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**Statewide Coordinating Council for Public Health  
Meeting Minutes of June 17<sup>th</sup>, 2021 – Approved on September 16<sup>th</sup>, 2021  
Held Virtually on Zoom  
9:30a.m. – 11:30a.m.  
Attendees:**

Seat	Roll Call	Name	Organization	Representing
1	X	Betsy Kelly	Southern Maine Healthcare	York District
2	X	Courtney Kennedy	Good Shepherd Food Bank	Cumberland District
3	X	Erin Guay	Central Maine Healthcare and Healthy Androscoggin	Western District
4	X	Melissa Fochesato	Mid Coast Hospital	MidCoast District
5	X	Denise Delorie	Mid Maine Substance Use Prevention	Central District
6	X	Patty Hamilton	Bangor Public Health Department	Penquis District
7	X	Maria Donahue	Healthy Acadia	Downeast District
8	X	Susan Bouchard	Fish River Rural Health	Aroostook District
9	X	James Markiewicz	Maine CDC	State Government
10	Vacant			Department of Health and Human Services
11	X	Emily Poland	Maine Department of Education	Department of Education
12	Absent	Kerri Malinowski	Department of Environmental Protection	Department of Environmental Protection
13	Vacant			Essential Public Health Services
14	X	Kalie Hess	Partnership for Children's Oral Health	Essential Public Health Services
15	X	Elisabeth Snell	University of Maine	Essential Public Health Services
16	X	Susan Kring	Maine Medical Association	Essential Public Health Services
17	X	Abusana "Mickey" Bondo	In Her Presence	Essential Public Health Services
18	X	Erika Ziller	USM	Essential Public Health Services
19	X	Sue Mackey-Andrews	Maine Highlands Investment Partnership	Essential Public Health Services
20	X	Joanne LeBrun	Tri County EMS	Essential Public Health Services
21	X	Abdelkarim Said	New Mainers Public Health Institute	Essential Public Health Services
22	Vacant			Tribal District
23	Excused	Carol Zechman	MaineHealth	Essential Public Health Services

Attending: 18; Attending by Phone: 0; Zoom: 18; Planned Absent: 1; Absent: 1; Vacant Seat: 3

Total Council Makeup: 21

Total Voting Members Attending: 18 out of 21 = 86%. Simple majority is defined as quorum. Quorum **Achieved**

Interested Parties and Stakeholders:

Nancy Beardsley	Maine CDC
Nancy Birkhimer	Maine CDC, Public Health Performance Improvement
Stacy Boucher	Maine CDC, Aroostook Public Health
Julie Daigle	Maine CDC/MCD
Heather Drake	Maine Public Health Association
Andrew Finch	Maine CDC, District Public Health
Christine Lyman	MidCoast DCC Member
Al May	Maine CDC, Downeast Public Health
Doug Michael	Northern Light Healthcare
Dora Anne Mills	MaineHealth
Jo Morrissey	Maine CDC, Maine Shared CHNA
Emilee Winn Caradonna	Maine CDC/MCD
Drexell White	Maine CDC, Midcoast Public Health

<b>MEETING NOTES</b>		
<b>Agenda:</b>	<b>Discussion:</b>	<b>Actions/Resources:</b>
Welcome and introductions: Kalie Hess, Partnership for Children's Oral Health	Kalie welcomed participants, opened the floor to Members for attendance, and gave an overview of the agenda for the day.	Please add a half hour to the September meeting for District Updates.
Preventive Health and Human Services (PHHS) Block Grant Business, Nancy Birkhimer, Maine CDC	<p>Not many changes in the direction from the past few years. As a reminder, US CDC allocates the funding for the Block Grant which allows us to quickly provide critically needed, flexible funding to address the unique preventative health needs. Non-competitive funding and it requires us to be linked to Healthy People 2020 and 2030 objectives. Currently shifting to Healthy People 2030 objectives, and funding is used to supplement and fill in gaps.</p> <p>Grant period is for two years, grant has to be submitted by July 1<sup>st</sup>, and will be awarded funding by mid-summer/early fall. Spending is expected to start in October.</p> <p><b>Nancy shared slides: Please see attachments.</b></p> <p>Community Prevention objective from 2020 went away, and some terms updated, but the best match for funding are the 2030 objectives PHI-05, PHI-01, PH-R06, and IVP-D05. (See slides for more information) *“R” indicates “Research” that may not be measurables but is highlighted as important; and “D” indicates there is no baseline data source at the federal level. We will use a different data source.</p>	Emily Poland motioned to vote, and Patty Hamilton seconded the motion. At the time of the vote, 14 members voted yes and 1 voted to abstain. The vote passes.

	<p>Nancy shared planned activities for District Health Improvements, Informatics, Accreditation, and Sexual Violence Response as noted in the slides.</p> <p>Nancy opened the floor to questions: it was noted that some funding was going towards the Office of Population Health Equity (OPHE) and participants asked how this was funded. Nancy shared that funding in the Block Grant supports various projects. There were some funds unspent due to the flexible nature of the grant, and there were no major projects cut to support the OPHE.</p>	
<p>State of the Maine CDC – Updates a Year+ into COVID-19 Response, Nancy Beardsley, Maine CDC</p>	<p>Nancy Beardsley shared slides around bolstering the Maine CDC – <b>please see attached.</b></p> <p>Maine CDC is just one of 7 offices within DHHS and includes two hospitals. We have 6 divisions; approximately 341 legislatively approved positions and lost 111 positions during the last administration. Maine CDC was in a period of rebuilding when the COVID-19 pandemic hit.</p> <p>All metrics used to assess how well we are doing with the COVID-19 pandemic are trending very positively; however, we are still very much in pandemic response mode. Highlighted the robust leadership in this administration and the leaders within the communities who have all put forth an amazing amount of effort.</p> <p>COVID-19 really highlighted disparities and health equity in Maine, and we hope to have a new director for the OPHE in the coming weeks.</p> <p>Currently working with an internal team to allocate funding for the \$8.8mil public health workforce American Rescue Plan Act (ARPA)/CDC grant.</p> <p>Redirecting focus from COVID-19 response to the future efforts within of health disparities and the Public Health Units.</p> <p>Nancy opened the floor for questions, and many participants echoed a “thanks” the Maine CDC’s support during the pandemic, and for the reestablishment of the OPHE. Participants also acknowledged the positive national recognition.</p> <p>Noted the ARPA grant is limited to approximately a 2-year time-period, and the planning for the ARPA grant is just starting. Currently, there is a carve out for ~25% for school health, ~40% for public health but numbers are not solidified. Will pull in Dept. of Ed as they move forward with this grant.</p>	<p>Maine’s vaccine dashboard link: <a href="http://www.maine.gov/covid19/vaccines/dashboard">www.maine.gov/covid19/vaccines/dashboard</a></p> <p>*please note that not every discloses race or ethnicity.</p>

	<p>Current number is public health nurses is close to +/- 35. Linda Parker is the new Public Health Director. Focus is supporting the Machias area staffed with PHNs.</p> <p>Echoing the importance of relationships throughout the State, noted a goal to formalize plans of the roles of the hospitals, State, and healthcare systems. Discussion developed into an opportunity for an after-action report to document what worked and what didn't. As of right now, discussed that a report would be important but will take time.</p> <p>Many participants agree that a future SCC meeting could highlight local feedback that the State may not have captured.</p>	
<p>Diversity in Representation of the SCC, Kalie Hess and Patty Hamilton</p>	<p>Small subgroup around membership has met since the June meeting. Looking to bring more diversity and representation to the table – on both a work/sector and individual level.</p> <p>Highlighted updating the bylaws to include verbiage around specific diverse representation – captured recommendations in agenda.</p> <p>Noted the importance flow of information from the State, to the SCC, to the DCCs and back. Noted that emerging trends that individual DCCs may be working on should flow back to the SCC.</p> <p>Orientation for new SCC Members and administrative needs of the SCC were mentioned that needed to be addressed.</p> <p>Minutes from the membership workgroup upon request.</p> <p>Overall, the SCC recognizes that COVID-19 has thrown a wrench in all our work, and that we are working to get back to the swing of things.</p> <p>Member echoed the importance of getting a set of bylaws that works well for the group, but also recognized the need for the SCC's recruitment strategy and what the philosophy/statement is to support these efforts.</p> <p>Kalie shared the drafted protocol for nominating folks:</p> <ul style="list-style-type: none"> <li>o Who's currently represented on the Council (avoid duplicating organizations, if possible)?</li> <li>o Who is missing (from the list in the bylaws)? ...”from county governments, municipal governments, tribal governments, tribal health departments or health clinics, city health departments, local health officers, hospitals, health systems, emergency management agencies, emergency medical services, Healthy Maine Partnerships, school districts, institutions of higher education, physicians and other health care providers, clinics and community health centers, voluntary health organizations, family planning organizations, area agencies on aging, mental health services, substance abuse services,</li> </ul>	<p><a href="http://www.maine.gov/dhhs/mecdc/public-health-systems/scc/index.shtml">www.maine.gov/dhhs/mecdc/public-health-systems/scc/index.shtml</a></p> <p>Bylaws: <a href="http://www.maine.gov/dhhs/mecdc/public-health-systems/scc/documents/SCC-Governance-Documents-Revised-12-2018.pdf">www.maine.gov/dhhs/mecdc/public-health-systems/scc/documents/SCC-Governance-Documents-Revised-12-2018.pdf</a></p> <p>Action Item: Set clear goals. Highlighted language “representation from a group that represents underserved racial or ethnic minorities”</p>

	<p>organizations seeking to improve environmental health and other community-based organizations.”</p> <ul style="list-style-type: none"> <li>o What are the emerging trends (see various state reports and community feedback/DCC feedback) that should be highlighted in the coming year?</li> <li>o Who can be nominated to help represent as diverse a perspective as possible?</li> </ul> <p>Please note that some lines within the bylaws are within a statute, and the difference between a change in statute vs. a change in language and updated practices. These groups do fall under the catch-all “community-based organizations” and “representation from populations experiencing disparities”. Some members want to specifically pull out certain recruitment needs to support diversity including different racial, ethnic, and LGBTQ+ communities/organizations.</p> <p>Philosophical statement or guiding principles to be mindful of the ever-changing needs of Maine, and have the SCC be as broad-based an inclusive as possible. Needs may change year to year, but the SCC can be flexible regarding bringing new partners to the table.</p> <p>Members on the call noted a Strategy Session during the December meeting would be important. Meeting could include a process to identify key functions for the next year and plan for updates to the bylaws to ensure an informed process regarding membership.</p> <p>Noted the Steering Committee will convene and will discuss next steps.</p>	
<p>SPHSA Update, Al May, Maine CDC</p>	<p>Al shared slides regarding the status of the State Public Health Systems Assessment – <b>please see slides attached.</b></p> <p>Al shared an example of session participation selection. Based on these model standards, organizations and individuals will be identified to participate in the process.</p> <p>SPHSA Save The Dates will be sent out soon. If you or anyone you know may be important to include within the State, feel free to email Al your suggestions: <a href="mailto:Alfred.May@Maine.gov">Alfred.May@Maine.gov</a></p>	
<p>SCC Seats and Positions, Kalie Hess</p>	<p>Seats 10, 13 and 22 are currently open.</p> <p>James Markiewicz will spearhead the efforts to get Seat 10 filled from DHHS. The Tribal seat is open since the Tribal Liaison position is not currently filled. James may reach out to contacts within the tribal health systems to represent that health district.</p> <p>Seat 13 will likely be easier to fill, and after today, Kalie’s seat, Seat 14 will be open. Would like to start discussing who we will want at the table. James can update a nomination form to use as a starting point including bios – please note, if you are nominating anyone, please get</p>	

	<p>approval from the individual prior to submitting their nomination form and bios.</p> <p>James Markiewicz will be the contact for the SCC – please direct communications to him as Kalie steps back from her Chair position. <a href="mailto:James.Markiewicz@maine.gov">James.Markiewicz@maine.gov</a></p> <p>If anyone is interested in the Chair position, please let James know!</p>	
Adjournment	<p>Meeting adjourned at 11:30am.</p> <p>Next meeting: September 16th, 9:30am – 12pm.</p>	