



Cecil County Local Health Improvement Plan FY 2016 Annual Report

July 28, 2016

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Background

Cecil County's FY 2012- 2016 Local Health Improvement Plan (LHIP) was developed by the Cecil County Community Health Advisory Committee (CHAC). This committee, made up of organizations and individuals committed to improving the health of Cecil County residents, serves as Cecil County's Local Health Improvement Coalition (LHIC) and is a part of Maryland's State Health Improvement Process (SHIP). Maryland's SHIP consists of 39 health measures in five focus areas. SHIP provides a framework for accountability, public engagement, and action to address health issues at the local level. Cecil County's LHIP was developed to address health needs in the county identified in Cecil County's Community Health Needs Assessment, within the SHIP framework.

In 2012, through the LHIP planning process, coalition members identified five health priorities for Cecil County:

- Priority 1: Prescription Drug Abuse;
- Priority 2: Access to Mental/Behavioral Health Treatment and Services;
- Priority 3: Substance Abuse Prevention;
- Priority 4: Child Abuse Prevention; and
- Priority 5: Childhood Obesity

Objectives and proposed action steps were developed for each of these five priorities and task forces were assigned to work on objectives, track activities, and report on progress. Task force assignments are as follows:

- Drug and Alcohol Abuse Council (DAAC): Priorities 1 and 3;
- Mental Health Core Service Agency Advisory Council: Priority 2;
- Child Maltreatment Task Force: Priority 4; and
- Healthy Lifestyles Task Force: Priority 5

In July 2015 the LHIP was revised to include new goals and objectives for FY 2016. This report includes a description of LHIC activities to achieve LHIP goals and objectives during FY 2016, and a summary of progress towards meeting SHIP goals.

In addition to this annual report, progress is reported quarterly to the Department of Health and Mental Hygiene's Office of Population Health Improvement and semi-annually at CHAC meetings.

Priority 1: Prescription Drug Abuse Progress Report

Priority 1 of Cecil County’s LHIP addresses the following SHIP measure:

Drug-induced death rate per 100,000 population							
	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013	2012-2014	2016 Goal*
Cecil	21.6	21.2	27.4	29.5	26.5	27.9	23.9
Maryland	12.9	12.1	11.9	12.3	13.3	15.2	-

* County goal based on 10% improvement over 2011-2013 data.

HP 2020 Target: 11.3 MD 2017 Goal: 12.6

Source: Maryland DHMH Vital Statistics Administration (VSA)

Goal 1: Reduce incidence of fatal and non-fatal overdoses in Cecil County by 10%.

Objective 1: **Raise awareness about consequences of substance abuse, including prescription drugs and other opioids.**

Strategy 1: Develop a public awareness campaign focused on the education of parents, youth, and high-risk communities about the dangers of abusing prescription drugs and other opioids.

Progress Update: Rewrite Your Script Campaign-
 On September 15, 2015, Cecil County Health Department (CCHD) announced the development of a public awareness campaign, “Rewrite Your Script”, focused on opioid misuse prevention. This campaign was developed through the Opioid Misuse Prevention Program (OMPP) Coalition. Campaign objectives include (a) increased community perception of risk/harm for non-medical use of opioids, (b) increased community knowledge for, and utilization of, appropriate disposal methods for unused prescription medications [i.e., drug take-back boxes], and (c) an elevated public awareness of resources for treatment, overdose prevention and recovery support. The campaign’s website, RewriteYourScript.org, links Cecil County residents with over 100 prevention, treatment and recovery resources. The website also includes testimonials of Marylanders who are in recovery to help inspire others to make similar changes.

Objective 2: **Elevate physician participation in Maryland prescription drug monitoring program (PDMP).**

Strategy 1: Provide information on the benefits of PDMP to Cecil County providers.

Progress Update: Provider and Pharmacy Education-
During FY 2016, CCHD officials promoted the benefits of PDMP at community meetings. Local pharmacies currently employ the PDMP. The Health Department will continue to encourage use of the PDMP by all local providers.

Objective 3: Increase community disposal of unused medications, especially prescribed controlled substances.

Strategy 1: Encourage additional fixed location medication drop boxes (safe options for disposal of unused medications) in Cecil County.

Progress Update: Fixed Location Medication Drop Boxes-
During the first quarter of FY 2016, two additional locations for disposal of expired and unused prescription medications were established: the Cecil County Sheriff's Office and North East Police Department. Combined with the Elkton Police Department and the Rising Sun Town Hall, Cecil County has established four permanent locations for drug disposal. The fixed drop-boxes provide a safe, convenient and anonymous opportunity to dispose of unused and expired medications. Disposal locations are promoted online at: <http://www.rewriteyourscript.org>

Strategy 2: Promote community disposal of unused medications.

Progress Update: Collection of Unused Medications-
A drug take-back day was held in Cecil County on April 30, 2016 with locations available to drop off unused medications throughout the county. This event was advertised through social media and a press release.

Union Hospital of Cecil County (UHCC) has also reported interest in establishing a fixed location medication drop box inside the hospital lobby or emergency room. The Health Department offered assistance with the initiative.

Objective 4: Increase overdose prevention education and distribution of emergency overdose response kits with intranasal Naloxone medication.

Strategy 1: Promote and provide overdose prevention education to individuals and groups identified as high risk and/or in contact with high risk groups.

Progress Update: Overdose Response Training-
Since May 2014, CCHD's Overdose Response Program (ORP) has trained/certified 1,000 community members and law enforcement officers on overdose recognition and response. Through June 21, 2016 at least 64 lives were reported saved as a result of actions taken by ORP certified individuals.

Objective 5: Elevate review and consideration of local overdose incidents.

Strategy 1: Continue to facilitate and extend capacity of the Local Overdose Fatality Review Team (LOFRT). The LOFRT will identify root causes, determine trends, target resources to decrease overdose death rates, and support implementation of other prevention / intervention efforts.

Progress Update: Local Overdose Fatality Review Team (LOFRT)-
The LOFRT is a multi-disciplinary review committee tasked with identifying gaps in public systems and social programs that if strengthened could prevent future intoxication deaths. The LOFRT meets monthly to review all cases of overdose fatality occurring in Cecil County. As of December 21, 2015 the LOFRT had 31 members representing 23 community-based agencies and organizations. The Local Overdose Fatality Review Team has convened 18 meetings and reviewed 69 cases as of June 30, 2016.

An LOFRT Summary of Findings report was released on December 21, 2015 and findings were presented to the DAAC. Trends and recommendations include: (1) Evidence of need to provide education, outreach, and supportive services for family members of substance abusers; (2) Evidence of need to provide overdose response training and increased access to naloxone in the community; (3) Evidence of need to train and equip providers of somatic care to complete Screening, Brief Intervention, and Referral to Treatment protocols; (4) Evidence of need to embed peer recovery specialists within somatic care provider offices; (5) Evidence of need to expand use of the Prescription Drug Monitoring Program and mandate provider participation; (6) Evidence of need to make contact with family members of intoxication death victims to provide access to supportive and treatment services; and (7) Evidence of need for care coordination

and provider follow-through to ensure continuity of care, regardless of treatment level, reason for discharge, patient prognosis, or perceived patient effort in treatment.

Priority 2: Access to Mental/Behavioral Health Treatment and Services Progress Report

Priority 2 of Cecil County’s LHIP addresses the following SHIP measures:

Rate of emergency department visits related to mental health disorders per 100,000 population						
	2010	2011	2012	2013	2014	2016 Goal*
Cecil	7085.5	9974.8	10570.8	8901.6	5501.6	8011.5
Maryland	2780.8	3211.2	3500.6	3318.5	3442.6	-

* County goal based on 10% improvement over 2013 data.

MD 2017 Goal: 3152.6

Source: Maryland Health Services Cost Review Commission (HSCRC), Research Level Statewide Outpatient Data Files

Suicide rate per 100,000 population							
	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013	2012-2014	2016 Goal*
Cecil	13.6	12.8	16.8	13.6	15.1	13.4	13.6
Maryland	8.9	8.7	8.9	8.8	9.0	9.2	-

* County goal based on 10% improvement over 2011-2013 data.

HP 2020: 10.2 MD 2017 Goal: 9.0

Source: Maryland DHMH Vital Statistics Administration (VSA)

Goal 1: Reduce the number of individuals with behavioral health conditions being admitted to the local emergency room by 10%.

Objective 1: Expand the range of services within the continuum of mental/behavioral health care that are available to Cecil County residents.

Strategy 1: Develop a crisis bed facility as an additional level of care available in the community.

Progress Update: Development of Residential Crisis Service-
A workgroup was established by UHCC that includes partners such as CCHD's Mental Health Core Service Agency and Alcohol & Drug Recovery Center, and other community partners. The workgroup last met in September and finalized the program plan for a Behavioral Crisis Assessment & Stabilization Center (BCASC). The plan is for this site to serve as an effective community based alternative to services traditionally sought in the emergency room or hospital inpatient setting. It will be referral based and will serve those with mental health or substance use issues. UHCC has purchased a parcel of land in downtown Elkton and a draft of the architectural plans have been developed and shared with the workgroup. The hope is to break ground by Fall 2016 with an opening in early 2018.

Strategy 2: *Develop evidence-based Assertive Community Treatment (ACT) as a modality for individuals with serious mental illness.*

Progress Update: Assertive Community Treatment (ACT)-
ACT is a community and evidence-based treatment model for individuals with serious mental illness that have previously required frequent or sustained periods of treatment in institutional settings. Core principles of ACT include assertive engagement techniques, a team approach, community-based treatment, frequent and intensive consumer contact when required, and inclusion of those with co-occurring disorders. Upper Bay Counseling & Support Services serves as Cecil County's designated ACT provider. Upper Bay received their licensure from the Office of Health Care Quality and their Medicaid ID number during FY 2016. As of June 2016, 34 people were enrolled in the program. As the census increases, additional staff will be hired, with the goal of serving 50 people on a regular basis.

Objective 2: Develop strategies to reduce ER visits by identified "high utilizers" with behavioral health conditions.

Strategy 1: *Review and analyze individual service plan needs of "high utilizers".*

Progress Update: Emergency Room (ER) Diversion-
Through the collaborative efforts of organizations participating in the ER Diversion/Behavioral Health work group, high utilizers of the ER with behavioral health conditions are reviewed to identify the need for longer term, more intensive or residential services as

appropriate. The work group met 11 times during FY 2016. The director of the new mobile treatment program through Upper Bay attends meetings when necessary and serves as a regular referral source for individuals with serious mental illness and/or co-occurring disorders. The group also continues to link individuals with Cecil County Health Department's Peer Recovery Advocates who are available in select departments throughout Union Hospital. Referral recommendations and discharge plans that are unique to each individual's needs continue to be developed at each meeting. A concern of the group is that many individuals have to leave Cecil County in order to obtain the level of care they need.

Goal 2: Reduce the suicide rate in Cecil County by 10%.

Objective 1: Promote community awareness and education on behavioral health conditions and how to access care.

Strategy 1: Deliver youth and adult Mental Health First Aid (MHFA) trainings.

Progress Update: Mental Health First Aid (MHFA) Trainings-
The Mental Health Core Service Agency recently funded the expansion of Mental Health First Aid, an 8-hour evidence-based training curriculum that teaches lay people how to recognize and give initial assistance to a person experiencing symptoms of a mental health condition or mental health crisis. There is a version of the curriculum for intervention with both youth and adults. Cecil County now has nine instructors from a range of community agencies who can teach MHFA. MHFA is a useful tool in combating stigma in addition to furthering knowledge and skills that can help prevent suicide. Eighty- one individuals were trained in MHFA during the second quarter of FY 2016. An additional 38 individuals were trained in youth MHFA during the fourth quarter of FY 2016.

Strategy 2: Develop Crisis Intervention Teams (CITs), a partnership between first responders, mobile crisis teams, and provider/consumer groups.

Progress Update: Crisis Intervention Teams (CITs)-
CIT is a collaborative community partnership between first responders, mental health providers, consumers, mobile crisis

services and other local community agencies for the common goals of increased public safety and appropriate service to people affected by mental health conditions and their families. It involves extensive training and education of first responders, an on-going partnership, and monitoring of how CIT is functioning once implemented. To date, 35 members of the first responder community have received the initial 4-hour training in behavioral health and effective crisis intervention with someone suffering from a serious psychiatric condition. The second phase of CIT involves 40 hour training for designated responders. In June 2016, a representative from the Sheriff's Department attended the 40 hour training offered in Harford County.

Priority 3: Substance Abuse Prevention Progress Report

Priority 3 of Cecil County's LHIP addresses the following SHIP measures:

Drug-induced death rate per 100,000 population							
	2007-2009	2008-2010	2009-2011	2010-2012	2011-2013	2012-2014	2016 Goal*
Cecil	21.6	21.2	27.4	29.5	26.5	27.9	23.9
Maryland	12.9	12.1	11.9	12.3	13.3	15.2	-

* County goal based on 10% improvement over 2011-2013 data.

HP 2020 Target: 11.3 MD 2017 Goal: 12.6

Source: Maryland DHMH Vital Statistics Administration (VSA)

Rate of emergency department visits related to substance use disorders per 100,000 population						
	2010	2011	2012	2013	2014	2016 Goal*
Cecil	1538.6	2121.9	2234.8	2057.6	2165.7	1851.8
Maryland	1122.4	1237.5	1398.2	1474.6	1591.3	-

* County goal based on 10% improvement over 2013 data.

MD 2017 Goal: 1400.9

Source: Maryland Health Services Cost Review Commission (HSCRC), Research Level Statewide Outpatient Data Files

Goal 1: Establish an accessible and integrated continuum of substance abuse prevention, intervention and treatment services for the adolescents and their families of Cecil County.

Objective 1: **Raise awareness about consequences of drug use among youth in Cecil County.**

Strategy 1: *Develop a public awareness campaign focused on the education of parents, youth, and high-risk communities about the consequences of substance abuse.*

Progress Update: Rewrite Your Script Campaign-
On September 15, 2015, CCHD announced the development of a public awareness campaign, "Rewrite Your Script", focused on opioid misuse prevention. This campaign was developed through the Opioid Misuse Prevention Program (OMPP) Coalition. Campaign objectives include (a) increased community perception of risk/harm for non-medical use of opioids, (b) increased community knowledge for, and utilization of, appropriate disposal methods for unused prescription medications [i.e., drug take-back boxes], and (c) an elevated public awareness of resources for treatment, overdose prevention and recovery support. The campaign's website, RewriteYourScript.org, links Cecil County residents with over 100 prevention, treatment and recovery resources. The website also includes testimonials of Marylanders who are in recovery to help inspire others to make similar changes.

Objective 2: **Increase the number of Cecil County youth and families who participate in evidence-based prevention and early-intervention programs.**

Strategy 1: *Promote new, and expand existing evidence-based services that reduce substance-related disorders.*

Progress Update: Substance Use Disorder Prevention Summit-
Several innovative prevention and early-intervention projects were implemented during FY 2016. One successful initiative includes a student leadership and substance use disorder prevention Summit. NorthBay Adventure Camp of Cecil County entered into an agreement with Cecil County Public Schools (CCPS) and CCHD to facilitate the Summit. Funding was made available for the project through a donation from the Old Dominion Electric Cooperative. Members of the Cecil County Drug Free Community Coalition (CCDFCC) also supported the Summit. Seventy-seven students from five county high schools (Rising Sun, Bohemia Manor, Perryville, North East, and Elkton) attended the two-day event, and developed student directed action plans to

impact each school environment and build safe and sober communities. On completion of the summit, 85% of the students reported an increased understanding of risk factors for drug abuse and an increased understanding of county-wide drug issues; over 90% of the students reported an increased understanding of leadership, reported practicing leadership, and affirmed that they had the power to influence their friends; 91% of the students were able to identify positive relationships in their lives and identify people to support them when they needed help; and 90% of the students reported an intention to take positive action in their communities after going home. Implementation of student action plans are scheduled to continue during F Y2017, with support from NorthBay, CCPS, CCHD, and CCDFCC.

CCPS LifeSkills-

A second successful project includes the implementation of universal substance use prevention for all students, grades 3 through 10, within CCPS. Initiated in August 2015, the project utilized the evidence- based Botvin LifeSkills training with two instructors dedicated to the teaching the curriculum. Preliminary outcomes look promising.

Motivational Enhancement Therapy and Cognitive Behavioral Therapy (MET/CBT-5)-

A third successful project includes the MET/CBT-5 intervention project. Through the MET/CBT-5 program, CCHD, with the support of CCPS, offered pre-clinical services to teens and young adults between the ages of 14 to 18. The program was designed to help prevent the escalation of substance use and associated consequences. MET/CBT-5 is an evidence- based program, identified as beneficial for adolescents due to its less directive, non-confrontational approach in teaching coping skills. The program also incorporated the power of peer influence into group sessions. The MET/CBT-5 program provided training for building the skills necessary to increase social support, influenced positive behavior change, and helped develop avoidance and coping mechanisms to deal with any potential relapse issues. Fifty- two students participated in the program during FY 2016, the program's second year of operation. MET/CBT-5 has been identified as one of the most cost-effective approaches for youth, and services will continue at selected schools during FY 2017

Priority 4: Child Abuse Prevention Progress Report:

Priority 4 of Cecil County’s LHIP addresses the following SHIP measure:

Rate of children who are maltreated per 1,000 population under the age of 18					
	2011	2012	2013	2014	2016 Goal*
Cecil	18.4	20.1	16.5	16.8	14.9
Maryland	9.3	10.2	9.2	9.9	-

* County goal based on 10% improvement over 2013 data.

HP 2020 Target: 8.5 MD 2017 Goal: 8.3

Source: Maryland Department of Human Resources (DHR)

Goal 1: Decrease the incidence of child abuse in Cecil County by 10%.

Objective 1: Increase public awareness about child abuse and neglect.

Strategy 1: Hold an annual child abuse and neglect awareness campaign.

Progress Update: Pinwheels for Prevention Campaign-
 As part of National Child Abuse Prevention Month in April 2016, the Cecil County Child Maltreatment Prevention Taskforce (CMPTF) participated in the Pinwheels for Prevention Campaign. With grant funding provided by the Cecil County Local Management Board (LMB), a subcommittee of the CMPTF planted 25 pinwheel gardens throughout Cecil County. Gardens contained 50-100 pinwheels and a lawn sign reading “All Children Deserve a Great Childhood because Our Children are Our Future.” Youth from Generation Station, Rising Sun High School, Perryville Outreach, Neighborhood Youth Panel, and the Boys & Girls Club of North East helped to plant gardens. Posters and a two- sided handout were also distributed to organizations throughout the county. The handout contained information on the importance of family play time, a calendar of family activities, and a directory of child abuse prevention resources. A total of 1,600 handouts were distributed as part of the campaign. A Proclamation was read by the Cecil County Council at the County Council Meeting on April 5th.

Objective 2: Increase public awareness about child abuse and neglect prevention resources.

Strategy 1: Identify local, state, and national resources.

Progress Update: Resource Identification-
Local, state and national child abuse prevention resources were identified by the CMPTF subcommittee. These include: child, parent and family education programs; organizations offering services to children and parents; resources to support family time; and help and crisis lines.

Strategy 2: Create a directory of resources and post on partner websites.

Progress Update: Directory of Resources-
A directory of resources was included in a two- sided handout as part of the Pinwheels for Prevention Campaign. This handout was distributed to sites throughout Cecil County and the campaign was advertised through partners' social media accounts and through press releases. Parenting Education resources are also made available through the Cecil County Network of Care website.

Strategy 3: Inform the public about the availability of the resource directory through social media and other avenues.

Progress Update: Directory of Resources Promotion-
The Pinwheels for Prevention Campaign was promoted through social media, including Facebook and Twitter, a Proclamation read by County Council, and press releases. The public was urged to visit participating sites where the directory of resources was available.

Objective 3: Educate parents on issues of child development, discipline, and positive parenting skills.

Strategy 1: Distribute educational materials to parents.

Progress Update: Pinwheels for Prevention Campaign Educational Materials-
Posters and a two-sided handout were distributed to various organizations throughout the county in April 2016 as part of the Pinwheels for Prevention campaign. Side 1 of the handout showed a calendar promoting 15 minutes of play per day with your children and showed a different activity for each day. Side 2 listed community resources and crisis hotlines. Union Hospital incorporated the handout into the *New Beginnings* workbook

provided to new moms, and the handout was distributed by staff on the Maternity unit.

Strategy 2: Incorporate principles into programming for parents and families.

Progress Update: Programming for Parents and Families-
Materials distributed as part of the April 2016 Pinwheels for Prevention Campaign emphasized the importance of child development and positive parenting. The resource directory also included information on several programs in the county that emphasize these skills including: Nurturing Parenting, offered through Open Door Inc., My Family Matters, and the Youth Empowerment Source (YES); and Parenting with Love and Logic, offered through YES.

Objective 4: Educate professionals about child abuse and neglect.

Strategy 1: Host trainings on child abuse and neglect for professionals.

Progress Update: Child Maltreatment Training-
A Child Maltreatment Training was hosted by DSS at Cecil County Health Department on March 23, 2016. Several other trainings were promoted by the CMPTF.

Objective 5: Increase programming for at risk families.

Strategy 1: Support the development of programming for at risk families.

Progress Update: Support for Programming-
The CMPTF supports the development of programming for at risk families by member organizations. The Nurturing Parenting and Parenting with Love and Logic programs are two such programs in the county.

Strategy 2: Research and apply for grants.

Progress Update: Pinwheels for Prevention Campaign Grant-
The CMPTF subcommittee applied for and received grant funding for the April 2016 Pinwheels for Prevention Campaign through Cecil County's LMB. The subcommittee is currently researching and applying for grants for the planned April 2017 campaign. The campaign promotes the availability of programming.

Priority 5: Childhood Obesity Progress Report:

Priority 5 of Cecil County’s LHIP addresses the following SHIP measure:

Percentage of children and adolescents who are obese			
	2010 (high school)	2013 (high school)	2016 Goal*
Cecil	12.1	13.2	11.9
Maryland	11.7	11.0	-

* County goal based on 10% improvement over 2013 data.

HP 2020 Target: 16.1 MD 2017 Goal: 10.7

Source: Maryland Youth Risk Behavior Survey (YRBS)

Goal 1: Improve nutrition and increase physical activity for youth (children) in Cecil County to reduce the prevalence of childhood obesity by 10%.

Objective 1: Increase awareness of available youth-oriented physical activities and youth-oriented nutritious foods available in the county.

Strategy 1: Promote awareness of available physical activity and age-appropriate nutritious programs and activities in the county by posting resources on agency websites, newsletters, and postings in or around Town Parks, at the Library, through social media and other internet sources.

Progress Update: Let’s Move! Initiative-
The Cecil County Family Education Center, Kiddie Academy, Holly Hall Elementary School, Gilpin Manor Elementary School, and Bay View Elementary School included Let’s Move! initiative information on their website and/or newsletters. Let’s Move! is an initiative, launched by First Lady Michelle Obama, dedicated to solving the problem of obesity within a generation. The five pillars of the Let’s Move! initiative include: (1) Creating a healthy start for children; (2) Empowering parents and caregivers; (3) Providing healthy food in schools; (4) Improving access to healthy, affordable foods; and (5) Increasing physical activity.

Strategy 2: Change the food culture and environment to focus on identifying and eating good portion sizes, as well as participating in at least 30 minutes of physical activity daily.

Progress Update: Community Resource Inventory-
Ten community partners including the Cecil County Department of Community Services (DCS), UHCC, Union Multi Specialty Practices, Union Medical Nutritional Services and Diabetes Center, Union Bariatric Program, CCPS, Elkton Housing Authority, Seventh Day Adventist Church, Cokesbury United Methodist Church and Cecil College promoted the Community Resource Inventory on their website and/or newsletter. The Community Resource Inventory provides information on community resources that address the risk factors associated with heart disease, including obesity.

Strategy 2a: Develop and implement a campaign led by youth in each community to move forward with these initiatives (using peer role modeling may be a more effective awareness promotion tool).

Progress Update: MyPlate-
The Cecil County Family Education Center, Holly Hall Elementary School, Gilpin Manor Elementary School, and Bay View Elementary School included MyPlate signage at their site. MyPlate is a nutrition guide developed by the U.S. Department of Agriculture, emphasizing the importance of a healthy eating style and offering ideas and tips to help people eat healthier.

Objective 2: Increase motivation for youth to participate appropriate amounts of physical activity and eating healthy on a daily basis.

Strategies 1 & 2: Supplement elementary and middle school curricula with hands-on/interactive nutritious activities; Supplement elementary and middle school curricula with lessons geared toward adding 10-15 minutes outdoor time to increase physical activity among youth at school.

Progress Update: CATCH Kids Club-
Elkton Middle School and Holly Hall Elementary School implemented the CATCH Kids Club after school program during the 2015-16 school year. The CATCH Kids Club is a physical activity and nutrition education program designed for elementary and middle school aged children (grades K – 8) in an after-school or summer setting. The program composed of nutrition education, including snack activities, and physical activity. CATCH Kids Club meets the National Afterschool Association (NAA) Standards for Healthy Eating and Physical Activity (HEPA).

Strategy 3: Promote after-school sports, sports clubs, and/or community service work that involves teaching good nutrition and physical activity measures to other youth in the community.

Progress Update: CCPS Lunch Menu-
To promote good nutrition and physical activity the Lets Move! initiative was featured on the August 2015 CCPS Lunch Menu.

Objective 3: Increase youth’s access to physical activities and nutritious foods in each community in Cecil County.

Strategies 1, 2 & 3: Make nutritious foods available to youth at home and away from home through projects like a community garden, partnerships with farmers’ co-ops, and the promotion of buying/using locally grown foods in cafeterias; Increase communication about the availability of physical activities and youth-oriented nutrition through social media sites and other internet usage; Display signage, send email blasts, send text messages, and provide quick phone reminder messages about local availability of physical activities and good sources of nutrition in the County.

Progress Update: Community Resource Inventory Promotion-
In order to increase community awareness of resources related to physical activity and nutritious foods, Cecil County DCS, UHCC, Union Multi Specialty Practices, Union Medical Nutritional Services and Diabetes Center, Union Bariatric Program, CCPS, Elkton Housing Authority, Seventh Day Adventist Church, Cokesbury United Methodist Church and Cecil College promoted the Community Resource Inventory on their website and/or newsletter.

Farmers Market Promotion-
Information about farmers markets was included on the August 2015 CCPS Lunch Menu. The University of Maryland Extension Cecil County, UHCC, Cecil County DCS, CCPS, and the Cecil County Family Education Center also promoted local farmers markets on their website and/or newsletters.

Conclusion

Cecil County made great strides in addressing the county's five identified health priorities during FY 2016. Beginning, in FY 2017 CHAC and its task forces will be working on three new priority areas, identified through the FY 2015- 2016 Community Health Needs Assessment and community health improvement planning process. The priorities included in the FY 2017- 2019 Community Health Improvement Plan (CHIP) are: 1) Behavioral Health; 2) Chronic Disease; and 3) Determinants of Health. Objectives related to substance use prevention, mental health, and obesity are also included in this plan. This will allow coalition members to build upon the successes of the previous LHIP.