the Beat.
- Partnered with the Gun Violence Intervention Team to prevent gun-related suicide, including a letter to providers and creation of senior-specific materials.



185 attendees came to our first ever suicide prevention summit.



Mental Health Agency and DOH at Out of Darkness Walk for Suicide Prevention.

Suicide Prevention Initiative

Literature at Firearm Retailers

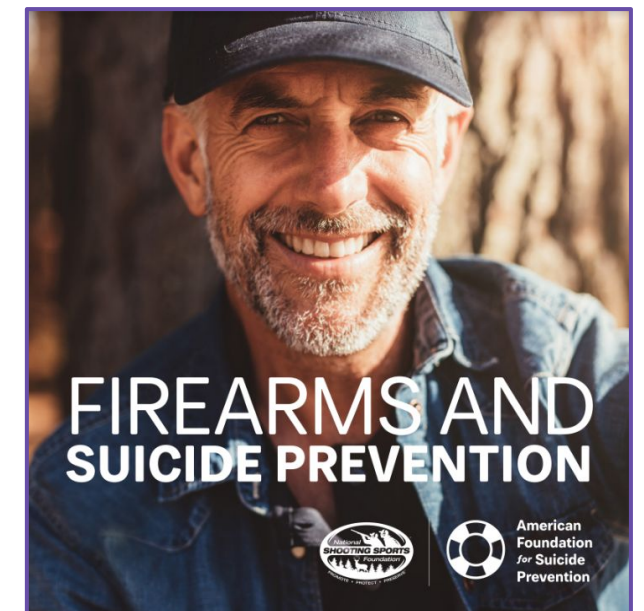
Bill 108-21 mandates that gun dealers in Anne Arundel County distribute suicide prevention and conflict resolution literature to the purchasers of guns and ammunition and make the literature available at point of sale.

On October 8, 2024, The United States Supreme Court declined to take up an appeal related to a May 2022 lawsuit filed by Maryland Shall Issue, Inc. and four local gun shops. Anne Arundel County gun dealers must now provide the pamphlets or else face thousands in fines.



The Department of Health has distributed **88,086** pamphlets to 31 gun shops in the county
(Between April 2022 - July 10, 2024)

- *Note: In May 2022, the county agreed not to enforce Bill 108-21 while the case was being litigated in the United States District Court for the District of Maryland.*

→ April 2024: 30 site visits have been completed
(22 compliant, 3 noncompliant (were compliant on reinspection), 5 “other”)



Anne Arundel County High School Student Mental Health

Measure	% of Students 2022	Change Since 2018	Students Impacted
Felt sad or hopeless almost every day for 2 or more weeks in a row	36.0%	 Increase	LGB (57.9%) Multi-race, NH (51.0%) Female (47.4%) Hispanic (44.6%)
Seriously considered attempting suicide	18.5%	No change	LGB (34.9%) Female (24.3%)
Bullied on school property	14.9%	 Slight decrease	LGB (26.0%) Female (17.2%)
Bullied electronically	12.8%	No change	LGB (23.5%) Multi-race, NH (23.9%) Female (16.4%)
Always or mostly able to talk to a caring adult about their feelings	47.6%	New Measure	Female (40.3%) LGB (38.4%)

LGB - Lesbian, gay, or bisexual. NH - non Hispanic
 Data source: Maryland Youth Risk Behavior Survey, 2018 and 2022

Increase = 2% or more difference
 Slight Decrease = 1-2% difference

Behavioral Health

Overdose Survivors Outreach Services (ODSOS)

- Peers in hospital emergency departments (ED) offer overdose 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.

FY24:

- 115 individuals were provided services
- 37 linked to treatment



Mental Health Agency

- Provide a 24/7/365 Crisis Response System
- Monitor 104 Grantees providing behavioral health services
- Responsible for monitoring all mental health services in the Public Behavioral Health System
- Reduce barriers for disadvantaged citizens to get needed services
- Support persons with severe mental illness with intensive, individualized supports in the community
- Act as liaison with the Criminal Justice System to reduce jail time and coordinate needed treatment
- Monitor and respond to consumer, provider and general complaints
- Respond to Critical Incident reports and monitor trends to improve quality

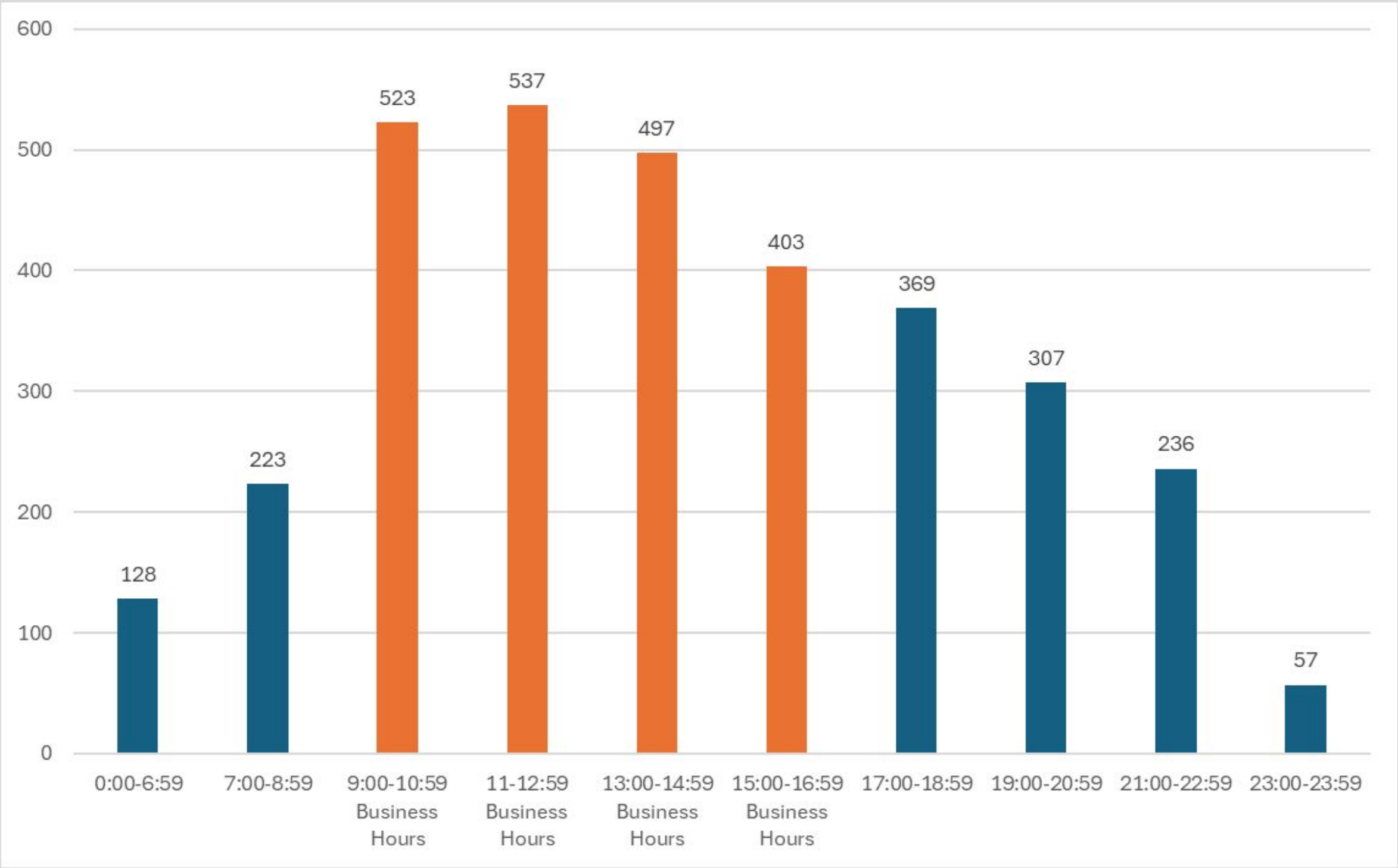


Anne Arundel County Crisis Response System Coordinates Access to Care by Enhancing and Leveraging Partnerships



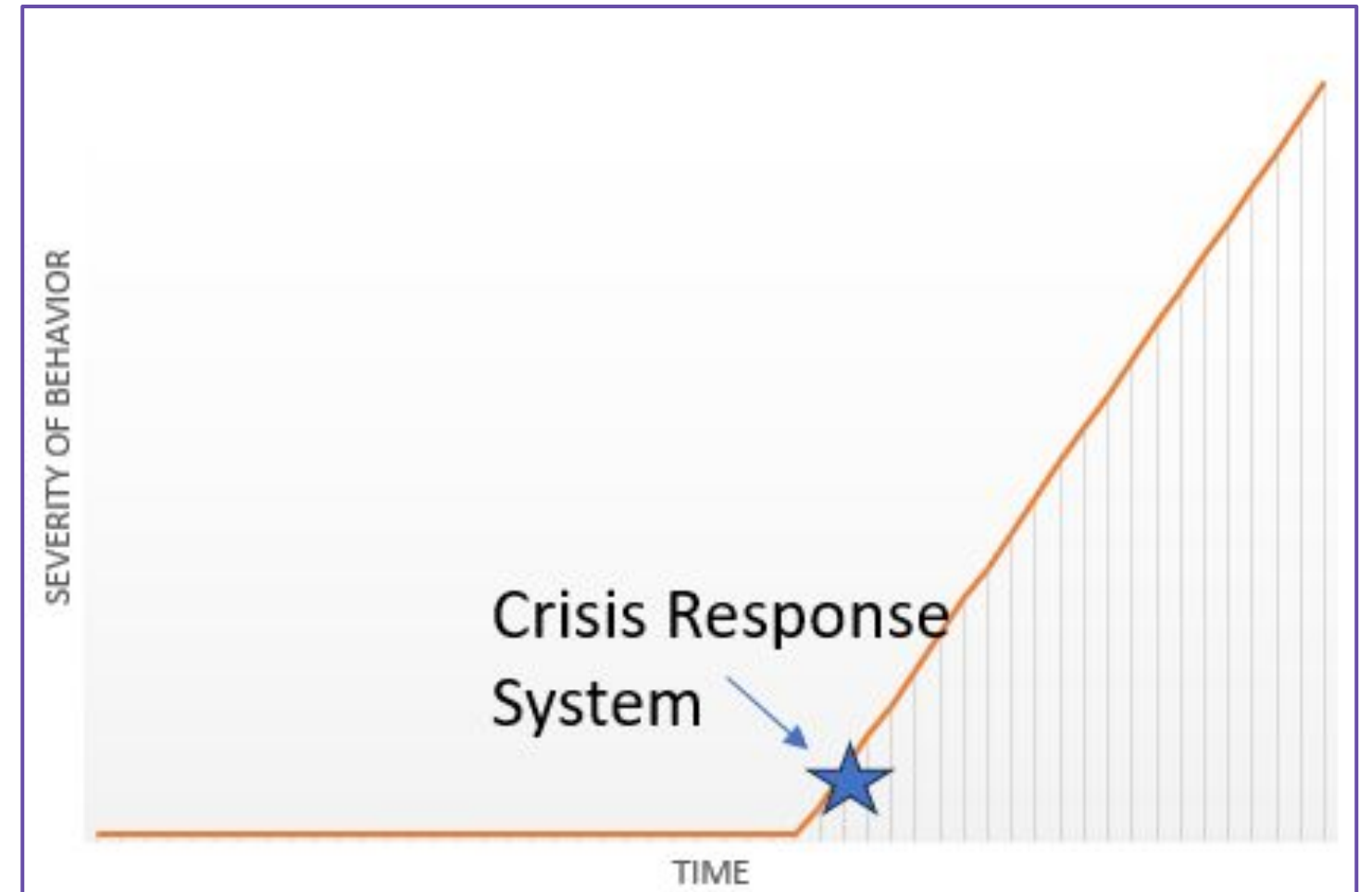
FY24 Crisis Response: 24/7/365

Assessments by dispatch time: 40% of dispatches are outside business hours



Data Trends in Behavioral Health

- FY22 was an all time high for all crisis response services – Warmline, Mobile Crisis, and Crisis Intervention
- FY24 saw leveling off in the demand for the number of services, however, acuity in mental health has been increasing and the cases are highly complex
- Demands for children's services continues to be high
- **Intervention and support are ★key★ to preventing crisis.**



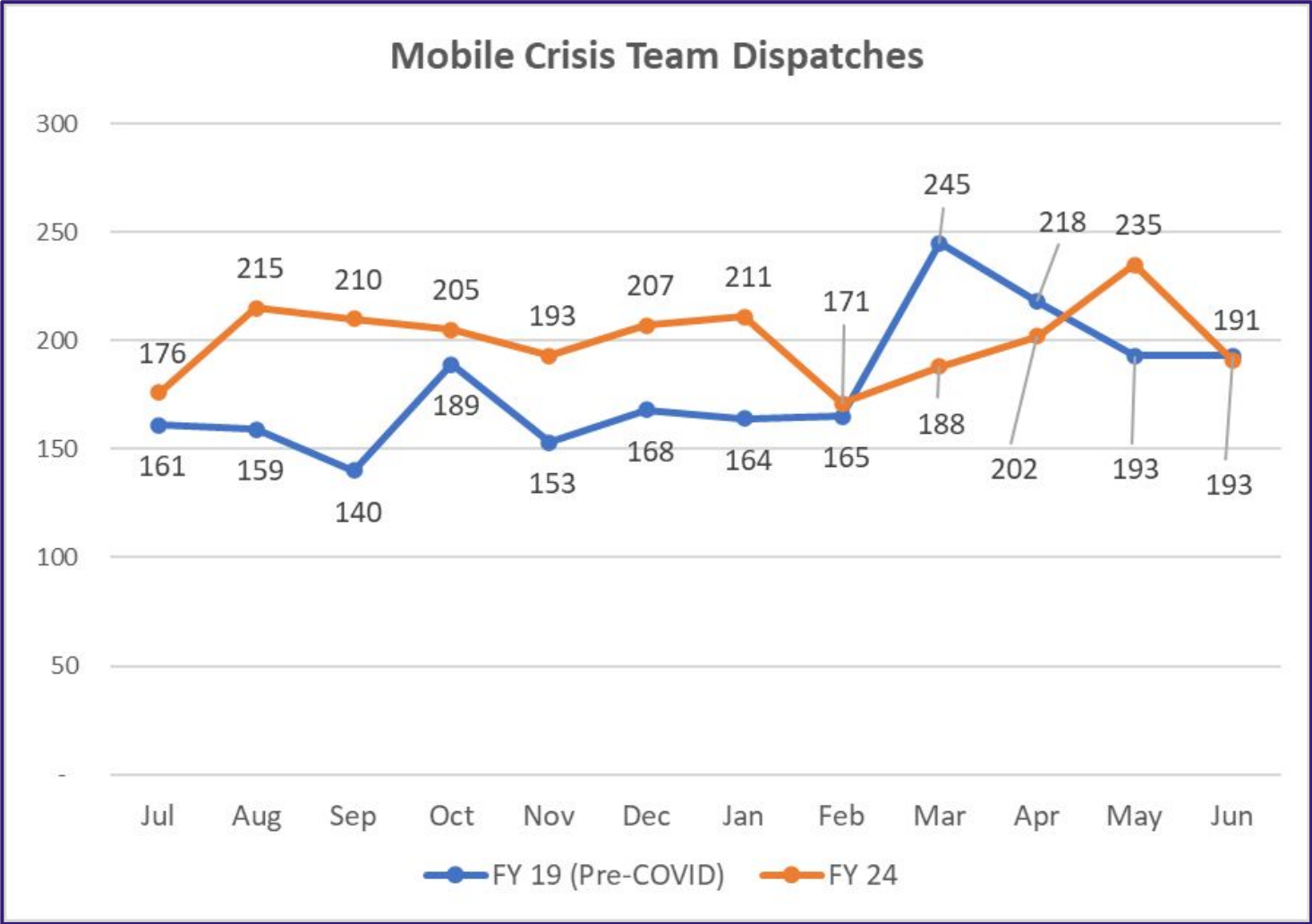
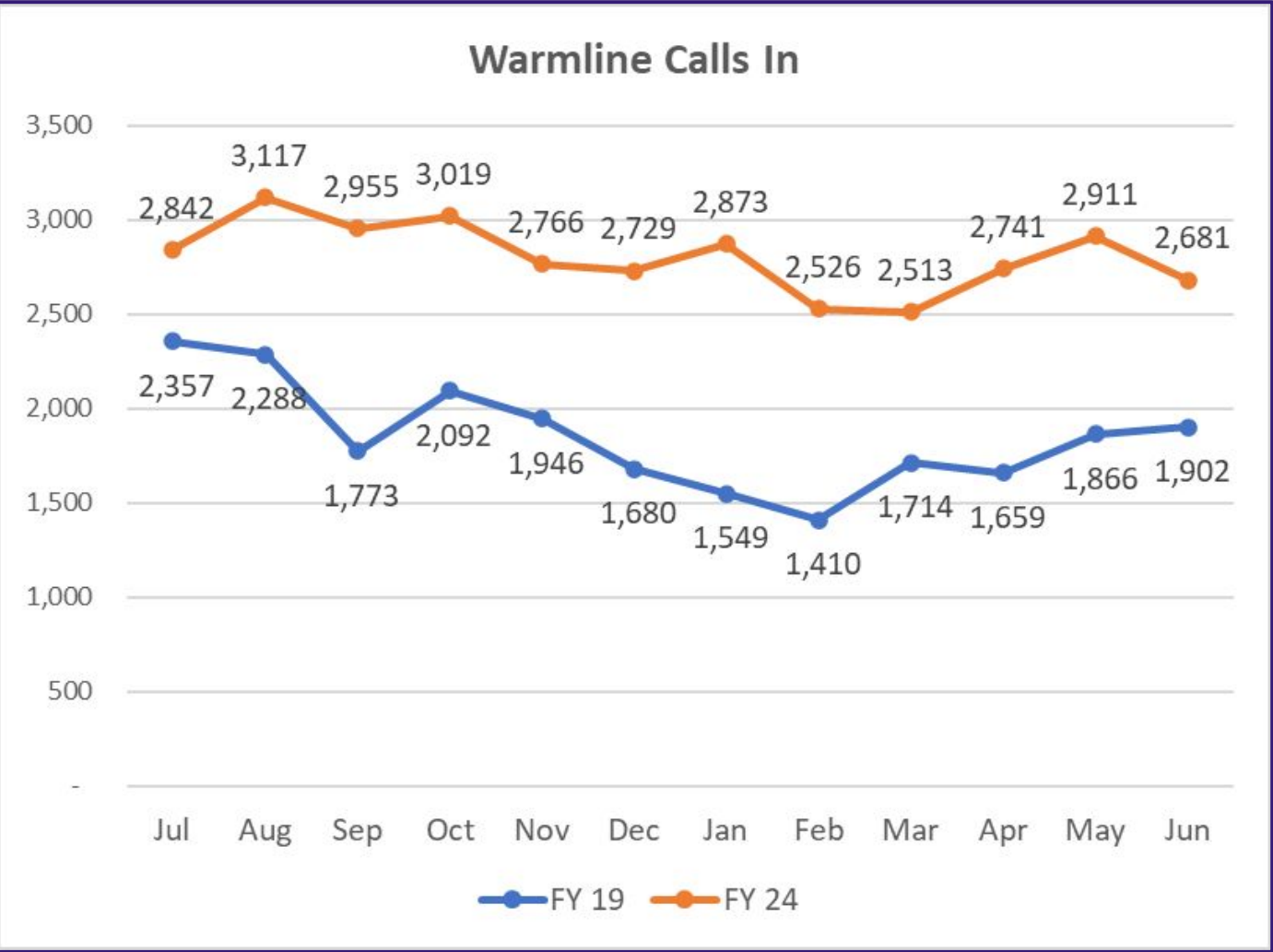
Crisis Response Components

Number of Individuals Served

Component of CRS	FY 20	FY 21	FY 22	FY 23	FY 24
Mobile Crisis Teams	1,529	1,852	1,775	2,169	1,882
Safe Stations	762	678	541	637	520
Warmline	4,831	6,456	7,547	9,776	9,231
Crisis Intervention Teams	435	1,209	2,232	2,055	1,328
Hospital Diversion	1,192	1,261	615	805	553
Mental Health Stabilization Service	57	40	69	79	78
Care Coordination & Outreach *	1,232	1,043	786	1,034	908
Jail Diversion	182	0	110	542	636
Youth	590	613	658	910	735
Total	7,188	8,890	11,872	11,926	11,144

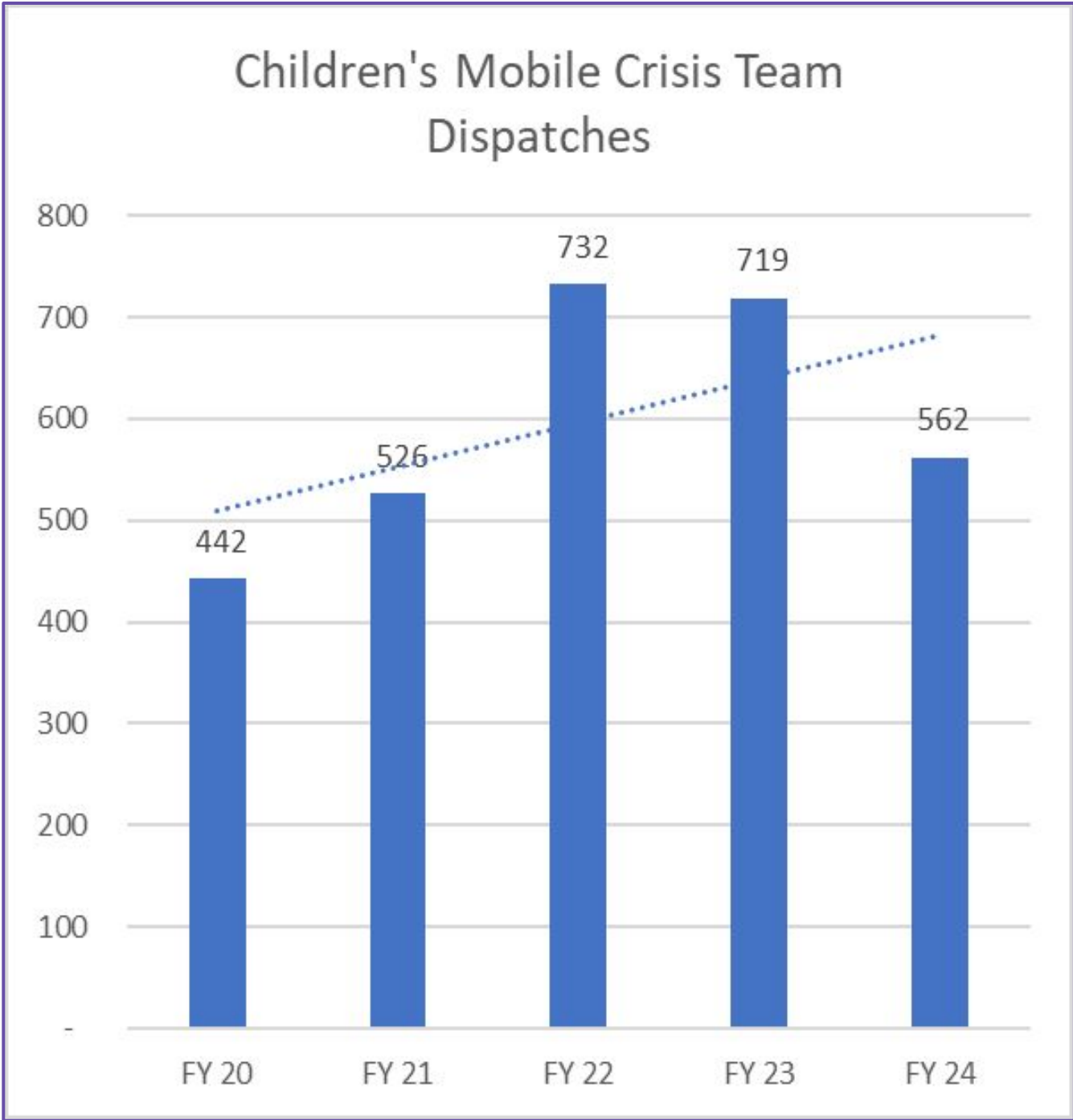
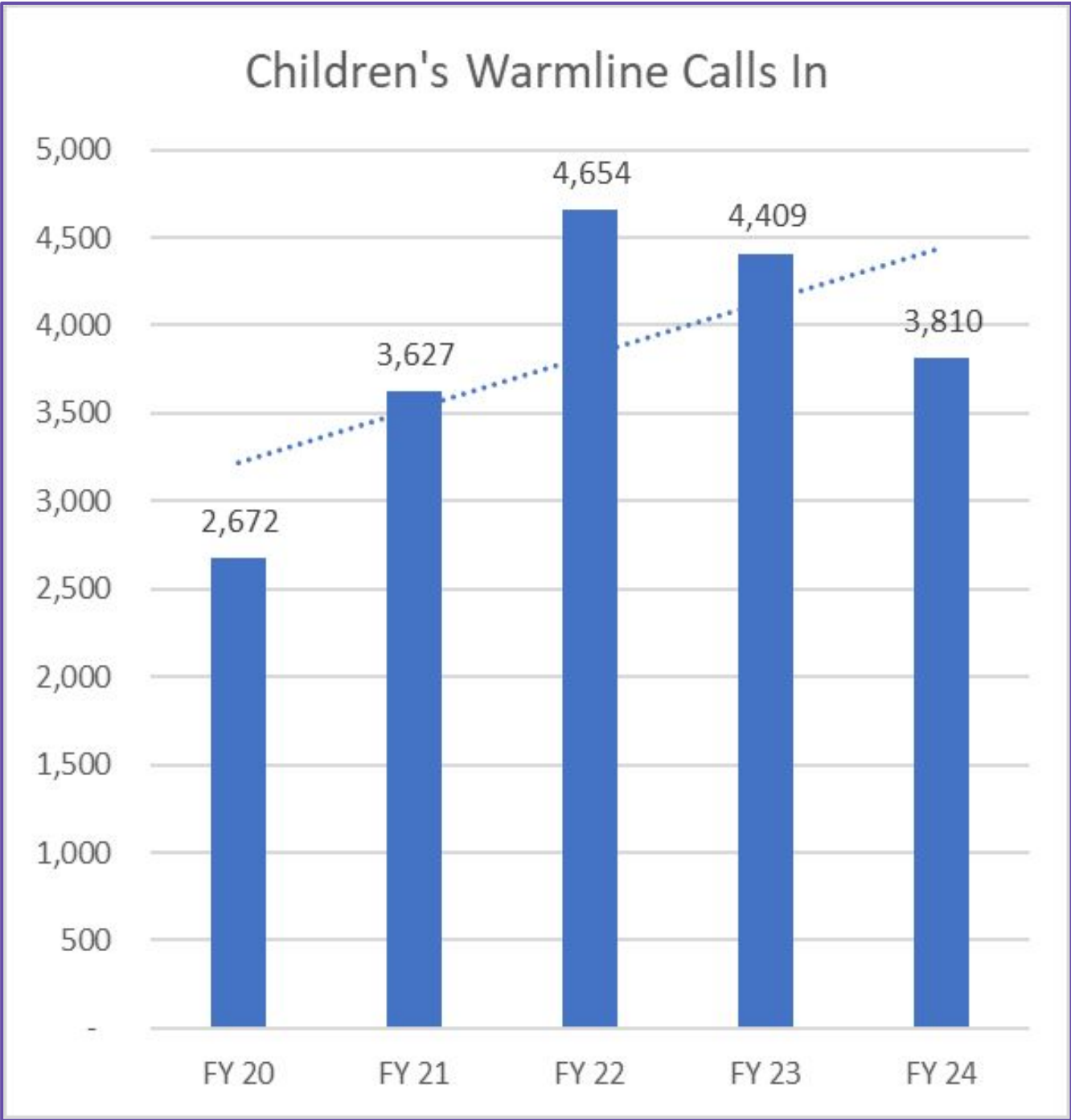
*Individuals may receive multiple services.

Crisis Response System Services



Post-COVID services continue to be 20% to 30% higher than Pre-COVID.

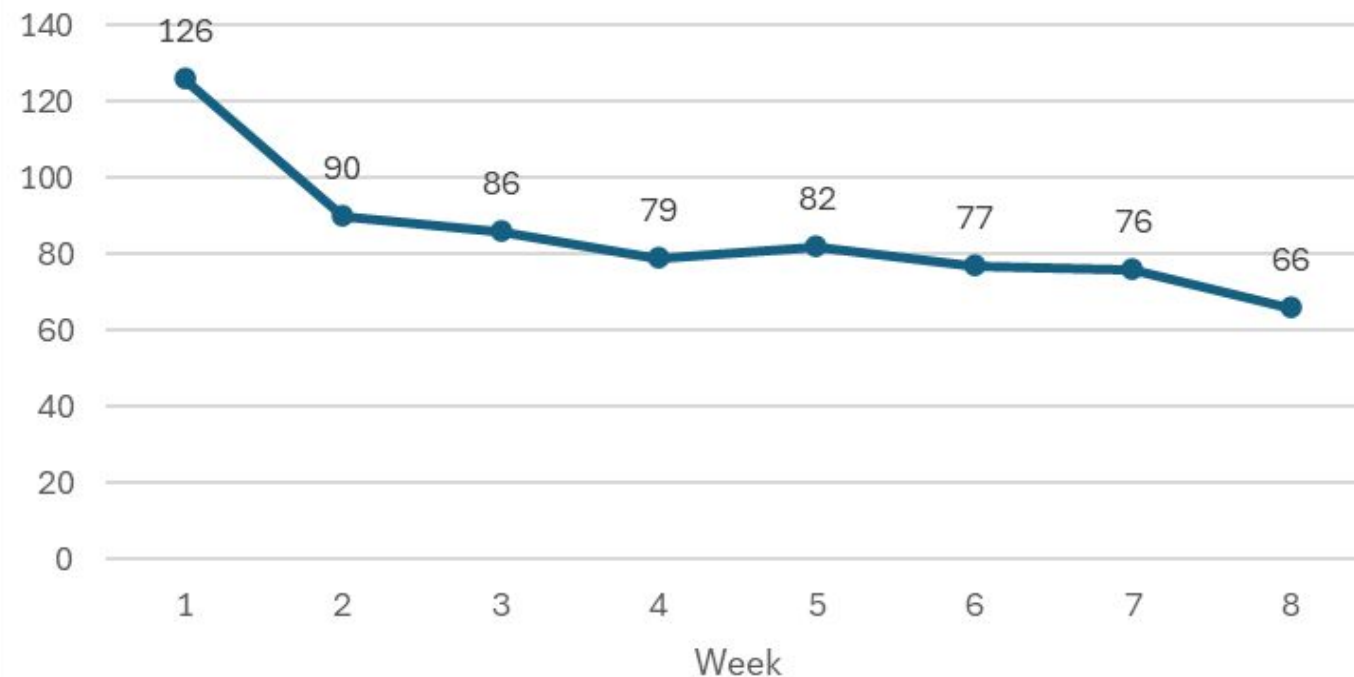
Crisis Response System - Addressing Children's Needs



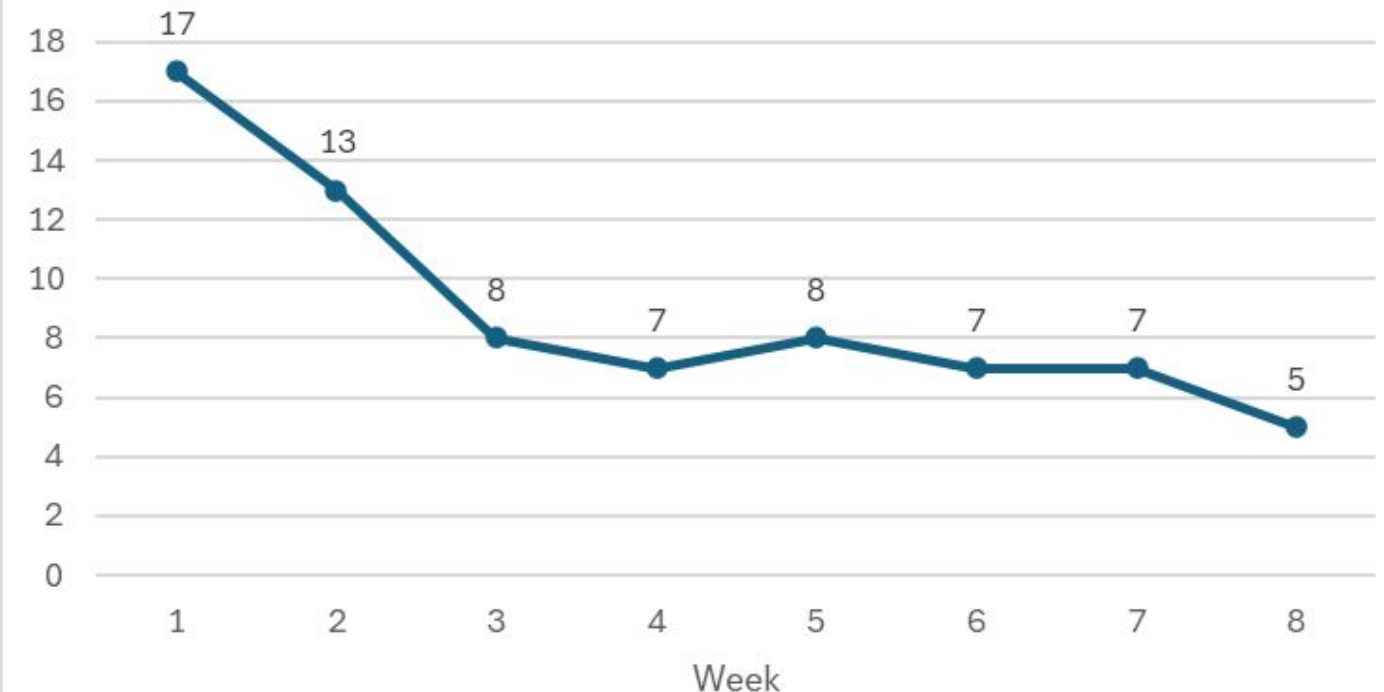
Crisis: Mental Health Stabilization Services (MHSS)

- Responds to schools and the community to assist youth and their families during a behavioral health crisis, provide follow up services and linkage to community-based services.
- MHSS Clinicians work to stabilize the family until they are connected to community-based services.
- 45 youth/families served in FY 23, 50 youth/families served in FY 24.
- Parents reported a **48% decrease** in the Intensity of the Behavior and a **71% decrease** in the Parental Perception of the Problem on average in FY 24.

FY 24 Average Intensity of the Behavior



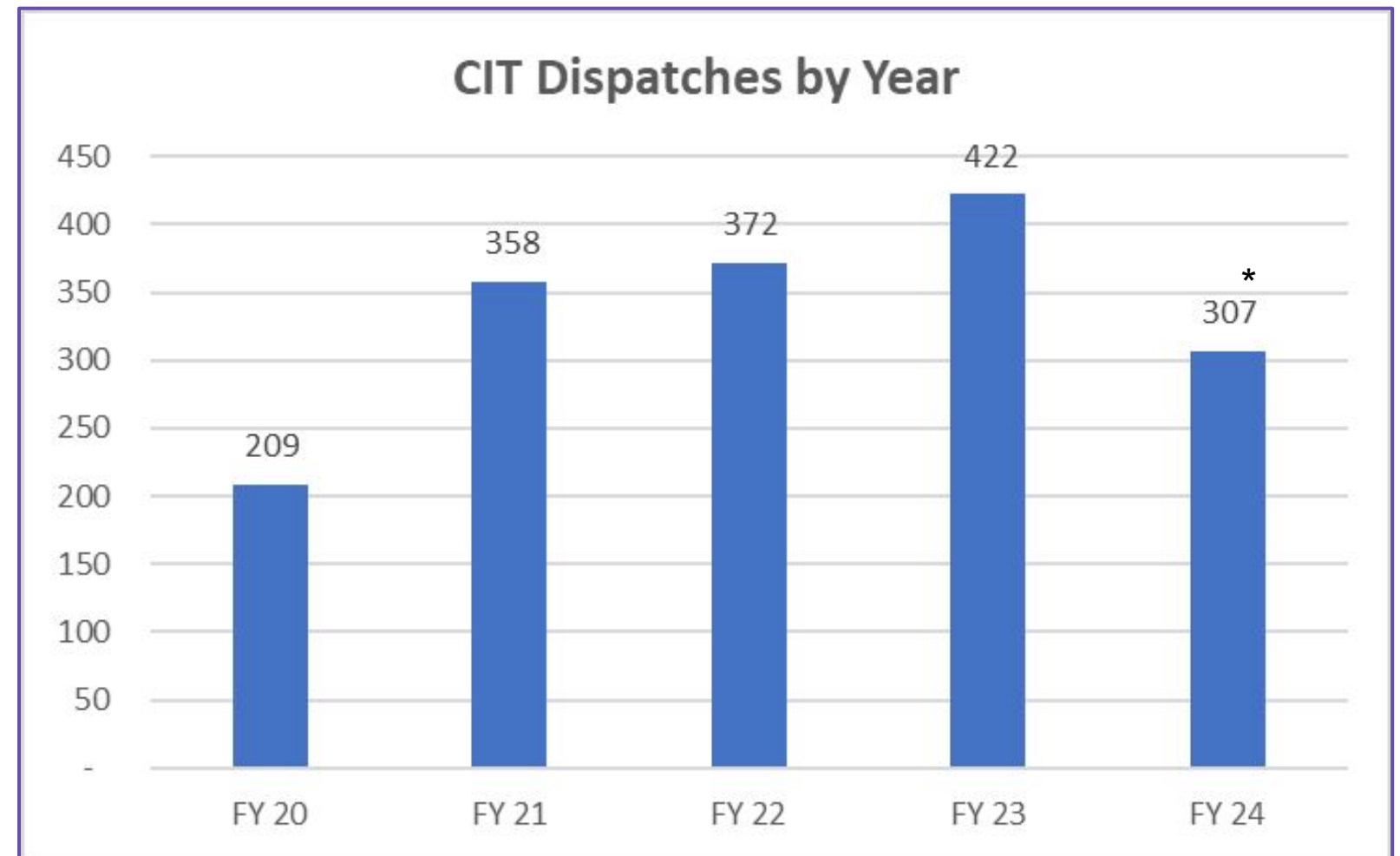
FY 24 Average Perception of the Problem



Crisis Response System

Crisis Intervention Team Challenges

- In FY 24, Crisis Intervention Team (CIT) assessments were 19% higher than the pre-COVID
- Demand for CIT has increased - acuity/threats
- CIT Services depend on having AACPD officers assigned to the CIT unit
- Have gone from eight assigned officers to five



*New cases capped due to reduction in available officers.

Crisis Response System: Safe Stations Program

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

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.

- **7,189** assessments completed since program began
- **1,530** 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
- **51%** of individuals connected to treatment remain substance free for at least 90 days post intervention



Crisis Response System Diversion Programs

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 for community supports
- **Reduces homelessness and/or incarceration**
- **Prevents suicide**
- 66 assessments completed in FY 24
- Weekly meeting with Luminis Health and Baltimore Washington Medical Center hospital staff to improve patient flow, brainstorm challenging cases and improve quality

Jail Diversion

- Established in FY 2015, the program has an **8% Recidivism Rate (RR)** over the last 5 years (Average RR in MD is approximately 40% for rearrests in the first three 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

Mental Health Agency: Housing Programs

Permanent Supportive Housing (PSH): In which housing assistance (e.g., long-term leasing or rental assistance) and supportive services are provided to assist households with at least one member (adult or child) with a disability in achieving housing stability.

Program	Capacity
Continuum of Care Housing	26 individuals/families
Supported Housing Opportunity Program	21 individuals/families
Supported Housing Developers	40 housing units
Housing Case Management	All individuals in PSH programs
Eviction Prevention Housing Funds	80 individuals served in FY 24
Assisted Living Facilities (individuals discharged from state hospitals)	38 individuals housed in FY 24
Fee For Service Residential Rehabilitation Programs (individuals from state hospitals and community placements)	up to 272 beds available

Mental Health Agency (MHA)

- Community Engagement
 - More than 70 events in FY 24
 - 30,000+ information items distributed
- Monitors 104 contracts for Mental Health Services in the community



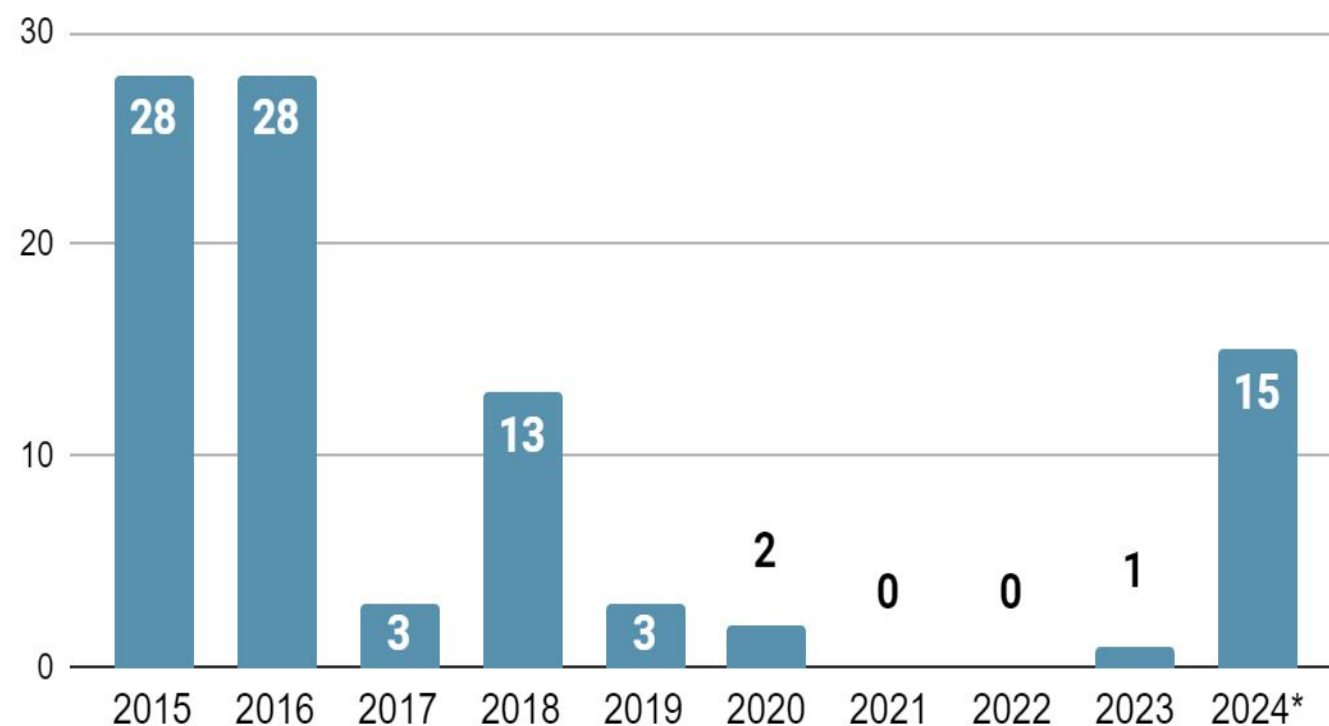
Disease Prevention and Management

- Breast, cervical and lung cancer screenings
- Childhood immunizations
- Chronic disease prevention/Education
- Disease surveillance/Outbreak Management
- HIV/AIDS case management
- HIV/Hep C/Syphilis/STI testing
- Immunization titers
- TB testing, Treatment and Case Management
- Pregnancy testing
- PrEP Referral
- Rabies prevention
- Safe sex kits
- Tobacco cessation/Enforcement
- Vaccines (Influenza, COVID-19, Mpox)



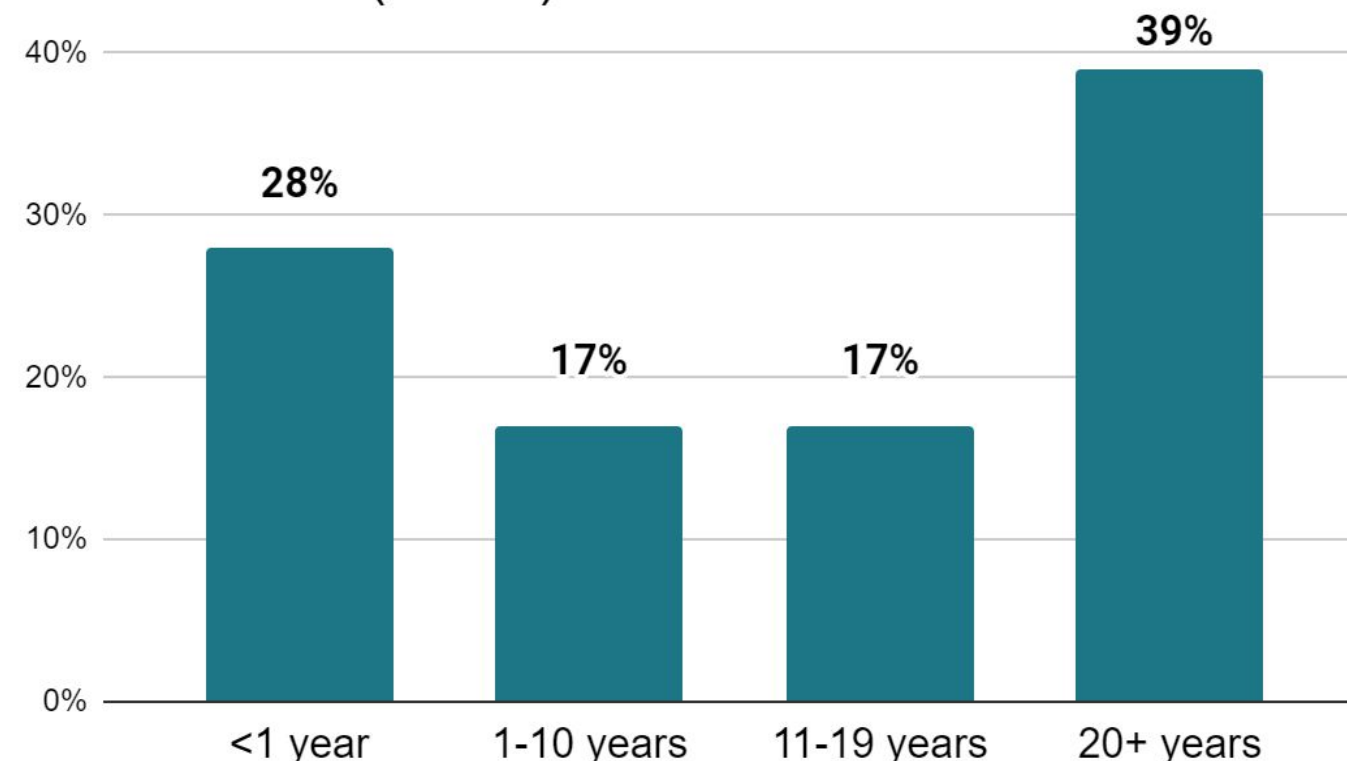
Pertussis (Whooping Cough) in Anne Arundel County

Pertussis Cases by Year, Anne Arundel County, 2015-2024



Eleven cases have been reported in the past three months (July-September)

Pertussis Cases by Age, Anne Arundel County, 2020-2024* (N=18)



Among cases with a known vaccination status:

- 50% were up-to-date with a pertussis-containing vaccine
- 20% were not eligible for vaccination due to age
- 30% were not up-to-date

Year to date through 9/20/2024

Source: NEDSS, MDH Selected Notifiable Conditions Dashboard

Disease Prevention and Management

COVID-19 (2024-2025 Formula) Vaccinations

- Updated to a monovalent vaccine based on the Omicron JN.1-lineage of SARS-CoV-2, KP.2
- CDC recommends updated vaccine for everyone 6 months and older
- Cost is covered by insurance companies (Private, Medicare, Medicaid)
 - Insurance - Pharmacies, FQHCs, other medical providers
 - No Insurance - Local health departments (limited supply) through a partnership with the Maryland Department of Health (MDH).
- Department of Health Activities
 - Vaccines for Children (VFC)
 - MDH partnership for uninsured/underinsured adults
 - Private purchase (limited)



Disease Prevention and Management

Healthy Communities Program

- Served **7,681** persons, providing over **15,446** vaccinations in DOH health centers and **627** vaccinations in the community.
- Expanded hours at health centers.
- Increased capacity due to increased number of staff cross-trained to create the Healthy Communities Program.
- Extended hours for Back-to-School vaccines.
- Provided community outreach, education and vaccination to vulnerable populations at Senior Centers, Detention Centers, shelters, libraries and provided services to homebound residents.



Health Center Locations

- Baymeadow Health Center
- Glen Burnie Health Center
- Lula G. Scott Community Center
- Magothy Health Center
- Parole Health Center



Healthy Communities Program

Community Health Centers

July 1, 2023 to June 30, 2024:

- Served **5,043** children between the ages of birth to 18
- Provided **15,446** vaccinations
- Administered **1,835** flu vaccines
- Referred **392** individuals to other DOH services or other resources



Mobile Services

From July 1, 2023 - June 30, 2024:

- Administered **201** influenza vaccines to seniors
- Distributed **8,332** KN95 masks
- Administered **106** vaccines (COVID-19 and influenza) at Homeless Shelters, Recovery Houses, Food Pantries and in Minority Communities
- Administered **113** COVID-19 and influenza vaccines to homebound residents
- Administered **207** doses of *Tetanus, diphtheria, pertussis (Tdap) and Meningococcal ACWY (MCV4)* to rising 7th graders

HIV/STI Prevention and Care Program

HIV/AIDS Case Management

Assists county residents with HIV/AIDS with access to needed services:

- Primary medical and dental care
- Insurance and pharmacy coverage
- Housing and transportation
- Nursing Services
- Mental Health and substance use referral
- Bi-monthly clinic facilitated by Johns Hopkins

From July 1, 2023 - June 30, 2024:

- Served **204** clients
- Enrolled **23** new clients and reactivated **8** clients
- Completed **300** clinic visits and **62** Mental Health visits




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, 2023 to June 30, 2024:

- Performed **414** HCV tests, **506** HIV tests and **104** Rapid syphilis tests
- Distributed **1502** Safe Sex Kits
- Answered **187** STI Hotline calls and referred **633** residents for STI testing services

Anne Arundel County High School Student: Sexual Activity

Measure	% of Students 2022	Change Since 2018	Students Impacted
Ever had sexual intercourse	25.3%	 Decrease	12th Grade (41.3%) LGB (33.7%)
Currently sexually active	17.8%	 Decrease	12th Grade (31.1%)
Used a condom during last sexual intercourse (among those currently active)	48.6%	 Decrease	Black, NH (36.1%)

Decrease = 2% or more difference

Current sexual activity was reported by 5.3% of 9th grade students, but was reported by **19.2%** of 10th grade students.

NH - non-Hispanic; LGB - Lesbian, gay, or bisexual.
Data source: Maryland Youth Risk Behavior Survey, 2018 and 2022

Disease Prevention Management

Epidemiology/Disease Surveillance

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

From July 1, 2023 to June 30, 2024:

- **189** outbreaks (164 COVID-19 and 25 other)
- **1,907** other disease investigations
- **2,033** incidences of possible human rabies exposure
- **96** residents completing recommended rabies post-exposure treatment
- **9** animals tested positive for rabies (6 raccoons, 2 foxes, and 1 bat)

Tuberculosis Control

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

From July 1, 2023 to June 30, 2024:

- **16** new active TB cases
- More than **44** case contacts evaluated
- **3,375** daily Directly Observed Therapy (DOT and vDOT) visits
- **80** cases of latent TB infection started treatment
- **1,344** Quantiferon TB tests and **23** TB skin tests

Disease Prevention and Management

Chronic Disease Prevention Program

2023 - 2024

Cancer Screening Services

- **1,232** breast and cervical cancer screenings
- **1,069** clinical breast exams
- **1,057** mammograms - **6** breast cancer diagnoses
- **507** pap tests - **2** cervical cancer diagnoses
- **430** HPV tests
- **3** lung cancer screenings

Tobacco Enforcement

- **452** tobacco compliance checks
- **390** retailers passed compliance checks
- **50** retailers issued first time violations
- **12** retailers issued repeat compliance violations
- **211** retailers educated on tobacco sale laws

Community Education

Tobacco and Cancer Prevention:

- Conducted **178** outreach, education and media events
- Reached **183,940** individuals
- **222** participants in smoking cessation activities
- **48** referrals to the Maryland Tobacco Quitline
- Supported community partners in tobacco and nicotine product use prevention work



Chronic Disease Prevention supports a 25 member local TOPS chapter to help manage healthy weight and reduce risk factors for diabetes.

Disease Prevention Management and Environmental Health

Zoonotics, Animal Bites and Public Health

Animal Care and Control is responsible for animal abuse, licensing, shelter care and adoption.

The Department of Health protects the health and safety of humans. Our involvement with animals is due to the link to possible diseases that could infect a human such as rabies and psittacosis.

Examples:

- Animal Control enforces quarantine orders ordered by the Department of Health after animal bites.
- The Department of Health purchases rabies vaccine for animal control to inoculate pets so humans don't get rabies.
- Our Oral Rabies Vaccine Program helps control rabies so human interaction with wildlife is safer.
- Public notifications to alert humans of a rabid animal in the area.
- License and inspect pet stores or individuals selling birds in case of a psittacosis infection (so it can be traced).
- The Department of Health determines the appropriate quarantine guidelines for animals involved in human bites/scratches after review of information gathered.
- Assists individuals in receiving rabies post-exposure treatment if needed.

Brooklyn Park Healthy Food Pantry

- North County Recreation Center
- Addresses Brooklyn Park residents' limited access to fresh fruits and vegetables, meat, fish, dairy and shelf stable foods
- Nutrition education and free healthy food choices

July 1, 2023 - June 30, 2024:

- **2,223** families (over **8,201** residents)
- **102,304** pounds of food (over **51** tons)
- **25%** fresh produce (over **12** tons)

FY25 Priorities:

- Sustain pantry by working with a community partner to take over food pantry operations
- Increase mobile community produce and food deliveries
- Continue Southern Anne Arundel County food access work



Family Health Services

- Access To Care
- Assessment, Evaluation, and Review Services/Nurse Monitoring Services
- Childhood Asthma and Lead Environmental Case Management
- Dental
- Maternal and Child Health
- Medical Assistance Transportation
- 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)

In FY24, this program served:

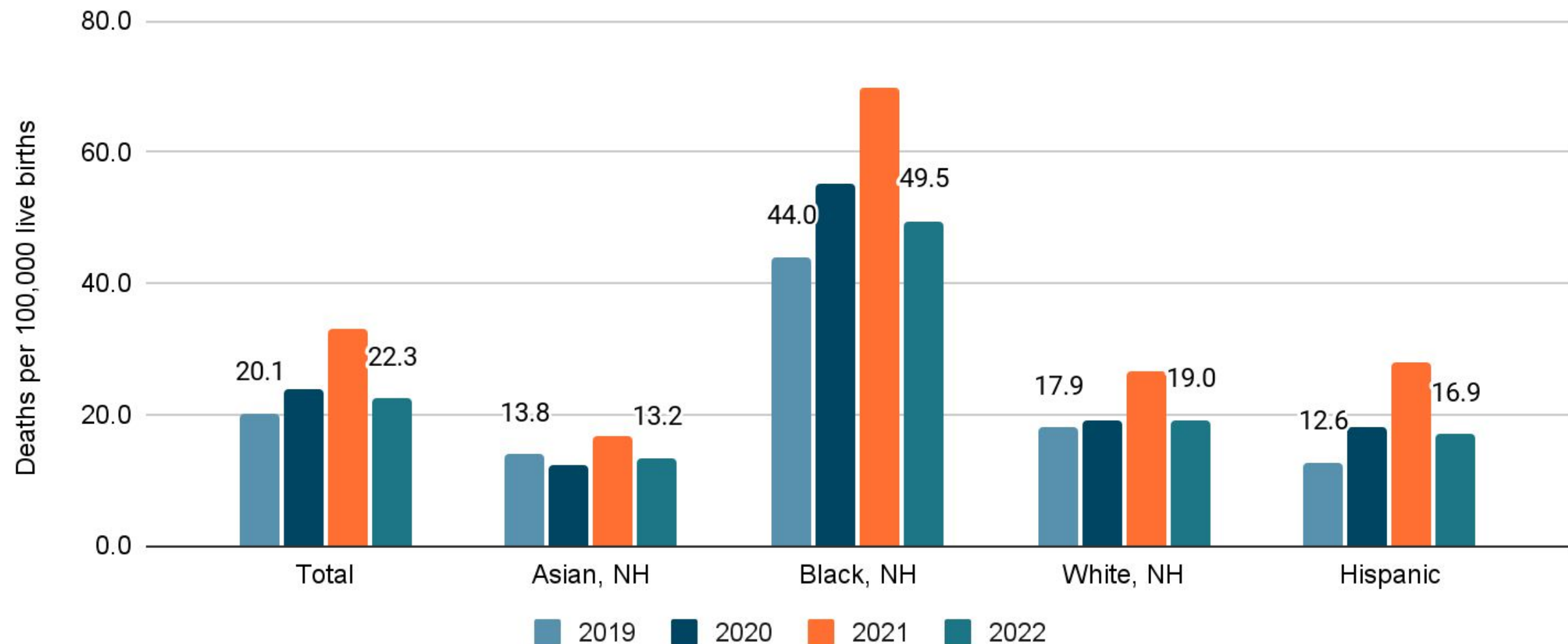
- 33 newly enrolled women with Substance Use Disorder or SENs
- 106 newly enrolled pregnant women, 87 of which resided in high risk census tracts
- 110 newly enrolled infants
- **58 out of 62 babies born weighed more than 5.5 lbs**
- 4 babies were born weighing between 3.3 and 5.5 lbs



Maternal Mortality Rates

U.S. Maternal Mortality Rate **decreased** from 2021 to 2022, from **32.9 deaths to 22.3 deaths per 100,000 live births**

Maternal mortality rate, by race and Hispanic origin: United States, 2019-2022



NH - non-Hispanic

Data source: Hoyert DL. Maternal mortality rates in the United States, 2022. NCHS Health E-Stats. 2024.

Family Health

Maternal Mortality Rates in Maryland

- In Maryland, there is 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 increases from 2019 to 2021 for non-Hispanic Black and Hispanic women were significant.

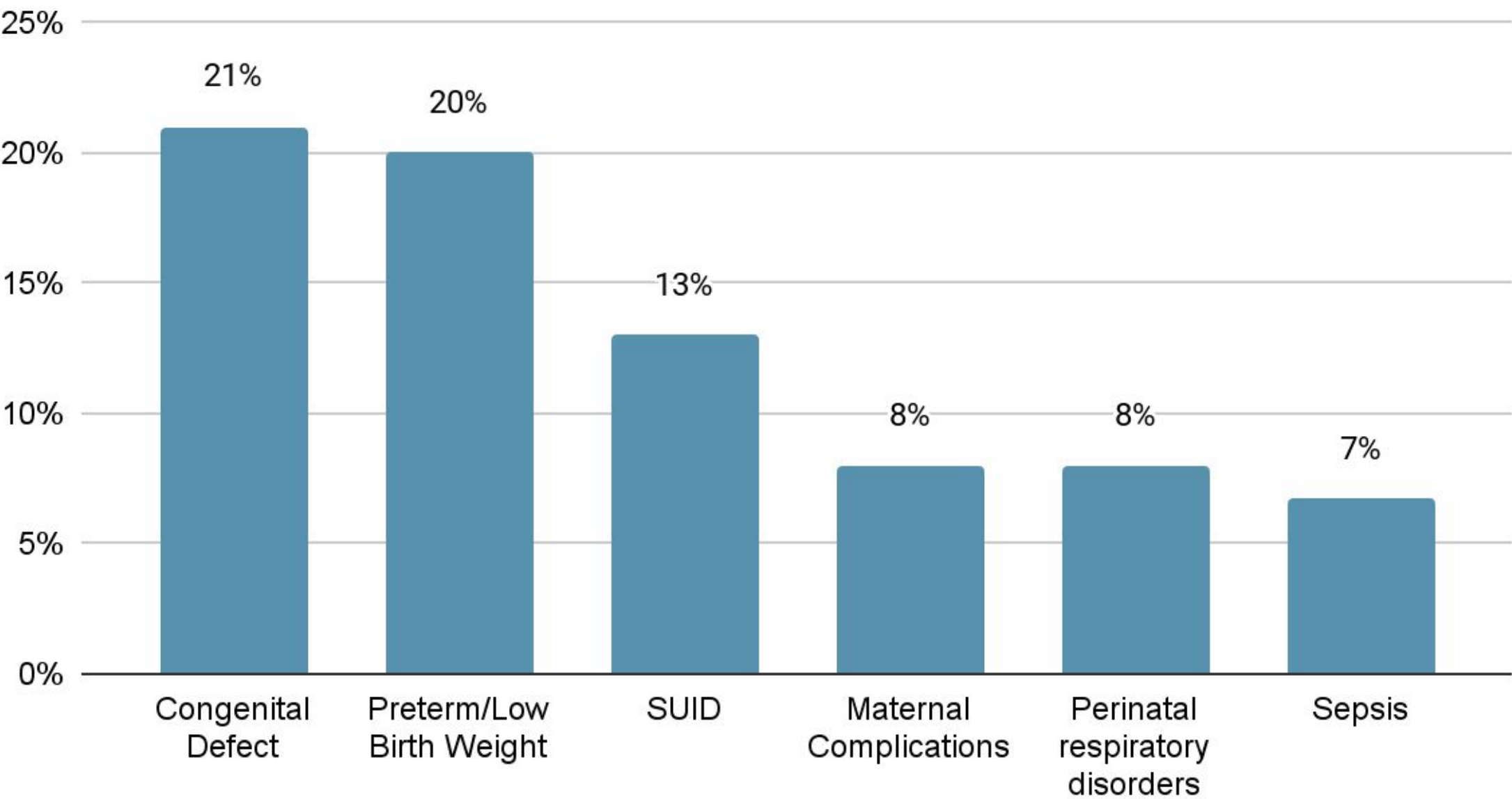
The most recent Maternal Mortality Rate in Maryland for non-Hispanic Black women was **49.5 deaths per 100,000 live births**.

This rate is **2.6 times the rate** for non-Hispanic white women.



Infant Mortality

Infant Mortality by Cause, Anne Arundel County, 2017-2021

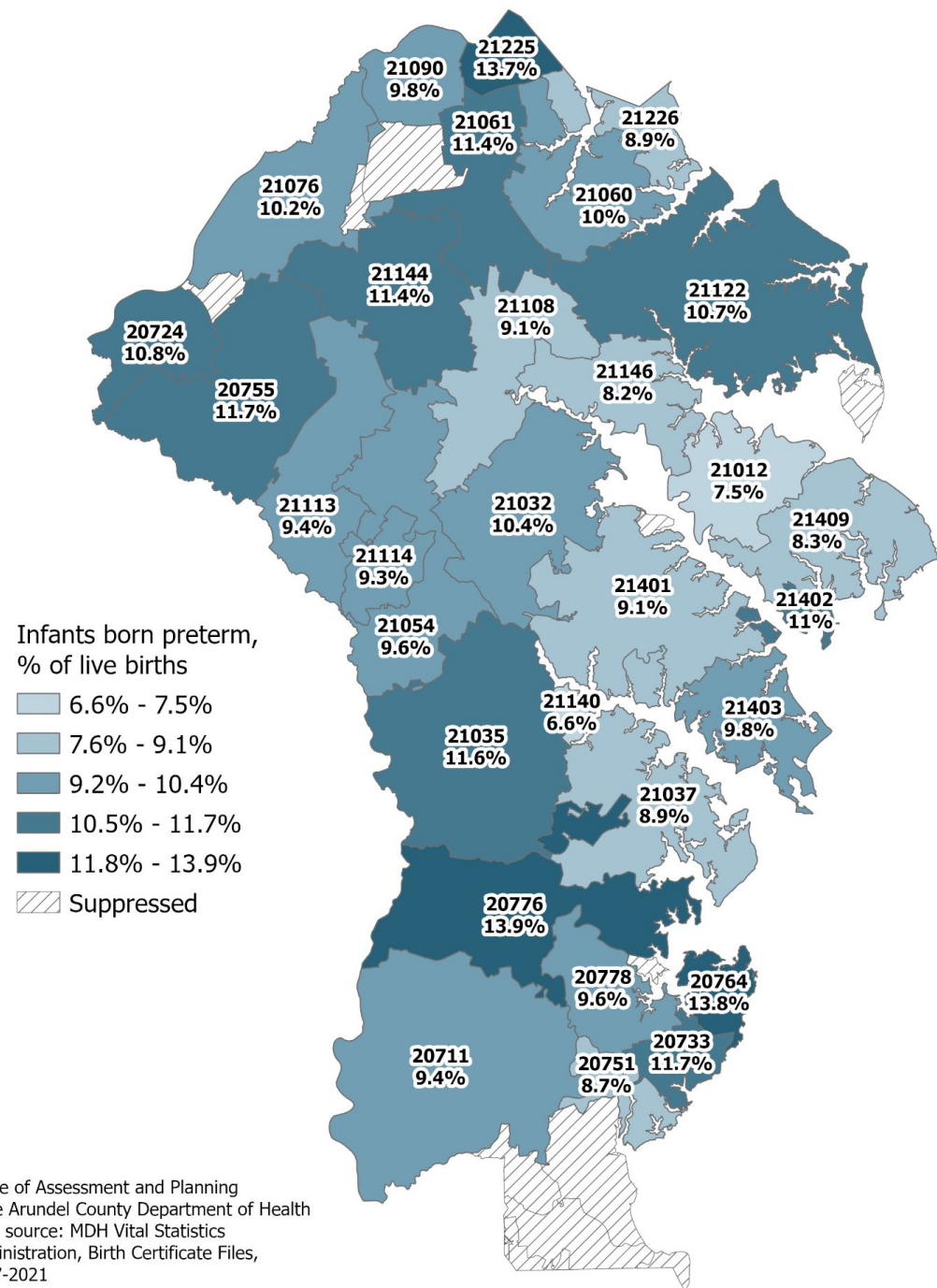


SUID - Sudden Unexpected Infant Death
Source: Maryland Department of Health, Vital Statistics Administration Death Certificate Files, 2017-2021

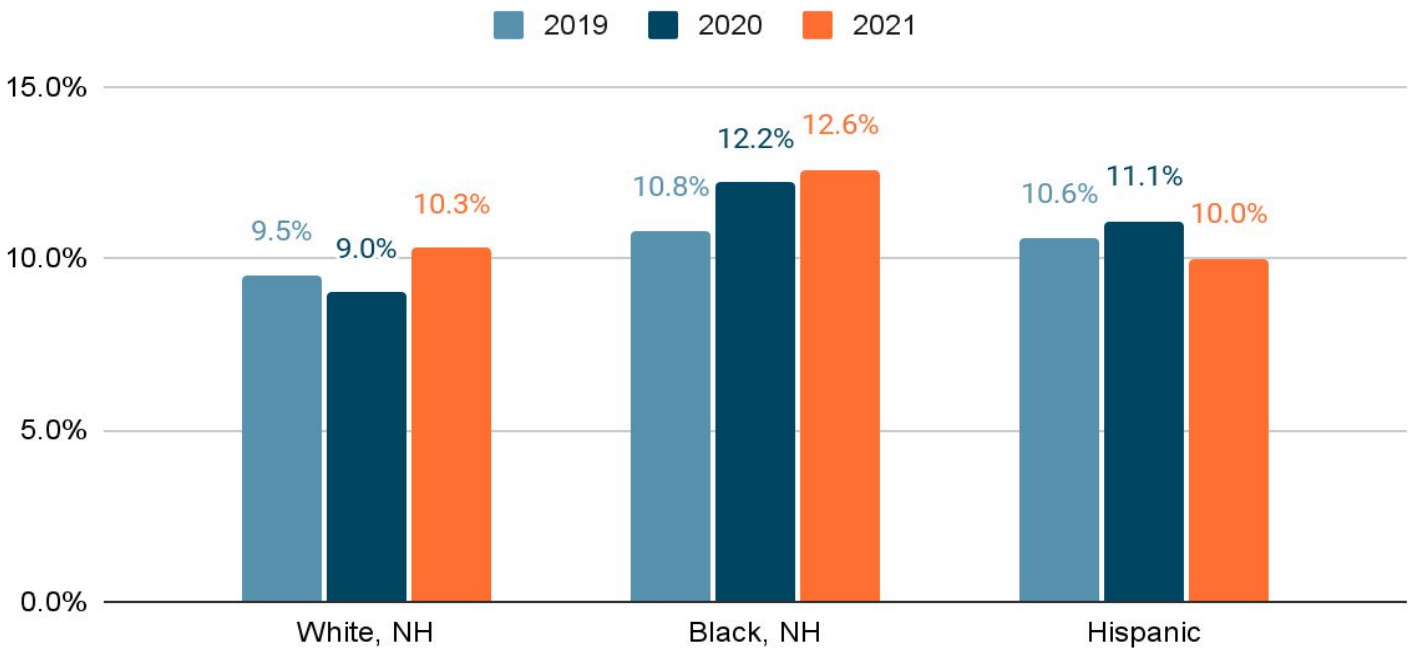
Infant Mortality

Selected Risk Factors for Infant Mortality

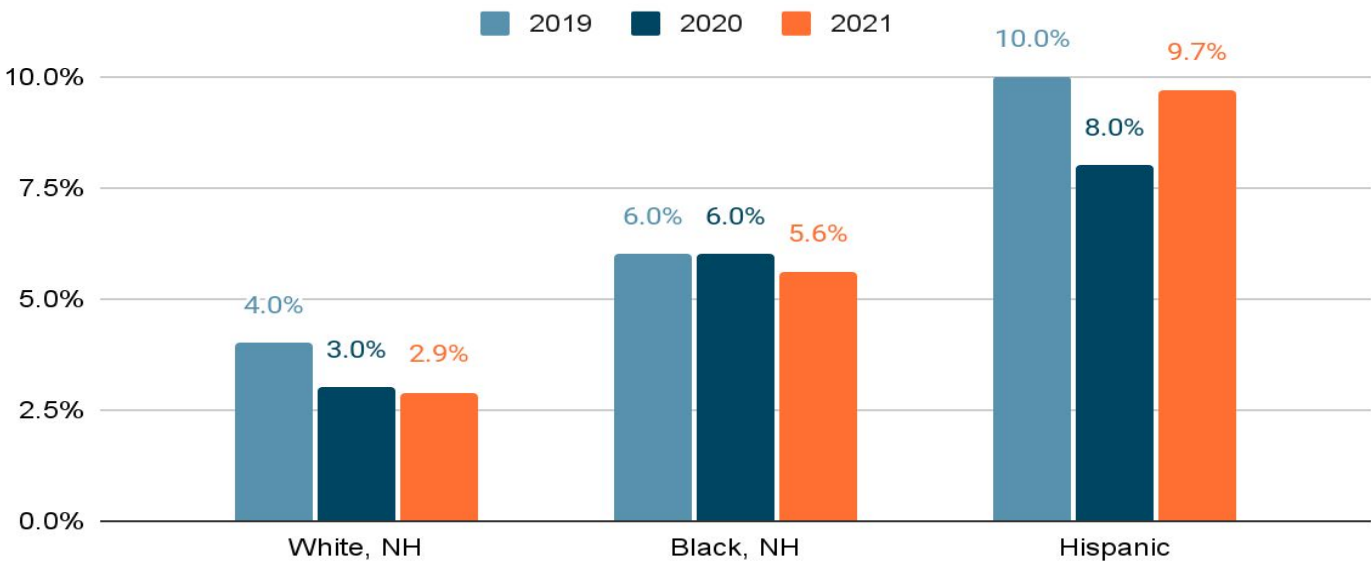
Infants born preterm (<37 weeks of gestation) by ZIP code, Anne Arundel County, 2017-2021



Proportion of Infants born Preterm by Race/Ethnicity, Anne Arundel County, 2019-2021



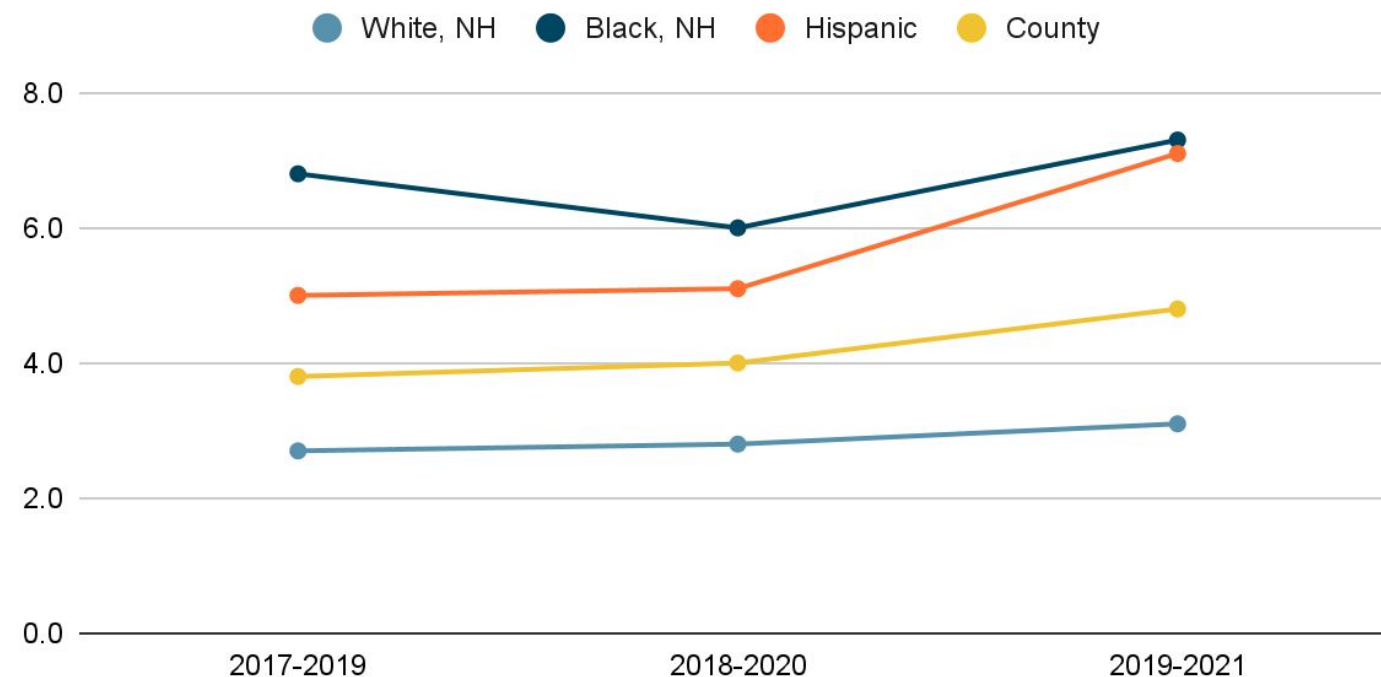
Late or No Initiation of Prenatal Care by Race/Ethnicity of the Mother, Anne Arundel County, 2019-2021



Infant Mortality

Selected Risk Factors for Infant Mortality (continued)

Infant Mortality Rate by Race/Ethnicity, Anne Arundel County, 2017-2021

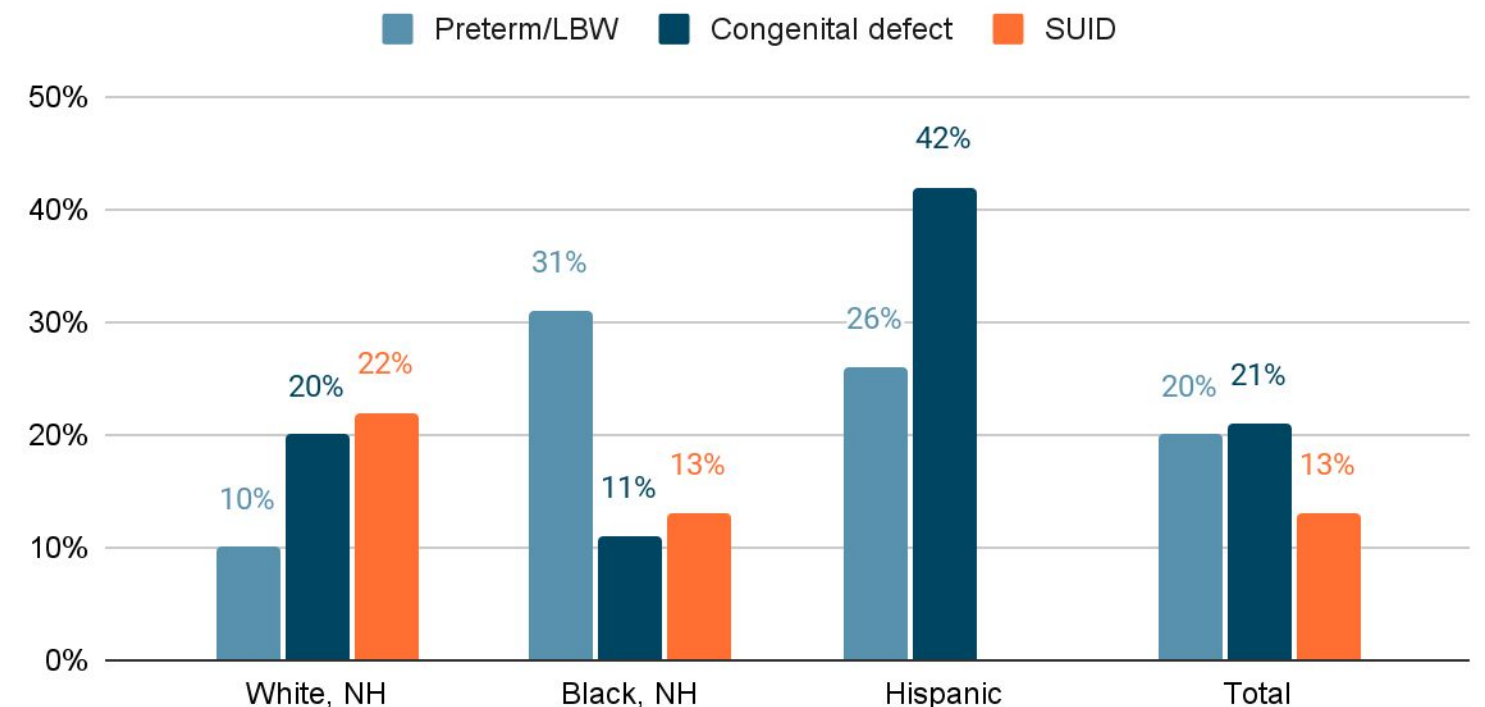


- Infant mortality rates include deaths to live births through age 1 year per 1,000 live births
- In 2019-2021, Black, Non-Hispanic and Hispanic infants had a mortality rate that was **more than twice** that of white, Non-Hispanic infants

The leading causes of infant mortality vary by race and ethnicity:

- Black, NH: Preterm and/or low birth weight
- Hispanic: Congenital defects
- White, NH: Sudden unexpected infant death

Causes of Infant Mortality by Race/Ethnicity, Anne Arundel County, 2017-2021



Family Health

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 2024, the DOH commits to improve maternal outcomes by:

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



Maternal and Infant Health Task Force

Bringing together partners from hospitals, pediatric providers, mental health professionals and various stakeholders to identify solutions and improvements for women and infant care in Anne Arundel County. Addressing health disparities that cause disproportionately poor outcomes for pregnant Black women and their babies.

→ The Task Force has been meeting monthly to identify county needs and develop a strategic plan

Co-Chairs: Dr. Tonii Gedin, Health Officer and Dr. Monica Jones, System Chair of Luminis Health Women's and Children's Services

Held listening sessions, conducted gap analysis, identified top barriers, developed goals and objectives, and created working groups.

What we learned

- Education and awareness
- Barriers to accessing care
- Cultural sensitivity
- Provider bias training
- Inability to make prenatal care visits
- Postpartum mental health

Media featuring the Task Force on [Radio One Town Hall](#)



Family Health

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. The program started with the goal to reduce this number by **20% by 2026**, which is happening.

2023 data shows the Emergency Department visit rate has **decreased by 19% to 5.8 visits per 1,000**.

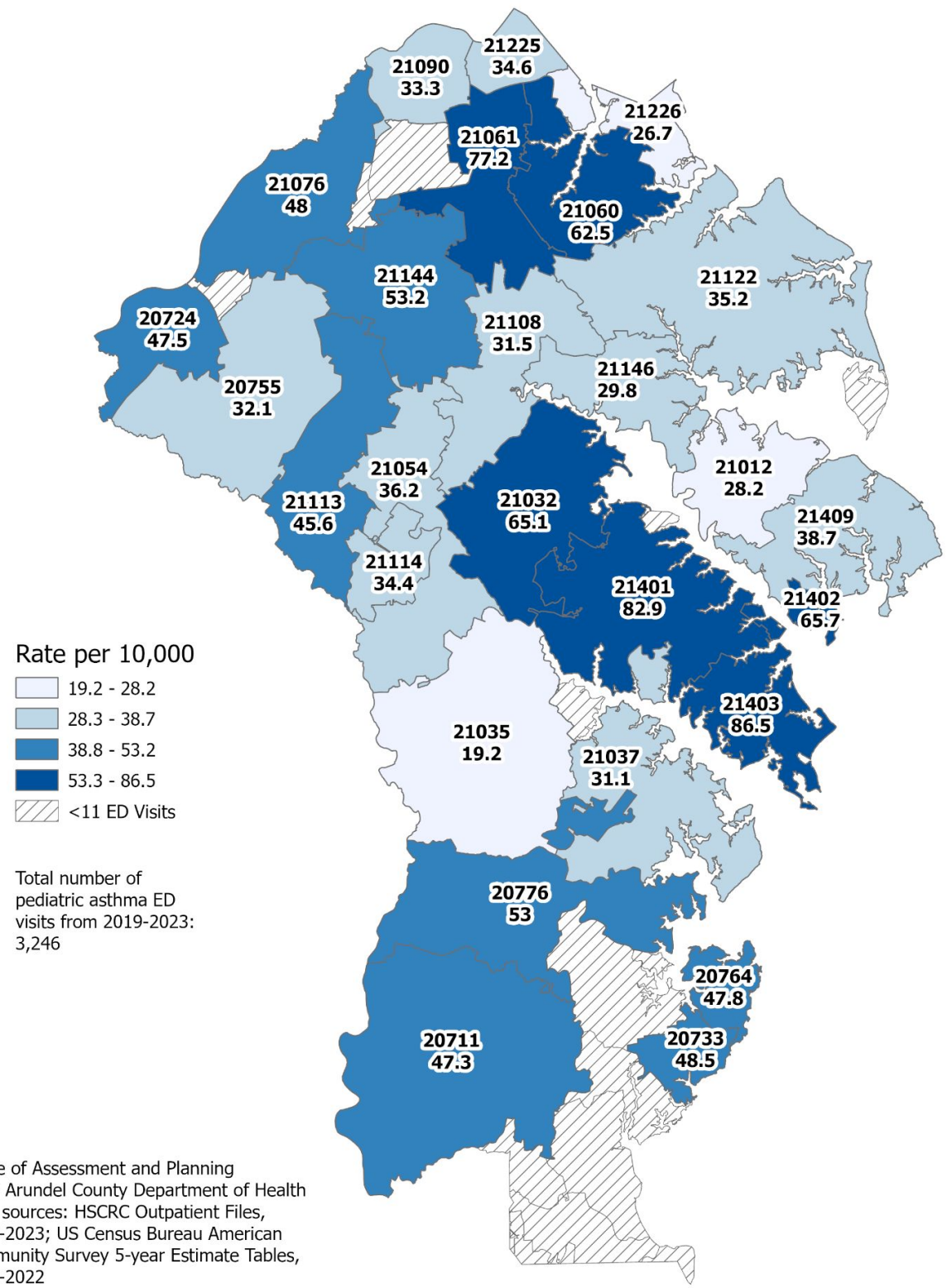
Conducted 608 home visits during FY24

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

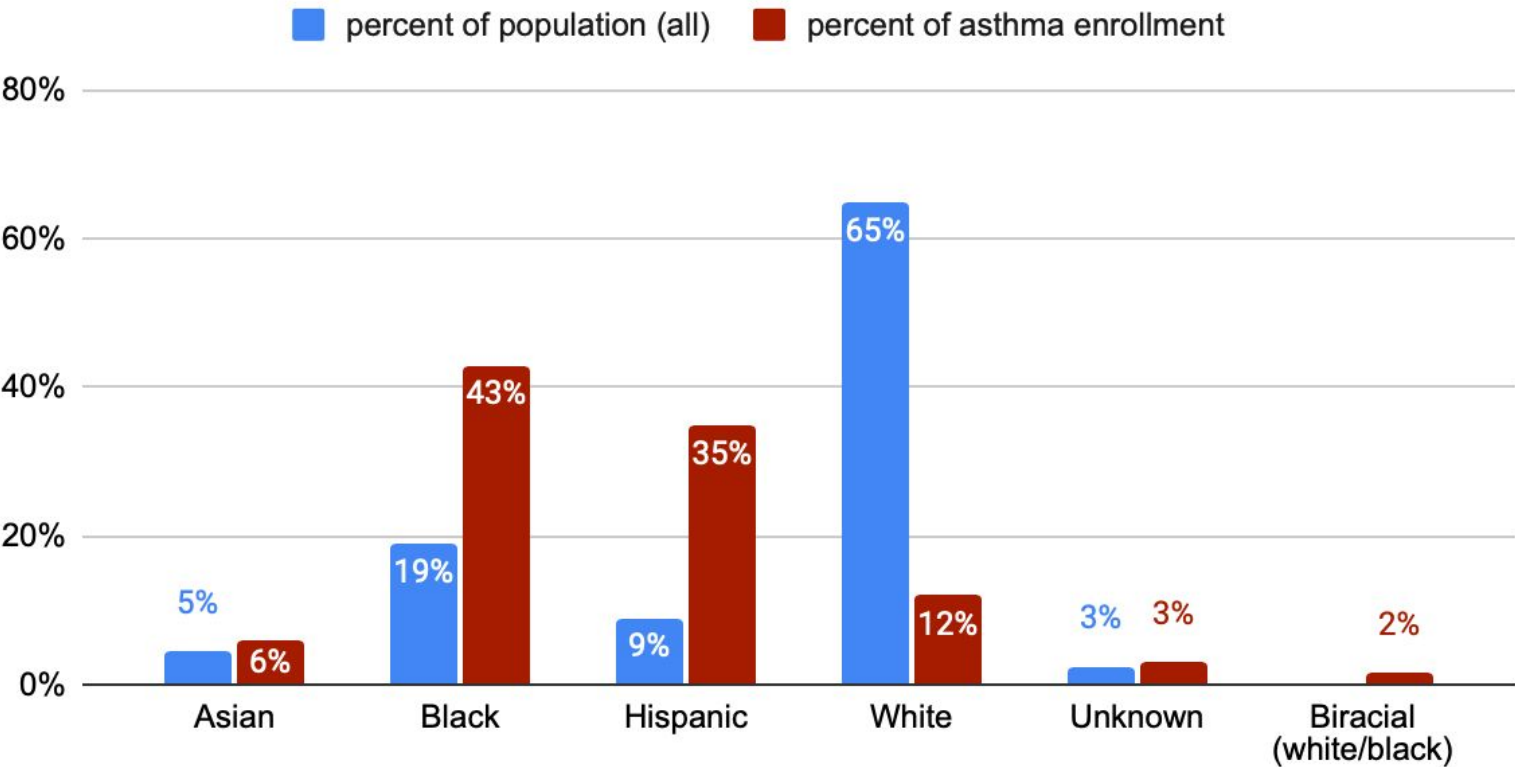
Address the disparity of Black children requiring emergency care at more than double the rate of the general population.

Pediatric (0-17 years) Asthma Emergency Department Visits per 10,000 Population by ZIP Code, Anne Arundel County, 2019-2023



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.

Disparity of Pediatric Asthma in Anne Arundel County by percent of program enrollment February 2023 - April 15, 2024



Family Health

Childhood Asthma and Lead Environmental Case Management Program

Lead

In 2019 only 30% of children under age 6 were tested for serum lead levels.

Note: In January 2024, serum lead levels in Maryland indicative of lead poisoning were decreased from 5 to 3.5µg/L to match federal thresholds.

Early interventions help:

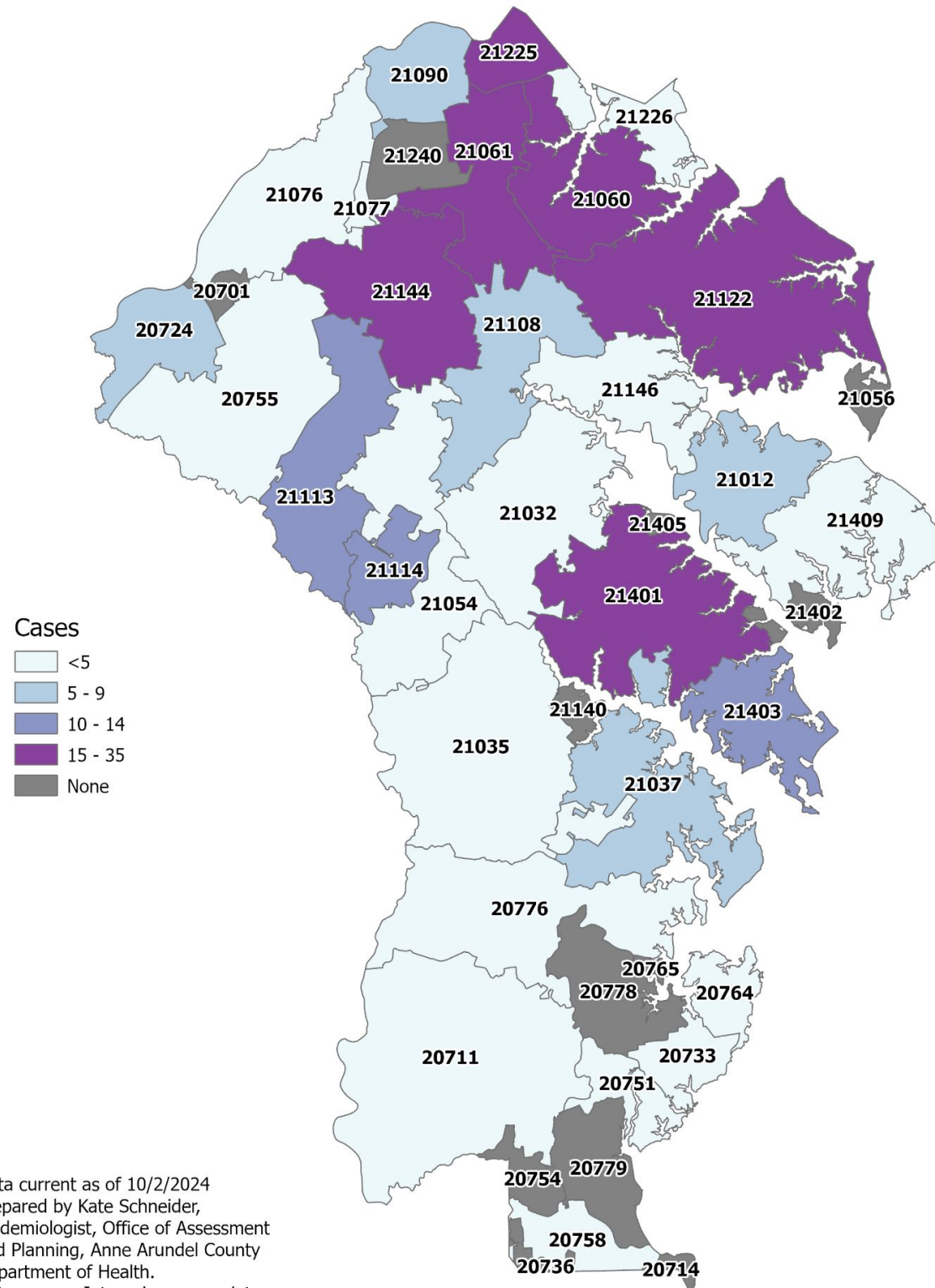
- reduce the ill effects of lead exposure in children
- program aims to increase testing to **45%** of children under 6 by **2026**
- program will also address the disparity among Asian children exposed to lead due to cultural uses of spices and pottery containing lead.



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

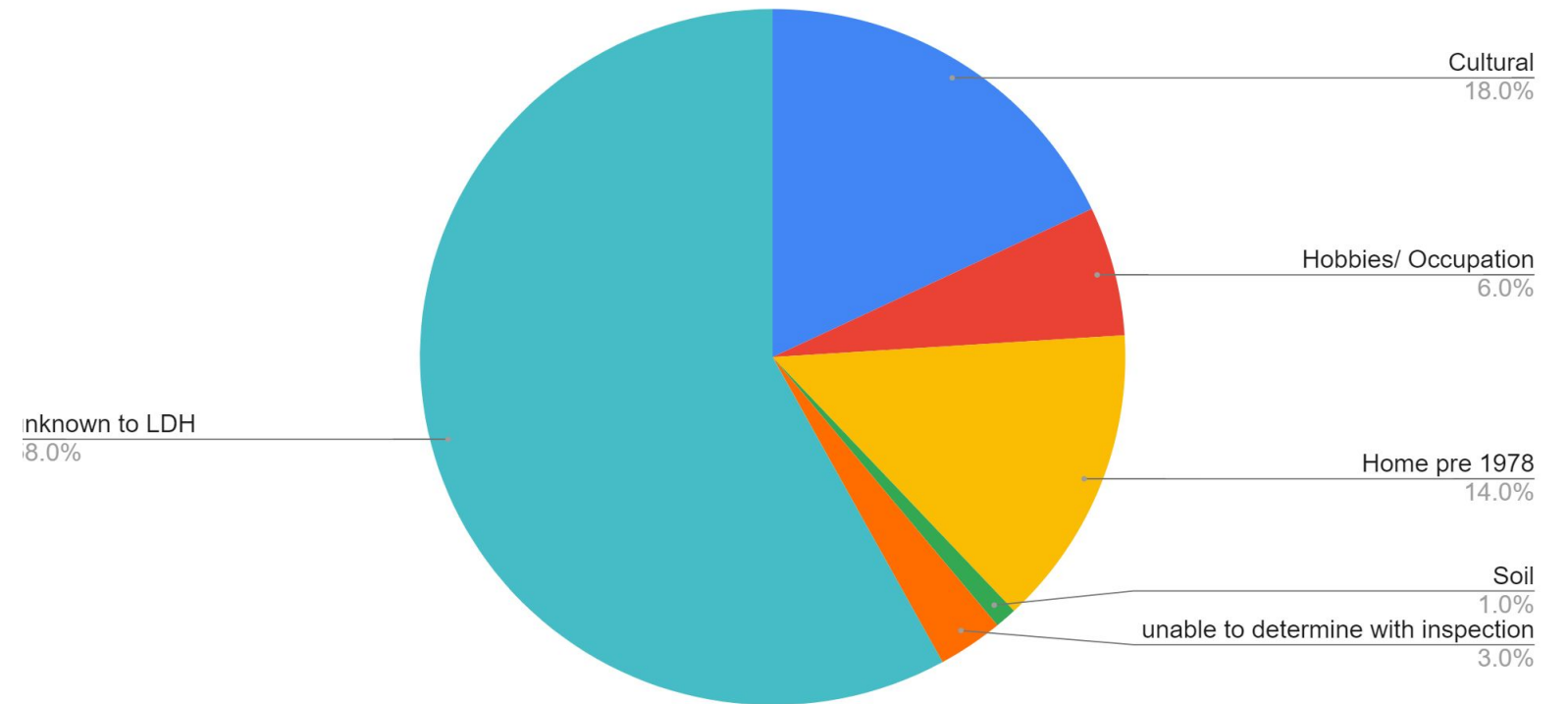
All children entering a public pre-kindergarten program, kindergarten or first grade are required to have a Maryland Department of Health Blood Lead Testing Certificate completed.

Pediatric lead cases referred to the Anne Arundel County Department of Health Childhood Lead Program, by ZIP code, 2000-2023

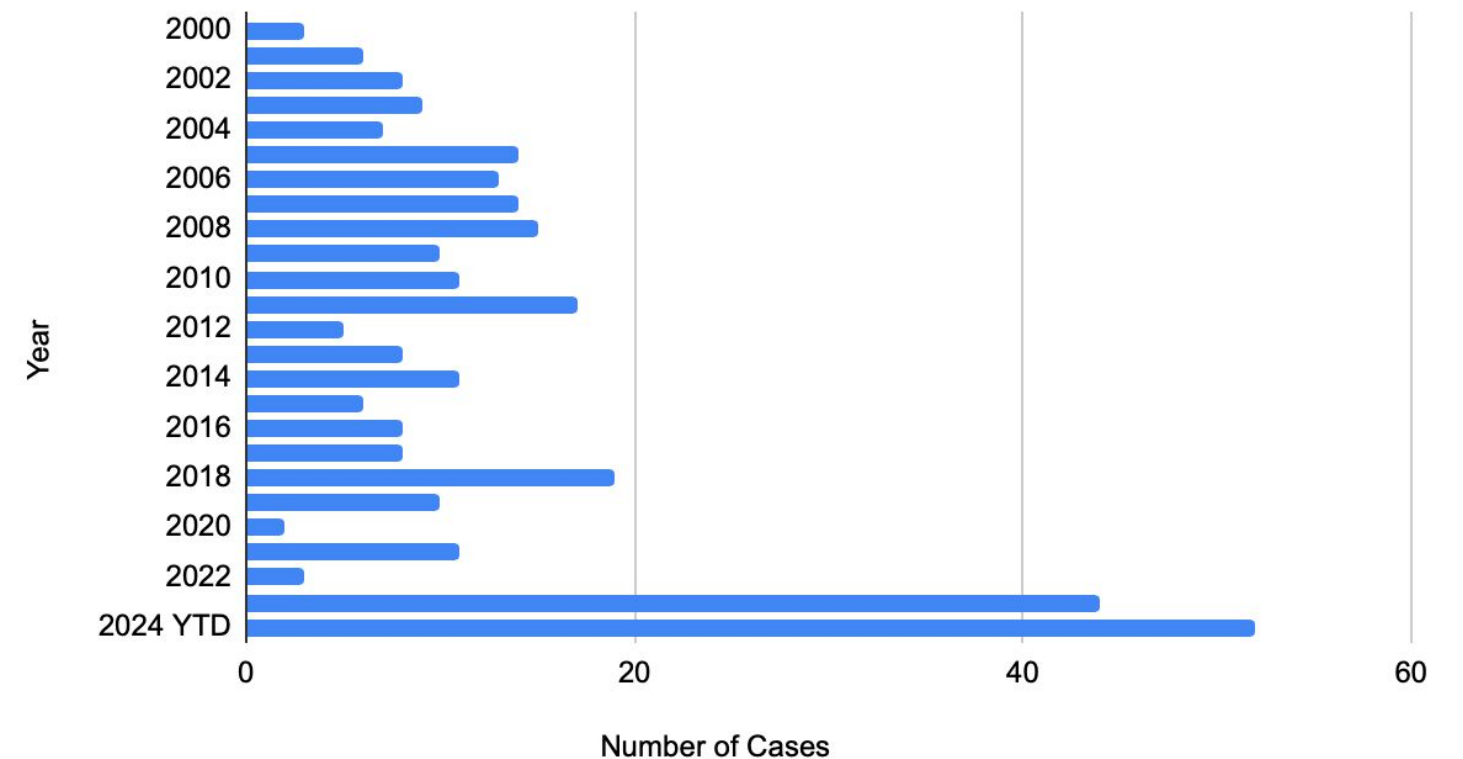


Data current as of 10/2/2024
Prepared by Kate Schneider,
Epidemiologist, Office of Assessment
and Planning, Anne Arundel County
Department of Health.
Data source: Internal program data

Childhood Lead Poisoning by Source



Childhood Lead Poisoning Cases in Anne Arundel County 2000- 2024



Family Health

Dental Services

In FY 2024:

- **2005** children
- **389** adults
- **62** oral cancer screenings
- **62** maternity clients
- **64** emergencies
- **156** children referred for follow-up care



Family Health

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.
- **408** AACPS children were treated during the 2023-2024 academic year, and **526** sealants applied for children in the 3rd grade at the **19** Community Schools.
- Community Schools sealant clinics for academic year 2024-2025 are currently underway.
- Clinic staff reports an uptake by almost 100% among schools served so far this academic year due to increased outreach efforts.
- Fluoride Clinics served **256** preschoolers at County Judy Centers.



Family Health

REACH

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

In FY 24, REACH coordinated care for **1,278** enrolled members and **157** emergency cases for the following services:

- Primary Care Adult: **1,530**
- Primary Care Pediatric: **61**
- Specialist: **244**
- Emergency Room Visits: **66**
- Inpatient Hospitalizations: **24**
- Outpatient: **520**

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



AERS and Nurse Monitoring

Assessment, 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 2024

- AERS completed a total of **1,434** assessments. Of these, **81** were pediatric clients and **39** were Pre-Admission Screening and Resident Review (hospital to nursing home with Intellectual Disability/Severe Mental Illness) clients
- NMS served **703** patients, excluding those who passed away and participants who are dis-enrolled
- Revenue generated from Medical Assistance (MA), non-MA and other assessments: **\$1,151,704**

Family Health

Women, Infants and Children (WIC)

- Provides nutritional counseling and dietary supplements for pregnant and postpartum low-income women and children.
- Provides lactation counseling and support to nursing mothers.
- Average monthly participation rate is **5,448** individual participants and **3,819** families.
- Locations where services are provided daily:
 - Annapolis Health Services Building
 - North County Health Services Building

Maryland WIC

Better Nutrition Brighter Future



The Maryland WIC Program is a nutrition program that gives extra food, tips on healthy eating, breastfeeding help, and referrals for other services for women, infants, and children.

Call for more information
1-800-242-4942
www.mdwic.org

Family Health

Medical Assistance (MA) Eligibility

Health insurance program for Maryland residents with qualifying income.

- Currently, 110,947 residents of Anne Arundel County receive Medical Assistance (MA) benefits
- MA population in our county has decreased by 6,829 enrollees since June 2023.

Resumed conducting manual MA redeterminations in May 2023. During the public health emergency MA customers didn't have to renew their benefits. Many continued to be covered even though they were longer eligible.

During FY24, Medical Assistance Eligibility Program Completed:

- 8,257 applications over the phone and in person, **an increase of 131% compared to FY23.**
- 16,186 verifications
- 4,035 new Medicaid applications and renewals
- Healthy Babies Equity Act recipients in Anne Arundel County totaled 661 as of June 30, 2024. Our program processed 1,073 applications in FY24 for this group coverage.

Increase in demand has prompted alterations in workflow and service schedule in Annapolis and North County.

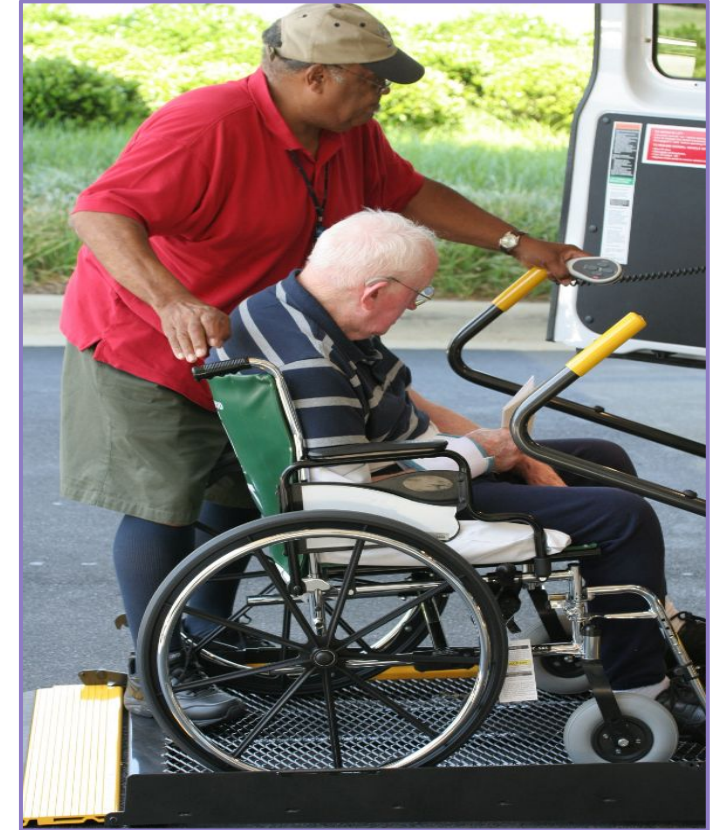
Family Health

Medical Assistance Transportation (MAT)

- MAT provides non-emergency transportation to Medicaid covered medical services.
- During FY24:
 - **39,027** clients screened and scheduled for transportation
 - **1203** of the clients were new to MAT
 - Provided **35,107** rides to medically necessary appointments
 - **543** of these were adult clients who needed transportation to access psychiatric services

Administrative Care Coordination Program

- Educates and helps MA recipients to navigate the Medical Assistance system.
- Received **2,136** unduplicated referrals in FY24
- Received **1,241** prenatal risks assessments
- Responded to more than **9,730** telephone calls/emails/texts
- Assisted 608 Spanish-speaking clients



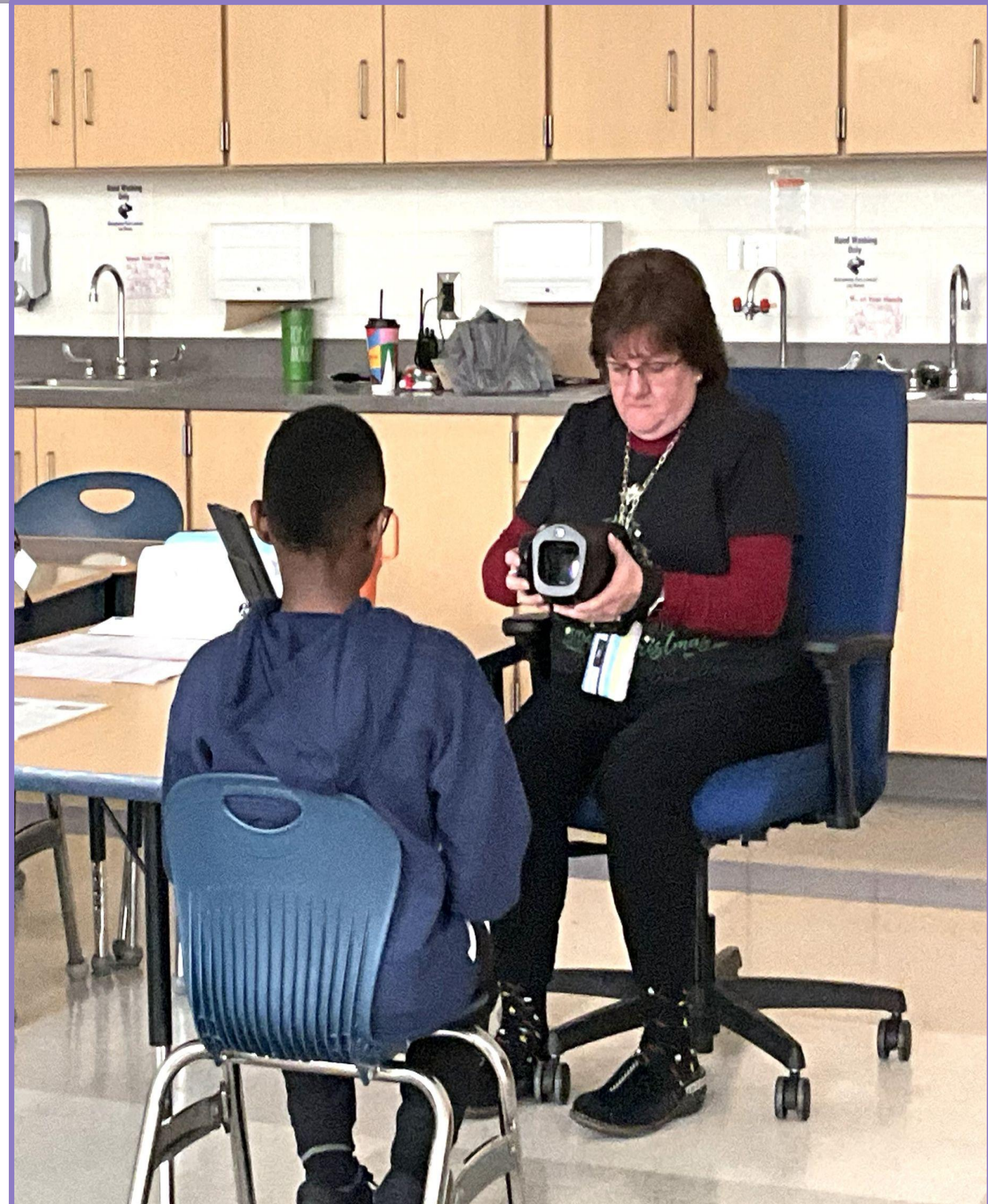
School Health and Support

School Nursing Programs

- Health Services
- Screening Teens to Access Recovery
- Telehealth

Support Programs

- Birth to Five
- Vision and Hearing Screening
(Schools and Senior Centers)
- Audiology



School Health

Statistics

2023-2024



624,529

Total Number of Health Room Visits



151,468

Medication Administration



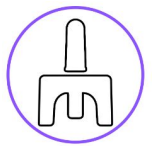
94,030

Treatments Performed



10,884

Crisis Intervention



3

Narcan



23,863

Student-Parent and AACPS Staff Conferences



41,425

Provided Health Education



144

Home Visits



1729

Referral for Health Care Resources



391

EMS

School Health

Removing Barriers to Access Education

School Year 2023-2024 Statistics



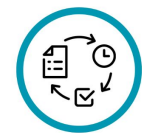
Removing barriers to accessing education

Over **6000** nursing assessments



Medical emergency plans

Developed and updated nearly **3000** medical plans for during school day field trips and all sponsored events



Disease case management

Nearly **24,000** meetings held to remove barriers to children, assessing their education and improving health outcomes



Emergency evacuation plans

School nurses assisted writing approximately **500** education plans

School Health

Emergency Medical Response in Schools

At two Anne Arundel County Public Schools, students collapsed in full cardiac arrest. Due to the quick actions of the school nurse, CPR was initiated and AED applied. Both students were successfully resuscitated.



The Health Officer and School Health Staff photographed with a North County High School Student.

School Nurse Elizabeth Kari was honored at a School Board meeting this month after saving a high school student's life.

School Health

Vision Screening Program

New Initiatives: Belle Grove Community School

Vision to Learn Pilot Program:

- Partner with Vision to Learn (Baltimore City)
- Provide vision screening for all students
- Free comprehensive eye exam
- Free eyeglasses
- Glasses distribution celebration October 23, 2024

AACPS is funding an additional vision and hearing technician to support this initiative's technicians.



School Health

New law signed in 2024, making Maryland the 23rd state to pass a law allowing schools to stock albuterol inhalers.

House Bill 86:

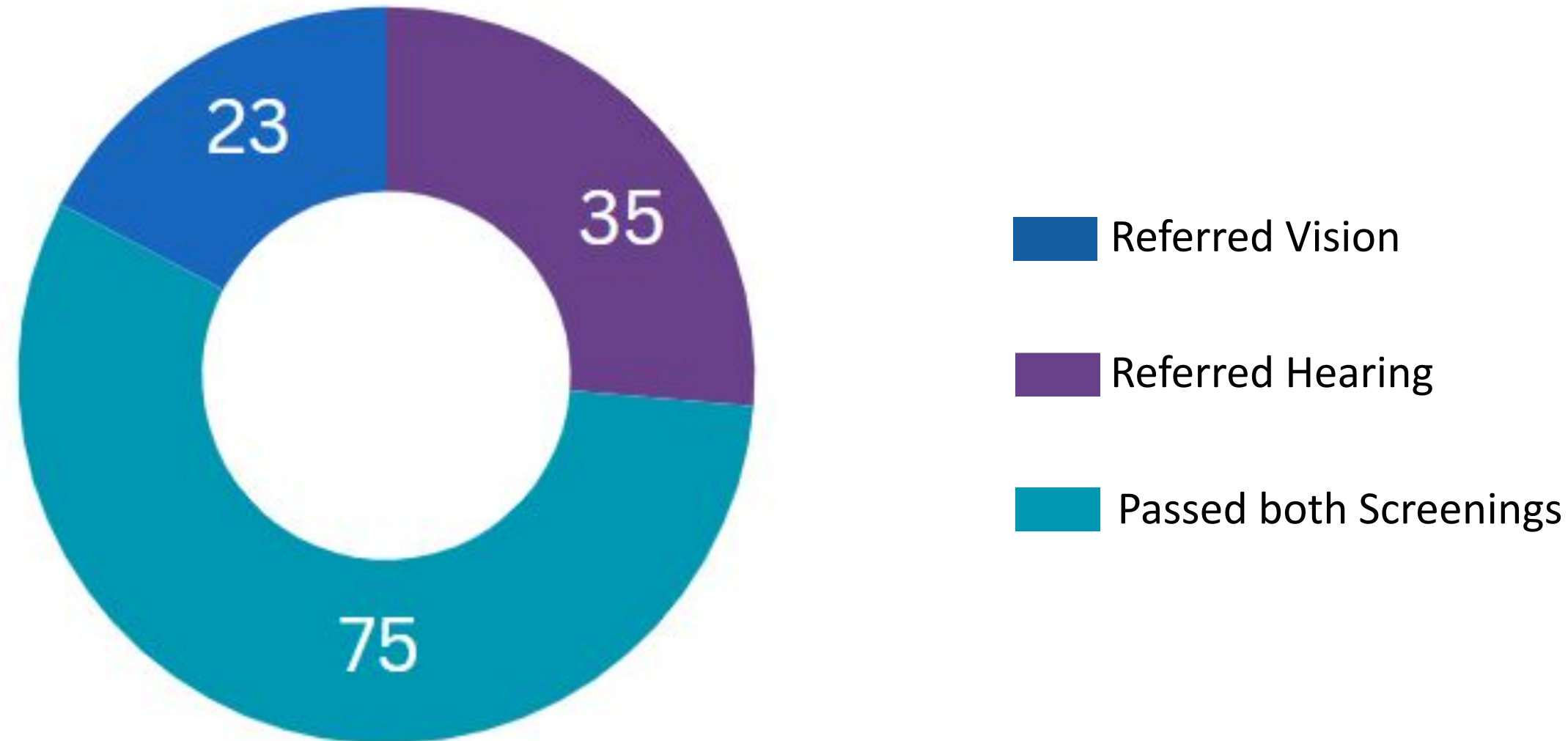
- Authorizes the **school nurse and designated trained school personnel** to administer stock bronchodilators to a student (K-12) who is or is perceived to be, experiencing asthma-related or respiratory-distress symptoms.
- Requires the Maryland Department of Health, in consultation with county boards, and authorizing nonpublic schools to establish a policy.
- Policy includes obtaining, administering and training certain school personnel to administer emergency bronchodilators to a student.



School Health

Vision and Hearing Screening the Elderly
New Initiatives 2024 - 2025 School Year
Partnership with Department Of Aging

133 Vision and Hearing screening at **8 Senior Centers**



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



Inspections

- **4,690** inspections at more than 3,000 licensed food service facilities
- **2,662** routine inspections on permanent food service facilities (49% of the COMAR 10.15.03 mandate)
- **647** re-inspections on permanent food service facilities to ensure correction of critical item violations or numerous minor violations cited
- **900** complaint investigations and inspections for licensed and illegally operating food service facilities
- **186** routine inspections and re-inspections on mobile and temporary food service facilities
- **295** pre-opening/opening inspections for new and remodeled facilities.



Environmental Health

Rodent Control Program



7,323 properties were selected to be surveyed from June - October



380 free pesticide services have been completed of the 545 referrals and receiving ongoing pesticide treatments



6,871 property assessments have been performed



955 violations were found and investigated

- Some properties had multiple violations
- Violations consisted of:
 - **639** rodents
 - **71** improper trash storage
 - **137** exterior maintenance violations
 - **545** pesticide service referrals have been made

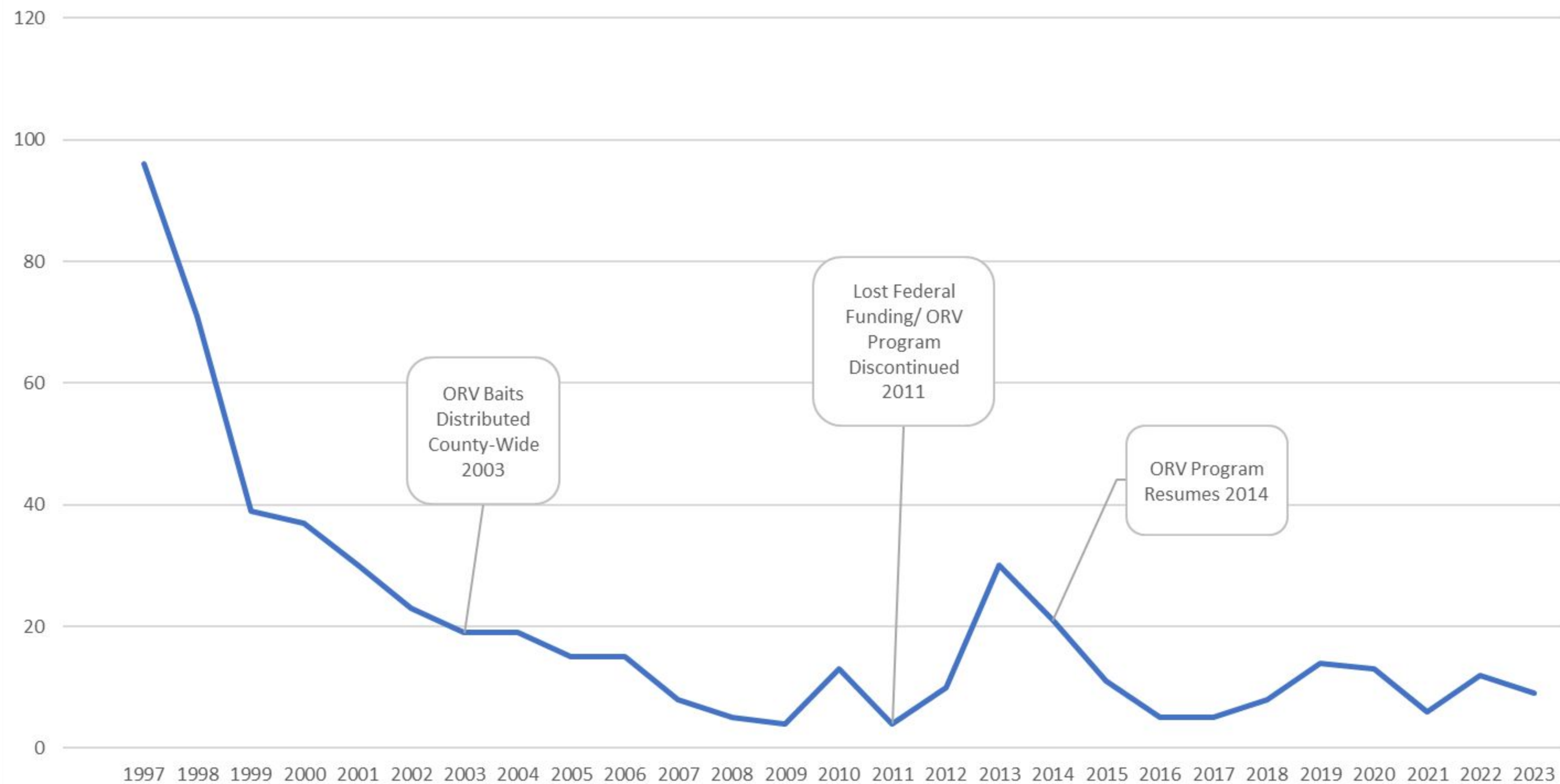
In 2023, services expanded to include City of Annapolis communities:

- ➔ Eastport Terrace
- ➔ Harbour House
- ➔ Robinwood



Terrestrial Animal Rabies

Anne Arundel Co., 1997-2023



Environmental Health

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.



Environmental Health

Water Wells and Onsite Sewage Disposal Systems

- Over 48,000 properties are served by private water wells and over 41,000 by onsite disposal systems.
- 431 permits were issued from July 1, 2023 to June 30, 2024 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.
- 411 applications to construct onsite disposal systems were approved from July 1, 2023 to June 30, 2024. 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.



Environmental Health

Bay Restoration Fund

- Seeks to improve water quality in the bay by reducing nutrient runoff, especially nitrogen, that lead to algal blooms.
- FY 24: DOH had \$2.95 million, and funded to date:
 - 13 public sewer connections
 - 148 BAT (Best Available Technology) installations





Improving Health Together



THANK YOU!

