



Healthy Montgomery Steering Committee Meeting
Monday, September 8, 2014
6:00 p.m. - 8:00 p.m.
Primary Care Coalition, 12th Floor
8757 Georgia Avenue
Silver Spring, Maryland 20910

6:00 p.m.	Welcome and Introductions <i>Co-Chairs Councilmember George Leventhal and Sharan London</i>
6:05 p.m.	Approval of Minutes from March 10, 2014 - Action Item <i>Co-Chairs Councilmember George Leventhal and Sharan London</i> HMSC Membership - Update and Action Item <ul style="list-style-type: none"> ▪ Welcome New Members ▪ Membership Consideration ▪ Recruitment and Membership Renewal Process
6:15 p.m.	HHS Director's Comments <i>Uma Ahluwalia</i> <ul style="list-style-type: none"> ▪ Introduction of new HM Program Manager ▪ University of Kentucky's Study of Highly Successful Partnerships ▪ Triple AIM ▪ Hospital CEO Meeting Update
6:35 p.m.	Work Group Implementation Reports <ul style="list-style-type: none"> ▪ Obesity Prevention, Behavioral Health and Evaluation Sub-Committee <i>Councilmember George Leventhal</i> <ul style="list-style-type: none"> ▪ Montgomery County Vending Machines ▪ Office of Legislative Oversight Study
6:55 p.m.	HM Staffing Plan - Review and Discussion <i>Dourakine Rosarion</i>
7:05 p.m.	HM Core Measure Selection Meeting - Update <i>Colleen Ryan Smith</i>
7:25 p.m.	HM Next Steps (Options) <ul style="list-style-type: none"> ▪ Montgomery County Community Health Needs Assessment ▪ Priority Areas Discussion
8:00 p.m.	Wrap-up/Adjourn <i>Co-Chairs Councilmember George Leventhal and Sharan London</i>
Next Meeting: The next Healthy Montgomery Steering Committee meeting is Monday, December 8th, 6pm-8pm, PLACE TBD. If you would like to host a future meeting, please speak with Jeanine.	



**Healthy Montgomery Steering Committee Meeting
Adventist HealthCare**

**820 W. Diamond Ave, Chesapeake Conference Room (6th Floor) • Gaithersburg, MD 20878
Monday, June 9, 2014 ■ 6:00PM-8:00PM**

Members and Alternates Present: Uma Ahluwalia, Tara Clemons, Mary Dolan, Tanya Edelin, Wendy Friar, Carol Garvey, Thomas Harr, Sam Korper, George Leventhal, Amy Lindsey, Sharan London, Kimberly McBride, Cesar Palacios, Monique Sanfuentes, Wendy Shiau, Jon Smink, Michael Stoto (by phone), Shari Targum, Ulder Tillman, Deidre Washington, Sharon Zalewski and Andrew Zuckerman

Healthy Montgomery Staff: Jeanine Gould-Kostka, Dourakine Rosarion, Colleen Ryan Smith and Karen Thompkins

IPHI Staff: Susan DeFrancesco and Michael Rhein

Guests: Elena Alvarado, Eleni Antzoulatos, Linda Ashburn, Perry Chan, Steve Galen, Sierra Jue-Leong, Thomas Lewis, Linda McMillan, Jamaal Russell and Kevin Young

Materials distributed: Handout packet included:

1. Agenda
2. Draft Minutes from 3-10-14 HMSC Meeting
3. HM Obesity Action Plan Responses to Public Comments
4. HM Behavioral Health Action Plan Responses to Public Comments
5. HM Data Project Team Core Measure Set: Slide Presentation
6. Triple Aim Memo
7. "Health Affairs – At the Intersection of Health, Health Care and Policy" article
8. Triple Aim in Montgomery County: Slide Presentation

Topic/Presenter	Key Points	Follow-up	Responsible Person
<p>Welcome and Introductions <i>Co-Chairs: Councilmember George Leventhal and Sharan London</i></p> <p>Approval of Minutes</p>	<p>The meeting was called to order at 6:16 p.m. by Co-Chair George Leventhal once quorum was established.</p> <p>The co-chairs thanked Dr. Deidre Washington and Adventist HealthCare for hosting the meeting. He welcomed everyone and asked the attendees to introduce themselves.</p> <p>Sharan London asked the Healthy Montgomery Steering Committee (HMSC) to review the draft minutes from the March 10, 2014 meeting.</p> <ul style="list-style-type: none"> • Sam Korper made a motion to approve the minutes. The motion was seconded and the minutes were approved by voice vote. 	<p>Approved minutes will be uploaded to the Healthy Montgomery web site</p>	<p>Healthy Montgomery Staff</p>
<p>Information Items <i>Uma Ahluwalia, MCDHHS director</i></p>	<ul style="list-style-type: none"> • Ms. Ahluwalia introduced and welcomed Karen Thompkins, Senior Planning Specialist who recently joined the Healthy Montgomery staff at DHHS • Ms. Ahluwalia also announced that Healthy Montgomery has been selected to participate in the University of Kentucky’s study of highly successful partnerships that involve hospitals, health systems, public health agencies and other parties focused on improving the health of communities they jointly serve. She explained that several of the HMSC members have been asked to be available to talk with University of Kentucky researchers during a site visit later in the week. She noted that a report about the site visit will be provided at the September meeting. • Ms. Ahluwalia also noted that DHHS has submitted its renewal application to serve as the Connector Entity for Montgomery and Prince George’s Counties. 	<p>Report on the University of Kentucky site visit at the next HMSC meeting</p>	<p>Uma Ahluwalia and HM staff</p>

Topic/Presenter	Key Points	Follow-up	Responsible Person
<p>Work Group Implementation Reports</p> <p>Obesity Action Plan Implementation <i>Linda Ashburn, Obesity Work Group Co-Chair</i></p>	<p>Linda Ashburn summarized the obesity group’s implementation activities. She announced that the Obesity Prevention Partnership had its inaugural meeting on May 29th. She reported that 72 people attended from a broad range of organizations, including many community-based organizations from Long Branch, the targeted area. She gave a brief overview of the preparation for the meeting, the meeting activities, the proposed structure of the Partnership, the approach to the Partnership’s work, and the reasons for targeting the Long Branch area in the initial stages of the Partnership’s strategic planning. She stated that a report from the meeting will be available by the next HMSC meeting.</p> <p>Discussion followed:</p> <ul style="list-style-type: none"> • The Obesity Prevention Strategy Group was absorbed into the Partnership • Councilman Leventhal noted that there was an “impressive assemblage” at the meeting with high energy • Baby Steps screens newborns and is interested in nutrition and obesity prevention and is a potential partner • The data needs for the Partnership are unknown at this point but the Partnership will be working on addressing that as a next step • Measurement and evaluation will include BMI and behaviors data and try to use data that already exists; will work with the HMSC Evaluation Subcommittee on the appropriate and available measures • How messages are tailored should take into account self-esteem, self-identity and cultural identify; the Partnership recognizes the need for any messaging to be culturally and linguistically appropriate and it will be working on a communication strategy • There was discussion at the Partnership meeting about the 	<p>Circulate report on the May 29th obesity prevention meeting to HMSC</p>	<p>Obesity Implementation Group and HM staff</p>

Topic/Presenter	Key Points	Follow-up	Responsible Person
	<p>name of the Partnership and potentially having it reflect the healthy living mission rather than the negativity of obesity</p> <ul style="list-style-type: none"> • Councilman Leventhal explained that if the Partnership has suggestions for policy change, it's best if the request and advocacy comes from the community rather than a policymaker—keeps the media focused on the issue and not the policymaker 		
<p>HM Behavioral Health Implementation Report <i>Kevin Young, Work Group Co-Chair</i></p>	<p>Kevin Young provided a summary of the pre-planning meetings he and Thom Harr have held in the last few months. They held a meeting in April with Hope Hill, Susan Augusty and Carol Walsh of the Collaboration Council to begin to explore the possibilities presented by <i>info</i>Montgomery and ways to enhance the <i>info</i>Montgomery site (e.g., kinds of information to include; how to make it accessible to lay people and people of different cultures and languages; how to make it user-friendly to people trying to find information). Early in June, they met with Uma Ahluwalia to discuss, from the DHHS perspective, her views on the scope of what <i>info</i>Montgomery should contain and also understand how the proposed enhancement of <i>info</i>Montgomery could benefit DHHS. At the meeting they discussed the different ways to organize the information, the need for several versions of the information (i.e., in addition to the on-line version); and the need to include parents and schools in the Task Forces and Advisory Council that will be formed. Kevin appealed to Dr. Zuckerman for assistance in identifying school personnel who can join the effort. They will move forward – they will continue to meet with the Collaboration Council and form a Task Force and Advisory Council to continue with the implementation work. He noted that they are still within the Action Plan timeframe.</p>	<p>Formation of Behavioral Health Task Force and Advisory Council</p> <p>Follow-up with Dr. Zuckerman regarding school representative</p>	<p>Behavioral Health Co-Chairs and HM staff</p> <p>Behavioral Health Co-Chairs and HM staff</p>

Topic/Presenter	Key Points	Follow-up	Responsible Person
	<p>Discussion followed:</p> <ul style="list-style-type: none"> • Councilman Leventhal shared two recourses – 1- he is directing the County’s Office of Legislative Oversight (OLO) to study behavioral health and can ask that they study service delivery gaps. OLO does research and can make policy recommendations. 2- Dan Hoffman, the County’s Chief Innovation Officer can help with a mobile app version of the <i>info</i>Montgomery resource materials. 	<p>Follow-up with Dan Hoffman</p>	<p>Behavioral Health Co-Chairs and HM staff</p>
<p>HMSC Evaluation Subcommittee Report <i>Sam Korper, Subcommittee Member</i></p>	<p>Sam Korper reported on the outcome of the first meeting of the HMSC Evaluation Subcommittee that was held in April. He noted that the group: considered the characteristics of a good measure; agreed that Healthy Montgomery (HM) needs to measure short-term outcomes as well as the impact on health disparities; and discussed the importance of the partners’ sharing and agreeing to the measures. The subcommittee’s action items include interacting with the two implementation work groups. Mike Stoto added that the Evaluation Subcommittee will also interact with the Data Project Team.</p>		
	<p>Discussion followed:</p> <ul style="list-style-type: none"> • Sharon Zalewski learned of a state data committee that works with Local Health Improvement Coalitions (LHIC) on interim measures and asked if HM is or should be part of that committee. Colleen Ryan Smith responded that she is familiar with the work of that committee and does not believe that its work is consistent with the HM work. • Dourakine Rosarion noted that the LHIC quarterly report does not lend itself to quantitative reporting. • Uma Ahluwalia asked if Sharon would forward HM staff information about the Committee so that the staff can determine whether follow-up is needed. 	<p>Sharon Zalewski will forward information about state data committee to HM staff. HM staff will determine if any follow-up is necessary</p>	<p>Sharon Zalewski and HM staff</p>

Topic/Presenter	Key Points	Follow-up	Responsible Person
<p>Adoption of HM Core Measures Set <i>Tom Lewis, PCC, Colleen Ryan Smith, DHHS, Mike Stoto, Georgetown University</i></p>	<p>Tom Lewis narrated a PowerPoint presentation for the HM Data Project Team that described its work in developing a HM core measure set. Tom discussed:</p> <ul style="list-style-type: none"> • Purpose for developing the core measures as a scorecard(dashboard) for the broader HM initiative • Criteria that was identified and applied to compile the core measure set, and the process the Team used based on their ability to characterize and measure: existing disparities among Montgomery County (MC) populations and sub-populations; potential for improvement in MC; and ability to address community concerns • How the team evaluated the measures by balancing several factors: existing disparities and inequities in Montgomery County and its sub-populations; actionable-potential for improvement; factors where Montgomery County is worse than state or national averages; factors susceptible to health sector or population-based interventions; included in hospital CHNAs; integrity and sustainability of data sources; and recommendations from experts on the HM Data Project Team. 		

Topic/Presenter	Key Points	Follow-up	Responsible Person
	<p>Discussion followed:</p> <ul style="list-style-type: none"> • Councilman Leventhal commended the Data Project Team for its impressive efforts and good work • The Councilman asked if HMSC members felt prepared to act on a motion to adopt the core measure set or if the vote should be delayed until the September meeting. It was explained that the vote would need to occur prior to September for the Team’s work to stay on track. • Monique Sanfuentes asked if the Team could consider capturing the pediatric population and young families in the measures; make the measures broader to capture children and families. • Sam Korper remarked that there are many moving parts and various needs that need to be harmonized • Amy Lindsey asked about a physical environment measure • There was agreement to offer an opportunity to HMSC members to provide feedback electronically • Carol Garvey suggested that the HMSC vote on adopting the concept of a core measure set <p>MOTION: Carol Garvey made a motion to adopt the concept of having a core measure set; the motion was seconded by Sam Korper; the motion passed by voice vote.</p>	<p>HMSC members to provide feedback electronically by 6/30/14</p>	<p>HM staff will send needed information for HMSC members to provide feedback; HM staff will provide feedback to the Data Project Team at its July 10th meeting and final recommendations will be made by the Team</p>
<p>Triple Aim / Healthy Montgomery Alignment <i>Steve Galen, Primary Care Coalition, and HMSC Co-Chair George Leventhal</i></p>	<p>Steve Galen and Councilman Leventhal presented a PowerPoint on Triple Aim. They emphasized the following points:</p> <ul style="list-style-type: none"> • It represents three dimensions of value; emphasizes that to bend the cost curve have to achieve improvements in population health and patient experience of care; need to work on all three aims at once 		

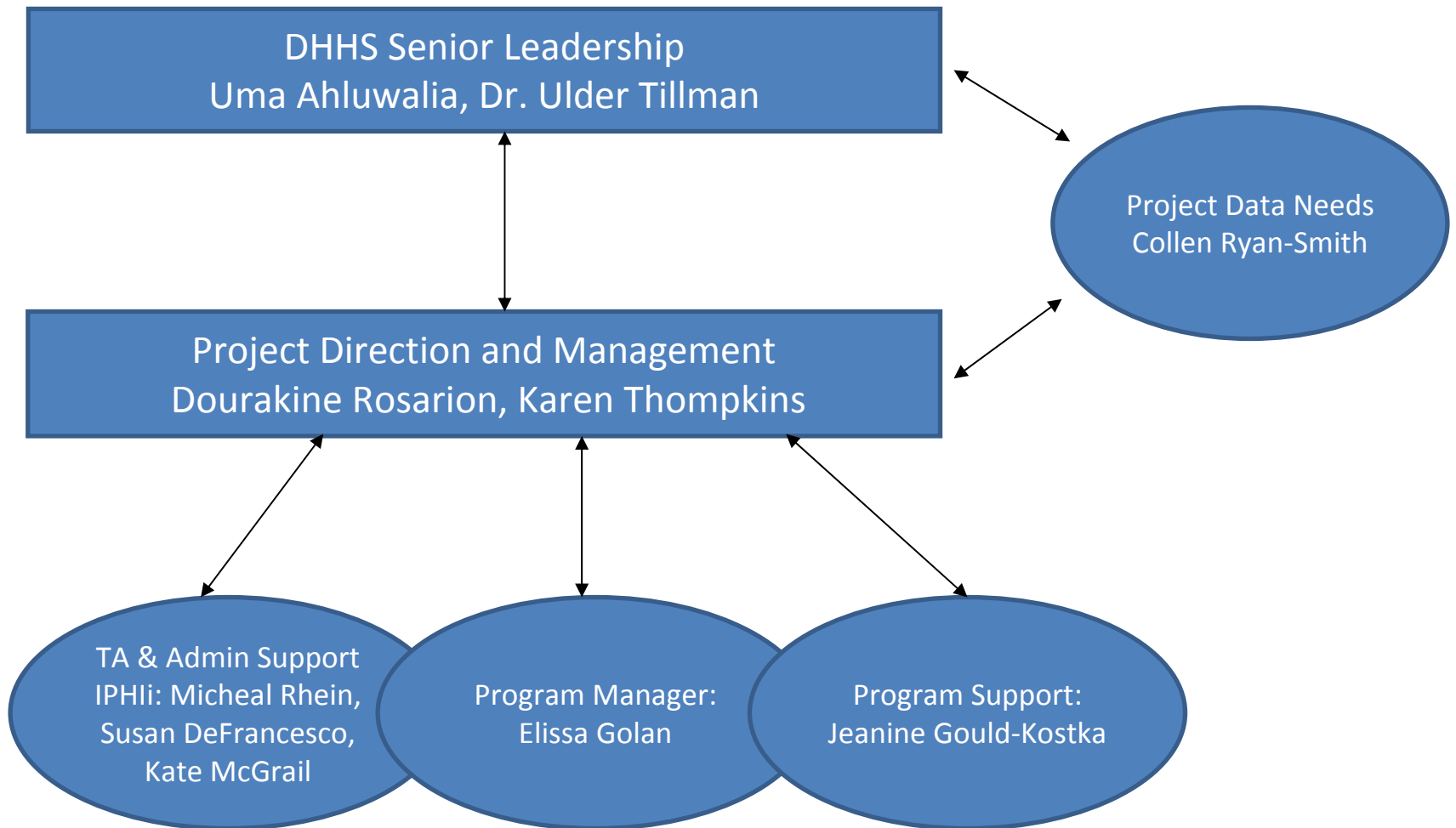
Topic/Presenter	Key Points	Follow-up	Responsible Person
	<ul style="list-style-type: none"> • Health reform is more than just health insurance reform • It offers a model or process for improvement • It involves learning by doing • Have to devise ways to measure population health • The “cost needle” is related to sustainability <p>Discussion followed:</p> <ul style="list-style-type: none"> • The Triple Aim can build greater participation and cooperation among partners – everyone moving together in the same direction • State level policymaker input needed – after election will work on getting state level input • Triple Aim focuses HMSC on looking at the larger picture – big system change • There are many current changes (e.g., Medicaid waiver; new hospital regulations that require hospitals to improve quality and reduce cost or lose funding) that support the Triple Aim approach • There are three states that have an integrated system of health care improvement – VT, MA, HI • We need more research and expertise at the table to talk about hospital cost containment <p>MOTION: Thom Harr made a motion to adopt Triple Aim as the overarching goal for Healthy Montgomery. Carol Garvey seconded the motion and it passed by voice vote.</p>		

Topic/Presenter	Key Points	Follow-up	Responsible Person
Announcements/Updates	<ul style="list-style-type: none"> • Thom Harr noted that the state is holding stakeholders meetings to discuss the integration of substance abuse and behavioral health services; could lead to changes in funding mechanisms around substance abuse • Dr. Zuckerman stated that he is glad to be part of the HMSC and encouraged members to use him as a resource • Uma Ahluwalia stated that the Behavioral Health and Obesity implementation groups are doing well and that cardiovascular disease and diabetes will be the next two issue areas HM will work on. Development of the action plans will move faster; a different process for action planning will be used • Dourakine Rosarion asked members to let her know if they are interested in serving on one of the new work groups and asked for suggestions for work group membership • Carol Garvey stated that the Maternal and Child Health priority area also contains issues that are cross-cutting with the current implementation topics. 		
Wrap-Up/Adjourn <i>Councilman George Leventhal</i>	The meeting was adjourned at 8:03 p.m.		

Respectfully Submitted: Dourakine Rosarion, Susan DeFrancesco and Karen Thompkins

Approved:

Healthy Montgomery Staff Support



<p>Senior Leadership - .25 FTE Uma Ahluwalia (.1), Dr. Ulder Tillman (.1-.2)</p>	<p>Guidance on strategic direction, policy and health-related matters</p>
<p>Project Direction/Management Dourakine Rosarion (.20), Karen Thompkins (1.0)</p>	<p>Manage staff activities and budget, strategic planning, community health needs assessment lead, leverage resources, grant management</p>
<p>IPHI - Technical Assistance Michael Rhein (.05), Susan DeFrancesco (1.0 FTE)/(.5 Obesity WG, .3 BHWG, .2 Evaluation Subcommittee)</p>	<p>Strategic planning (Rhein); Manage workgroups (Susan)– Staff lead for Behavioral Health and Obesity Workgroups, support Evaluation Subcommittee</p>
<p>Administrative Support Kate McGrail</p>	<p>Provide administrative/technical support to workgroups and staff activities</p>
<p>Program Management Elissa Golan (1.0 FTE)/(.5 Evaluation Subcommittee, .5 Obesity WG and BHWG)</p>	<p>Manage workgroups –Staff lead Evaluation Subcommittee, support Behavioral Health and Obesity workgroups</p>
<p>Program Support Jeanine Gould-Kostka PT (.60)</p>	<p>Steering Committee logistical support; website management, promotional materials development</p>
<p>Project Data Needs Colleen Ryan-Smith (.10)</p>	<p>Provide population health data support, community health needs assessment data support</p>

**Healthy Montgomery Obesity Action Plan Quarterly Report
Submitted by Co-Chairs Linda Ashburn and Linda Goldsholl
for September 8, 2014 HMSC Meeting**

1. Obesity Prevention Partnership

A. May 29th Partnership Meeting: A report summarizing the May 29th Partnership Meeting has been submitted with this quarterly report.

B. Work Group Meetings: Four work groups of the Obesity Prevention Partnership – child care/home (these two groups combined), health care, school, community -- met during the summer. Each group's discussion moved efforts further along in the process of identifying and planning action steps for intervention. The following is a summary of their proposed action steps.

- **School Work Group** - 1) Form wellness councils at the three elementary schools in the Long Branch area; 2) Advocate for County-wide joint use agreements in order to make schools more accessible to after-school nutrition and physical activity programming.
- **Community Work Group** – 1) Develop an asset map of the Long Branch area (using existing resources from CHEER and IMPACT Silver Spring) and 2) Develop and implement ways to share the information with service providers, nonprofit organizations, residents and others in the community.
- **Child Care/Home Work Group** -- Improve breastfeeding initiation and duration among limited-income mothers (The group is considering the value of developing and implementing a survey of mothers in the Long Branch area).
- **Health Care Work Group** – The Group will choose among the alternative goals of focusing on employee wellness or enhancing and supporting the work of one of the other work groups. There was a request by the work group to receive a “Community Profile” of the zip codes in Long Branch, including any available socio-demographic data, to better understand the population.

Starting in September, the Work Groups will meet monthly at the Long Branch Community Center on the 3rd Wednesday of the month, 2:30-4:30pm. All work groups will meet in one large room simultaneously. The regularity of this meeting space and time simplifies the meeting logistics and also allows for “cross-pollination” among work groups. Work Group Chairs/Co-Chairs will facilitate the work group discussions and work group members will take meeting notes. HM staff will support the research and other administrative needs of the groups, as needed, and help with evaluation and reporting.

At the November monthly meeting, all members of the Obesity Partnership will be invited. For part of that meeting, the participants will be asked to vote on revised versions of the Partnership name, mission, goals etc. that will incorporate comments offered at the May 29th Partnership meeting.

- C. Coordinating Committee:** The Partnership's Coordinating Committee met for the first time on July 16, 2014. The members reviewed their Committee's charge:
- a. monitor work groups' progress;
 - b. develop a funding strategy;
 - c. develop a communication strategy; and
 - d. develop an evaluation plan.

The Committee members prioritized these activities and discussed how to move forward on helping the Partnership finalize the adoption of its name, mission, vision, and goals. The Committee will start work on the funding strategy at its September meeting. The members are looking forward to working with the HMSC Evaluation Subcommittee on an evaluation plan. The Committee agreed to meet monthly and schedule its meetings a few weeks after the Work Groups meet.

2. Data Monitoring and Surveillance System

On July 7, 2014, a small group of members of the obesity work met to discuss the action step of the Action Plan that addresses the need for adequate and reliable obesity-related data on high-risk populations. The four data sources that were mentioned in the Action Plan Report were reviewed and the current status of each were assessed.

- A. Obesity prevention indicators for children aged 2-4 years old in the Montgomery County Women Infants and Children (WIC) Program.** Data elements were identified to measure obesity in 2-4 year olds in Montgomery County WIC program and reviewed by Laura Sullivan, WIC representative to the Obesity Prevention Partnership. MCDHHS will establish an agreement with WIC to obtain these data annually. Also, the Healthy Montgomery Data Project Team has proposed to the HMSC that it adopt weight status of WIC participants 2-4 years as one of its core measures. Upon adoption in September 2014, the measures are being compiled for inclusion in the 2015 HM Needs Assessment.
- B. Obesity prevention indicators for middle and high school students based on the Maryland Risk Behavior Survey (YRBS).** Department of Health and Mental Hygiene (DHMH) published PDF tables of results for Maryland and its jurisdictions for the 2013 Maryland YRBS in June 2014. In June 2014, and again in August 2014, MCDHHS has submitted data requests to DHMH to acquire flat file electronic county-level data compiled in the 2013 administration of the Maryland YRBS to enable MCDHHS, Healthy Montgomery, and local partners to compile key findings from the survey.
- C. Representative County Sample from Maryland Behavioral Risk Factor Surveillance System (MD BRFSS)** Planning has been initiated to establish activities to address MD BRFSS changes desired by Montgomery County to obtain accurate and reliable results that represent the County's diverse community.

D. Collection/measurement of the BMI status of MCPS elementary school students in Kindergarten and 6th grade. Partnership members, DHHS Senior Epidemiologist Colleen Ryan Smith, and HM staff participated in a meeting with Dr. Andrew Zuckerman (HMSC member and MCPS Chief of Staff) and MCPS Student Services staff to discuss the possibility of acquiring data elements from MCPS school records that will allow for the measurement of weight status among Kindergarteners and 6th graders. Dr. Zuckerman expressed his commitment to providing the needed data to DHHS, acknowledging the challenges presented by the large volume of records that would need to be reviewed to collect the data and the lack of a computerized data system that includes the needed data elements. In follow-up to the meeting, Dr. Zuckerman worked with his team internally to determine a plan of action and timeline:

- Long-term plan: MCPS will work with DHHS to coordinate data collection on health status information in a more efficient manner
- Medium-term plan: Fields will be created and calculation incorporated into the current MCPS database by MCPS IT staff to allow for weight status to be determined. At the beginning of the school year, the MCPS registrars at each school will input data needed from the Health Inventory Form and this data will be used to calculate weight status that will be made available to Healthy Montgomery. This would happen in summer of 2015 at the earliest.
- Short-term plan: University of Maryland will recruit students to go to the schools to collect the necessary data. It is hoped to begin this process in the fall of 2014.

3. Other Activities:

- Linda Ashburn, Linda Goldsholl and HM staff participated in a conference call with Partnership members Jon Smink (Montgomery County Recreation, HMSC member) and Karen Ward Kincer (President, Montgomery County Road Runners Club) to generate ideas for including more representation in the Partnership from the physical activity field. Jon and Karen also proposed the idea of starting running clubs in the elementary/middle schools in the Long Branch area.
- Brenda Salas (Wellness Program Manager, Montgomery County Government) has offered to work on a worksite wellness work group. She and the Partnership Co-Chairs are currently working to recruit others who are interested in this work to see if there is enough interest to form a work group. If there is interest, an initial meeting of the work groups will be planned at the September meeting.
- Partnership member Susan Augusty (Collaboration Council for Children, Youth and Families) is working to enhance the obesity-related information available on *info*Montgomery using a resource list that was compiled for the initial Partnership meeting.



Healthy Montgomery Obesity Prevention Partnership

May 29, 2014





HEALTHY MONTGOMERY

“We all must take responsibility to make healthy choices for ourselves and for our families. But for some of us, because of where we live, learn, work, and play, those choices are virtually impossible, with obstacles too great to overcome, no matter how motivated we may be.”

From *Time to Act: Investing in the Health of Our Children and Communities* by the Commission to Build a Healthier America of the Robert Wood Johnson Foundation

Acknowledgements

Many Health Montgomery partners contributed to the success of the inaugural meeting of the Healthy Montgomery Obesity Prevention Partnership. Most notable are the many meeting participants who took the time to attend the meeting and have committed to continuing the work. Also, our speakers – Montgomery County Councilmembers George Leventhal and Cherri Branson, Takoma Park City Councilmember Jarrett Smith, the Director of the Montgomery County Department of Health and Human Services, Uma Ahluwalia and our County Health Officer, Dr. Ulder Tillman who took time out of their incredibly busy schedules to share their thoughts and offer their encouragement. Special thanks to the speakers at the meeting who provided the community perspective - Rosa Diaz, Margarita Gutierrez and Jenna Umbriac. They shared their experience and passion and inspired us. Also, special thanks are offered to the staff members of the University of Maryland Extension Expanded Food and Nutrition Education Program, Healthy Montgomery, and the Institute for Public Health Innovation, who arranged the meeting logistics, prepared and organized the meeting materials, took photographs, and helped to facilitate and take notes for the work group sessions at the meeting. We are also grateful to Healthy Montgomery and Institute for Public Health Innovation staff who worked with us to prepare this Report.

Through the generosity of the Montgomery County Department of Health and Human Services English/Spanish interpretation was provided at the meeting. The Department also donated audio-visual equipment. Sandwich wraps for lunch were donated by Sweetgreen in Silver Spring. Healthy Montgomery and the University of Maryland Extension also provided funding for additional meeting refreshments.

Last but not least, we remain grateful for the continued support of the Healthy Montgomery Steering Committee and recognize the dedication of the members of the Healthy Montgomery Obesity Action Planning Work Group who laid the foundation for the Partnership's important work ahead.

Linda Ashburn

Linda Goldhsoll

Obesity Prevention Partnership Co-Chairs

INTRODUCTION

Healthy Montgomery

Healthy Montgomery (HM) is the community health improvement process for Montgomery County, Maryland. Launched in June 2009, it is an ongoing effort that brings together a broad range of individuals representing County government agencies, the County's four hospital systems, minority health programs/initiatives, community-based advocacy groups and service providers, academic institutions and the health insurance community to develop action plans to improve the health and well-being of all Montgomery County residents. Particular attention is given to populations most at risk for poor health.

Healthy Montgomery was created in recognition of the need to conduct timely, comprehensive, data-based health needs assessments in order to better determine health and human services needs in the various communities and populations in the County. Data-based needs assessments identify unmet needs and disparities in health status among the County's communities and populations and allow for the development, implementation, and evaluation of strategies to meet the needs.

The Montgomery County Department of Health and Human Services (MCDHHS) provides staff support for Healthy Montgomery. The County's four hospital systems provide additional funding. Other Healthy Montgomery partners provide in-kind support.

Healthy Montgomery Goals and Objectives

Healthy Montgomery's three goals are to:

- Improve access to health and social services;
- Achieve health equity for all residents; and
- Enhance the physical and social environment to support optimal health and well-being.

Healthy Montgomery is governed by a Steering Committee (HMSC). In addition to defining the goals of HM, the Steering Committee established a set of objectives:

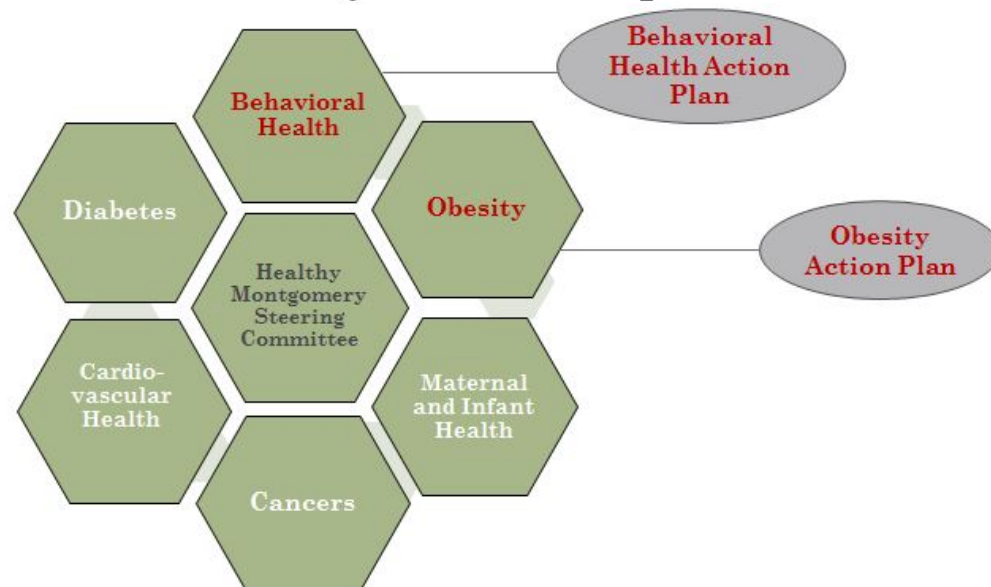
- Identify and prioritize health needs in the County as a whole and in the diverse communities within the County;
- Establish a comprehensive set of indicators related to health processes, health outcomes, and social determinants of health in Montgomery County that incorporate a wide variety of County and sub-County information resources and utilize methods appropriate to their collection, analysis, and application;
- Foster projects to achieve health equity by addressing health and well-being needs, improving health outcomes, and reducing demographic, geographic, and socioeconomic disparities in health and well-being; and

- Coordinate and leverage resources to support the Healthy Montgomery infrastructure and improvement projects.

Healthy Montgomery Priority Health Topics

The HMSC has identified six health and well-being priorities of the County: behavioral health, cancer, cardiovascular health, diabetes, maternal and infant health, and obesity. Behavioral health and obesity were selected as the initial two focus areas to complete action planning; limited resources could not support work groups on all six priority areas. A Behavioral Health Action Plan and an Obesity Action Plan have been developed by work groups composed of HMSC members and other government and community-based partners.

Healthy Montgomery: Six Priority Areas for Community Health Improvement



Healthy Montgomery Obesity Action Plan

The Healthy Montgomery Obesity Action Planning Work Group began its work developing an Obesity Action Plan in June of 2012. The Work Group included representatives from governmental and community-based organizations with subject-matter expertise in obesity, nutrition, physical activity, and community settings (schools, hospitals, health care providers, and recreational facilities). Many of the members work in organizations that advocate for and provide health and social services to vulnerable populations disproportionately affected by poor obesity outcomes. (See Appendix A for a list of the Obesity Action Planning Work Group members).

The Work Group was directed by the HMSC to develop an action plan that builds on existing resources and fills gaps to improve health outcomes, maximizes collaboration and efficiency, achieves health equity, and promotes healthy behaviors. The Work Group was also charged with the task of developing an evaluation plan to monitor and measure progress.

To develop the Obesity Action Plan, the Work Group:

- Analyzed existing data to understand the extent of the obesity problem in the County and identify populations most at risk;
- Created an inventory of obesity-related activities, programs, services, and policies to identify assets and gaps; and
- Researched evidence-based strategies to prevent and reduce obesity.

A draft of the Action Plan Report was completed in the fall of 2013. Public comments were invited in early 2014. In March 2014, the final draft of the Action Plan was approved and adopted by the Healthy Montgomery Steering Committee. Implementation efforts are being led by Work Group Co-Chairs Linda Ashburn (University of Maryland Extension Program, Expanded Food and Nutrition Education Program) and Linda Goldsholl (Montgomery County Department of Health and Human Services, African American Health Program).

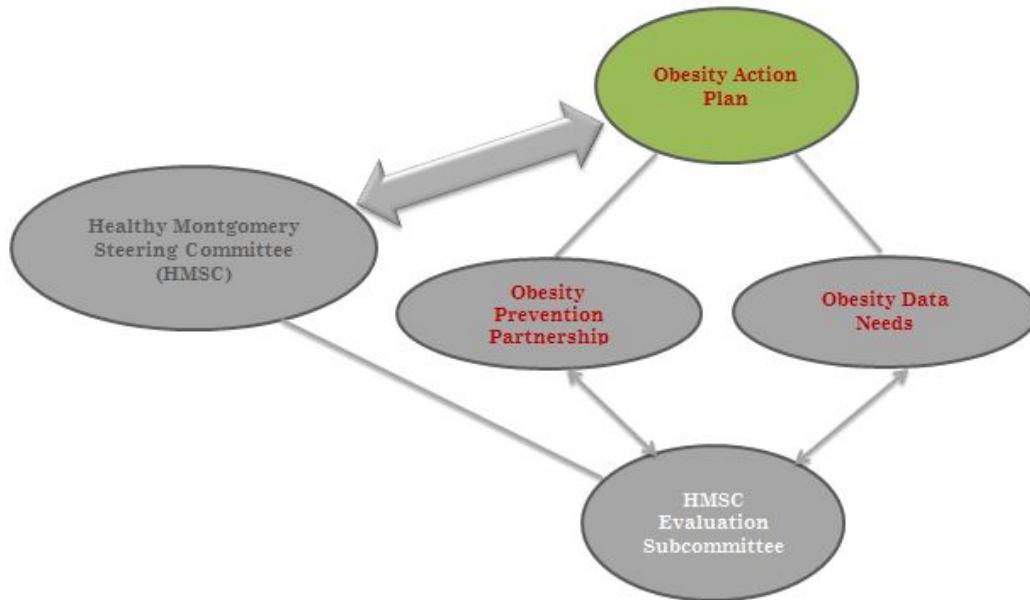
In its discussions, the Obesity Action Planning Work Group recognized that obesity is a priority concern for the County and that several government agencies and other organizations have been engaged in working on obesity over a period of several years. However, members of the Work Group, many of whom were involved in these efforts, also recognized the vital need for a strong, sustainable entity that has the authority to effectively facilitate collaboration and support efforts that fill gaps in programming and policy, reduce redundancies, and acquire and leverage resources with maximum impact. The Work Group also concluded that the County lacks a reliable data system for monitoring the effectiveness of obesity prevention and reduction interventions undertaken that target children and populations most at risk.

Therefore, the Healthy Montgomery Obesity Action Plan included the following recommendations to prevent and reduce obesity among County residents:

- Establish a broad-based, collaborative, County-wide partnership to address gaps in existing obesity prevention and reduction programming and policy, reduce redundancies and make the best use of finite resources, with a focus on children and populations most at risk; and
- Build upon existing data sources to establish a reliable and valid data system for monitoring the effectiveness of obesity prevention and reduction programs and policies, especially among children and high-risk populations.

A link to the complete Action Plan report can be found at www.healthymontgomery.org.

Healthy Montgomery Obesity Action Plan Implementation



Healthy Montgomery Obesity Prevention Partnership¹ May 29, 2014 Inaugural Meeting

Opening Remarks and Speakers

In accordance with the Obesity Action Plan recommendation to establish a County-wide, collaborative partnership focused on obesity prevention and reduction, the Obesity Action Planning Work Group convened its first meeting of the Healthy Montgomery Obesity Prevention Partnership on May 29, 2014 at the Silver Spring Civic Center. A total of 73 participants attended the meeting representing Montgomery County government agencies, County hospitals, local non-



¹ The name Healthy Montgomery Obesity Prevention Partnership is being used for the Partnership temporarily. Participants at the May 29th meeting provided comments on the name that will be incorporated into alternative options and voted upon and finalized at a later meeting of the members.



profit organizations and service providers, academic institutions, insurance payers, and community members. (A list of organizations represented can be found in Appendix B.) Participants were invited to the meeting because of their experience and knowledge of healthy eating, physical activity, community needs and resources, obesity prevention, and public policy. Many of the attendees also live and work in the community of Long Branch, the community targeted for the initial work of

the Partnership.

Linda Ashburn and Norma Mendoza, both of the University of Maryland Extension, welcomed the attendees and explained the purpose of the Partnership - that is, to create and implement a coordinated strategy to decrease and prevent obesity in Montgomery County, especially among populations most at risk.

Create and implement a coordinated strategy to decrease and prevent obesity in Montgomery County

- Purpose of Partnership

Opening remarks were also provided by Montgomery County Councilmembers George Leventhal (Co-Chair of the Healthy Montgomery Steering Committee) and Cherri Branson; Takoma Park City Councilman Jarret Smith; Director of the Montgomery County Department of Health and Human Services Uma Ahluwalia; and Montgomery County Health Officer Dr. Ulder Tillman. Each of the speakers described a vision for a healthier Montgomery County and expressed support for the Partnership and its mission, vision, and goals.

Speakers working in the Long Branch community showcased the many ways that obesity affects families and communities. Rosa Diaz, with the YMCA's Linkages to Learning program, explained obesity's damaging effect on the health of communities; Jenna Umbriac of Manna Food discussed the connection between obesity and food systems; and Margarita Gutierrez of Community Clinic, Inc. focused her remarks on the devastating impact on children and their families.

Partnership Approach

Linda Ashburn described the proposed approach of the Partnership and the rationale for narrowing its focus and targeting its initial efforts in the Long Branch community of the County. Long Branch was identified as a community at high risk for obesity because there is a cluster of three elementary schools which have a high percentage (68% to 94%) of students that qualify for Free and Reduced-Priced Meals (FARMS).² Several studies have shown that food-insecure adults and children are more likely to be overweight or obese.³ Long Branch also has a high concentration of immigrant and minority populations and families with limited income.⁴ Linda noted that County data reveal that African-American and Hispanic residents are more at risk for overweight and obesity and that limited-income children aged two to five in Montgomery County are more likely to be overweight or obese than children in any other areas of Maryland.⁵

What We Know

- Over half of adults are overweight or obese;**
- African-American and Hispanic residents are more at risk for overweight or obesity;**
- In households with children, over 35% of the children are overweight or obese;**
- Limited-income children aged 2-5 are more likely to be overweight or obese here than in the rest of MD**

Data Summary, Healthy Montgomery Obesity Action Plan, March 2014. Available at: www.healthymontgomery.org

Linda also described the proposed approach for structuring the Partnership’s work. It is focused on implementing evidence-based strategies that prevent and reduce obesity including:

- Place-based programs and policies (e.g., school, home, workplace);
- Multi-level, multi-sector and multi-component interventions; and
- Early intervention (targeting children at an early age and their families).⁶

² *MCPS 2013-2014 Schools at a Glance*, Office of Shared Accountability, Montgomery County Public Schools). Available at:

<http://www.montgomeryschoolsmd.org/departments/sharedaccountability/glance/>

³ *Food Insecurity and Obesity: Understanding the Connections*, Food Research and Action Center, Spring 2011; *Food Insecurity and Risk for Obesity Among Children and Families: Is There a Relationship?* Healthy Eating Research, Robert Wood Johnson Foundation, April 2010.

⁴ Zip codes in the Long Branch area rank high on a Community Needs Index developed by Dignity Health. The Index measures socio-economic factors related to high medical needs such as low income, high concentrations of immigrants and minority populations, low educational attainment, and low rates of health insurance coverage. A score of 5.0 represents the highest need on a scale of 1 to 5; 20903 has a score of 4.2 and 20912, a score of 4. Accessed at: <http://cni.chw-interactive.org/>

⁵ *Data Summary, Healthy Montgomery Obesity Action Plan, March 2014. Available at: www.healthymontgomery.org*

The Partnership's activities will focus on the communities surrounding the schools with the high FARMs rates and will include program and policy interventions that focus on healthy eating and active living. The work will involve educational approaches as well as environmental and systems changes that are directed and implemented throughout the community, and target young children and their families. In the future, the Partnership will apply successes and lessons learned in the Long Branch community to other communities in the County.



Proposed Name, Vision, Mission and Goals

The Action Planning Work Group also developed a proposed organizational name, vision, mission and goals for the Partnership that would reflect its approach to the work. The proposed name, vision, mission and goals are included in the Obesity Action Plan and were further refined by the Action Planning Work Group as it prepared for the Partnership's inaugural meeting. During the meeting, Linda Ashburn and Linda Goldsholl facilitated a discussion about the

⁶ *Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation*. Institute of Medicine, Washington D.C.: The National Academies Press, 2012; Huang TT, Drewnowski A, Kumanyika SK, Glass TA. A systems-oriented multilevel framework for addressing obesity in the 21st century. *Prev Chronic Dis* 2009;6(3):A82. http://www.cdc.gov/pcd/issues/2009/jul/09_0013.htm. Accessed: August 25, 2014; Dooyema CA, Belay B, Foltz JL, Williams N, Blanck HM. The childhood obesity research demonstration project: A comprehensive community approach to reduce childhood obesity. *Childhood Obesity* 2013; 9(5).

proposed name, vision, mission and goals. Participants were also given the opportunity to provide their comments in writing. Participants' reactions and suggestions were compiled and will be reviewed and discussed by the Partnership's Coordinating Committee. Revised versions of the name, vision, mission, and goals will be offered to the Partnership members for their vote at a later meeting. A brief summary of participants' comments is below.

Proposed Name: *Healthy Montgomery Obesity Prevention Partnership*

Suggestions included a name that would focus on promoting overall optimal health, wellness or healthy living. Other participants commented that the proposed name focuses on prevention and does not reflect the need to also work on the reduction of obesity.

Proposed Vision: *A Community in Which All Montgomery County Residents Have the Knowledge and Opportunity to Eat Well and Be Physically Active*

Participants suggested the inclusion of phrases such as: "a just and equitable society," "eating healthy and living active lives," "opportunity and motivation," and terms that would reflect the vision of making healthy food accessible.

Proposed Mission: *Develop, Coordinate, and Enhance Successful Strategies to Prevent and Reduce Obesity Among Montgomery County Residents by Addressing Lack of Access, Unhealthy Behaviors, and Healthy Inequities*

Participants' comments noted that the vision should be more positive and inspiring rather than deficit-based – e.g., promoting access to healthy foods, increasing access, health literacy and equity. Suggestions included incorporating the terms "evidence-based" strategies and policy change as well as implementation and evaluation.

Proposed Overall Goals:

- *Create Environments that Promote Physical Activity as an Integral and Routine Part of Life*
- *Create Food and Beverage Options that Ensure that Healthy Food and Beverage Options are the Routine, Easy Choice*
- *Counter Unhealthy Messages and Maximize the Impact of Physical Activity and Nutrition Messages by Making Them Socially and Culturally Appropriate*
- *Make schools a focal point for obesity prevention in the community through various intervention and policy changes*
- *Expand the Role of Health Care Providers, Insurers, and Employers in Obesity Prevention*⁷

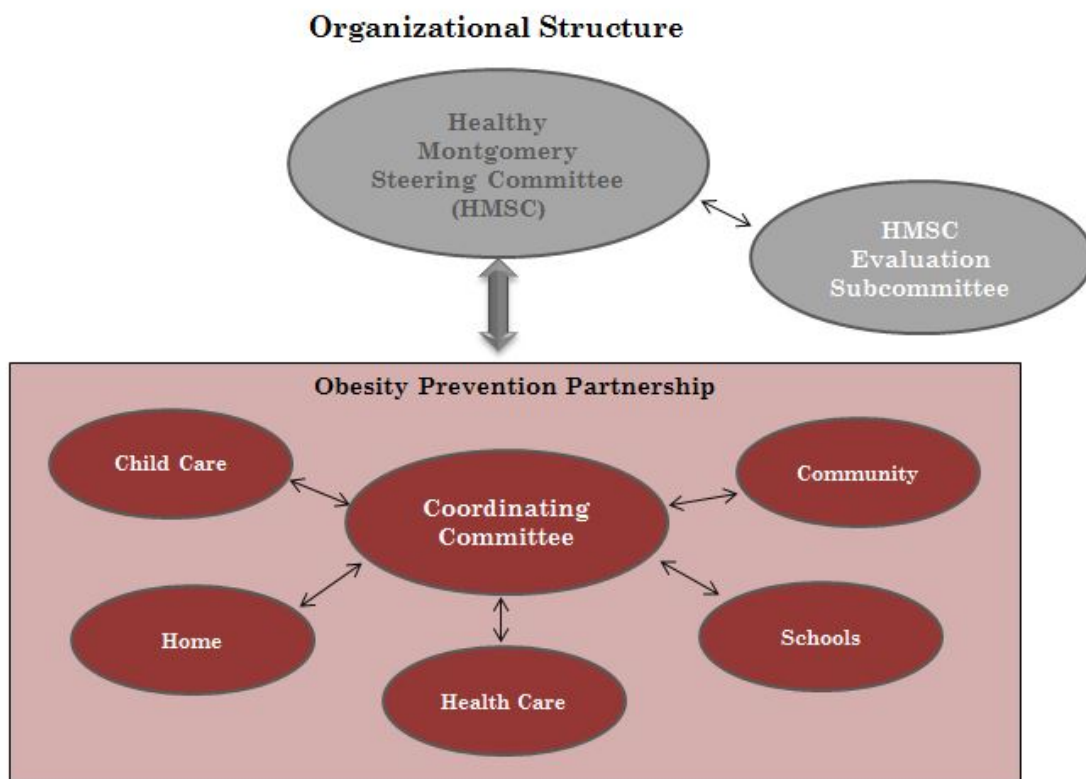
Some of the comments received regarding these goals include incorporating language that: reflects the idea of making healthy food and physical activity opportunities affordable and accessible; promotes making healthy, tasty foods the easy choice; and encourages civic

⁷ Adapted from: *Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation*. Institute of Medicine, Washington D.C.: The National Academies Press, 2012.

engagement and policy change. Other comments called for benchmarks and measurable objectives related to the goals, inclusion of business and the food system, and a focus on early intervention.

Organizational Structure

The Action Planning Work Group also offered a proposed organizational structure for the Partnership. Healthy Montgomery staff member Susan DeFrancesco of the Institute for Public Innovation explained the proposed structure and how it fits into the overall HMSC structure. She explained that the HMSC guides all facets of the community health improvement process, including the Partnership’s work on obesity reduction and prevention. The Partnership will report its progress to the HMSC as well as inform the Committee of its resource needs and challenges. The Partnership will also make recommendations to the HMSC for policy change and needed action. The HMSC’s Evaluation Subcommittee will also work with the Partnership on the evaluation of the strategies developed by the Partnership for implementation. The Partnership’s work will be overseen by the Partnership’s Coordinating Committee. The Coordinating Committee will monitor and guide the Partnership’s Work Groups and is also charged with developing a funding strategy, communication strategy, and working with the HMSC Evaluation Subcommittee on an evaluation plan. It will also address ongoing data needs of the Partnership. The Partnership’s Work Groups will develop and implement program and policy interventions aimed at obesity prevention and reduction. The Work Group categories reflect a place-based, multi-sector approach and include: Environment, Schools, Child Care, Home and Health Care. A sixth Work Group that would focus on workplace wellness was also considered but did not



convene at the meeting because potential group members were not as easily identified as they were for the other groups and because it was necessary to conserve staff resources. It will likely

Proposed Work Group Members

Community Environment – planners, community advocates, community-based organizations, food retailers, recreation providers, businesses

Schools – faculty, administration, school nurses, parents, students

Child Care – pre-school programs, before-and after-school programs, summer youth programs

Home – breastfeeding, parenting, home intervention programs

Health Care – Health care providers, health insurers, hospitals, clinics, school-based health and wellness centers

convene at future meetings. The first meeting was not inclusive of all the proposed initiatives and organizations and additional members are welcomed.

Work Group Sessions

In the second half of the meeting, the attendees divided into the five new Partnership Work Groups to begin developing and implementing program and policy interventions aimed at obesity

prevention and reduction. Participants self-selected into the Work Groups. Healthy Montgomery staff and staff from the University of Maryland Extension facilitated each Work Group session and provided note-taking. (Staff had received some preliminary training and instruction on meeting facilitation). The Work Group participants were asked to introduce themselves and explain their roles relative to obesity efforts, discuss challenges and successes familiar to them, and to consider program or systems-level actions that could be implemented in the Long Branch area to improve or reduce obesity. The Work Groups were provided with resources, including:

- Work Group-specific fact sheets briefly describing evidence-based obesity prevention/reduction strategies (Appendix C);
- A list of existing obesity-related sources and programs in the County (Appendix D); and
- An action plan worksheet to guide the Work Groups’ thinking about key steps involved in implementing a program or achieving policy or systems change (Appendix E).

The Work Groups were also given guiding questions to use when considering potential interventions related to either program or policy/systems-level changes. These questions included:

- Is there evidence that this intervention results in a decrease in obesity or is recognized as a “best practice” in obesity reduction or prevention?
- Does this intervention (or a similar one) already exist in Montgomery County, and if so who is doing it?
- Would this intervention be effective in the context of Montgomery County and, if so, what conditions or modifications might be required to make it more effective?

- How much time will it take to implement this intervention?
- What resources are needed?
- What stakeholders need to be involved?



Facilitators asked for volunteers among the Work Group members to serve as chair/co-chairs after briefly describing expectations for the chair/co-chair role (i.e., set agendas for Work Group meetings, facilitate discussions, and monitor and report on progress). At the end of the Work Group sessions, volunteers from the Work Groups presented a summarized report of their Group's discussion to the larger group of participants. The Work Groups will continue to meet to complete work on developing their program and/or policy action plan worksheets and to implement the work.

Wrap-Up

A wrap-up of the meeting was provided by Linda Ashburn. She thanked the attendees for their participation, encouraged them to fill out the meeting evaluation forms, and explained that they would be hearing from HM staff about follow-up meetings of the Coordinating Committee and Partnership Work Groups. She also reiterated an earlier request for volunteers to serve on the Partnership's Coordinating Committee. Five meeting participants did volunteer to serve on the Committee along with Co-Chairs Linda Ashburn and Linda Goldsholl.

Meeting Evaluation

The Table in Appendix F tabulates the results of evaluations completed by the meeting participants. The Table lists the number of participants who answered each question, which ranged from 30 to 34. Seven topics were evaluated: the meeting overall; the presentation/discussion of the name, vision, mission; the presentation/discussion of the partnership organizational structure; Work Group sessions; partnership participation; meeting new partners; and the venue.

Overall Evaluation of the Meeting

Evaluations revealed that 94% of the respondents strongly agreed/agreed that the meeting was well-organized (62% strongly agreed; 32% agreed). Half of the respondents (50%) strongly agreed that the pace of the meeting was appropriate; 35% agreed; 9% were unsure; and 6% disagreed. Half of the respondents also strongly agreed that the meeting was productive; 32% agreed and 18% were unsure.

Presentation/Discussion of Name, Vision, Mission

Only 15% of respondents strongly agreed that the voting process used for the Partnership name, vision and mission worked well; 39% agreed that it worked well; 33% were unsure; 6% disagreed and 6% strongly disagreed. Several comments were offered by respondents about the voting process including the need to have spent more time on the Work Group discussion, the objective of the voting, and participant buy-in. One respondent also suggested translating the name, mission, goals into Spanish to be sure they are culturally and linguistically responsive.

Presentation/Discussion of Partnership Organizational Structure

At the meeting, the participants were not asked to vote on the organizational structure although respondents did answer the question of whether or not voting on the organization structure worked well. It is unclear if their responses reflected more their views on the voting used for the name, the mission etc. or if they were reporting their thoughts on the organizational structure itself. Given the ambiguity of the response, the data results are not summarized here.

Work Group Sessions

A total of 70% of respondents strongly agreed/agreed that the purpose of the Partnership Work Groups was clear (35% strongly agreed; 35% agreed); 21% were unsure and 9% disagreed. Fifty-six percent (56%) of respondents strongly agreed/agreed that the Work Group handouts were helpful (28% strongly agreed, 28% agreed); 34% were unsure; 9% disagreed. Participants were also asked about the facilitation of the Work Groups. Fifty-one percent (51%) of respondents strongly agreed/agreed that the facilitation was helpful; 30% were unsure and 15% disagreed. Sixty-nine percent (69%) of respondents strongly agreed/agreed that the Work Group was productive (30% strongly agreed, 39% agreed). However, 30% of respondents were unsure of

the Work Group productivity. The comments on the Work Group sessions revealed that the respondents appreciated the diversity of the organizations represented, the value of sharing experiences, and the good ideas generated. They also remarked on the usefulness of having a facilitator to help focus the discussions but saw the time constraints placed on the Work Groups as barriers to being able to review the handouts adequately and get enough work done. There was also concern expressed about the lack of a clear focus.

Partnership Participation

Participants were asked if they will continue to participate in the Partnership. Eighty-three percent (83%) of respondents strongly agreed/agreed that they will continue to participate in the partnership, (59% strongly agreed, 24% agreed and 18% were unsure). Fifty-three percent (53%) strongly agreed that the work of the partnership will enhance their own work; 24% agreed and 24% were unsure.

Meeting New Partners

An open-ended question asked if the participants worked with or met new partners at the meeting. Nine respondents provided answers and all answered yes. Some explained that they did meet new partners but also had the opportunity to talk with some they already knew. One respondent reported that he/she was able to provide “a number of free resources” and another stated that he/she “became knowledgeable of other partners doing similar work within the community.”

Venue

Respondents reported that the meeting logistics (meeting room and food) were favorable – 78% said the meeting room was excellent or very good, 19% said it was good, and 3% rated it fair. The food was rated from good to excellent by 98% of respondents.

Recommendations

Based on the evaluation results, it will be important for the Partnership to carefully consider the process for the final vote on the Partnership name, vision, mission, and goals - one that will be as inclusive as possible. At the meeting, there may have been a need to more clearly explain how the proposed Partnership name, vision, mission and goals were generated and how the Partnership intended to incorporate the comments solicited at the Partnership meeting. The voting process for finalizing the Partnership name, vision, mission and goals can also incorporate efforts to provide any needed clarification and background information.

Responses pertaining to the Work Group questions, as well as the comments received, revealed that there was variability among the helpfulness of the Work Group facilitation and the handouts, including limited time for the Work Group sessions and not providing enough time for the handouts to be reviewed and used as intended. As the work progresses, the evaluation results reveal there is a need to clearly explain to Partnership members the purpose of the

Partnership and, in particular, the Work Groups. Also, it will be important to make all upcoming Work Group meetings and meetings of the larger Partnership focused and productive.

Moving forward, the Partnership can capitalize on the fact that the overwhelming majority of the respondents stated that they would stay involved in the Partnership and that they envision their Partnership work enhancing their own work.

Appendix A: Obesity Action Planning Work Group Members

Linda Ashburn, University of Maryland Extension Program, Expanded Food and Nutrition Education Program

Clark Beil, Montgomery County Food Council & Montgomery County Department of Health and Human Services

Marla Caplon, Division of Food and Nutrition Services, Montgomery County Public Schools

Mary Dolan, Functional Planning and Policy Division, Montgomery County Department of Planning

Lisa Euliss, WIC Program, Community Clinic, Inc.

Wendy Friar, Community Health, Holy Cross Health

Carol Garvey, Collaboration Council for Children, Youth, and Families

Linda Goldsholl, African American Health Program, Obesity Prevention Strategy Group & Montgomery County Department of Health and Human Services

Cara D. Grant, Health and Physical Education, Office of Curriculum and Instructional Programs, Montgomery County Public Schools

Colleen Ryan Smith, Planning and Epidemiology, Public Health Services, Montgomery County Department of Health and Human Services

Jon Smink, Montgomery County Department of Recreation

Shari Targum, Montgomery County Commission on Health

Jacquelyn Williams, African American Health Program

Appendix B: Organizations in Attendance

Adventist HealthCare	Montgomery County Child Care Resource Center
Alliance for a Healthier Generation	Montgomery County Council
Community Health and Empowerment through Education and Research (CHEER)	Montgomery County Commission on Child Care
Community Clinic, Inc. WIC	Montgomery County Commission on Children and Youth
Community Clinic, Inc. Medical Centers	Montgomery County Department of Health and Human Services
Crossroads Community Food Network	Montgomery County Early Childhood Services
Evergreen Health Co-Op	Montgomery County Public Schools
Families Foremost	Montgomery County Road Runners Club
Family Services, Inc.	Montgomery Housing Partnership
Healthcare Initiative Foundation	Parent Encouragement Program
IMPACT Silver Spring	Primary Care Coalition
Institute for Public Health Innovation	Priority Partners
Kaiser Community Foundation	Reginald S. Lourie Center for Infants and Young Children
Kaiser Permanente	Suburban Hospital
Linkages to Learning at the Rolling Terrance Elementary School	Takoma Park City Council
Linkages to Learning at the New Hampshire Estates Elementary School	TESS Community Services Center
Manna Food Center	University of Maryland Extension
Maryland Assembly on School-Based Health Care	Voit, Inc.
MedStar Montgomery Medical Center	YMCA
	Young Chefs, Inc.

Appendix C – Action Plan Worksheet

Name of Work Group _____

Program Action	Key Steps to get There <i>(List each step needed to get the action done)</i>	Person(s) who will be responsible for each step	Timeline	Resources <i>(List resources you have and what you need to get the action done.)</i>	<i>How will you know that the Program is successful?</i>
	1.				
	2.				
	3.				
	4.				

Appendix D

FACT SHEET Nutrition and Physical Activity in Childcare Settings

What we know

There are several types of child-care settings, including child-care centers, early childhood education programs such as Head Start and family child-care homes.

Early childcare and education for limited-income children is funded federally and administered by the states.

Childcare centers are regulated by state policies. Family child-care homes are also licensed and regulated by the state in conjunction with the Montgomery County Department of Health and Human Services. No data was found on the number of children being cared for by unlicensed childcare providers.

Strategies that work

Establishing consistent policies and standards across childcare settings can be an effective way to implement practices known to prevent obesity. Examples include:

- Head Start has been reviewed extensively and its meals are provided by the USDA's Child and Adult Care Food Program (CACF). This program can serve as a model for nutrition requirements of food served in childcare settings.
- The national guide "Caring for our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child-care Programs" sets standards related to physical activity.

Studies show that improvements can be made in healthy eating behaviors, such as improving mealtime behaviors of caregivers, teaching children internal cues for hunger and satiation, and providing nutrition education to children. Ongoing staff training has been recommended in these areas.

Children at centers that provide more opportunities for physical activity generally are more physically active than those that provide fewer opportunities. Children at centers that provide more opportunities for outdoor activities and use of portable (compared to fixed) equipment are more physically active.

Communication between childcare providers and parents has been linked to obesity prevention as a best practice.

Studies show that the weight status of children in childcare settings was influenced by multiple component interventions that addressed nutrition and physical activity and sedentary behaviors. Examples of these individual components include:

- Changing food services practices
- Classroom-based nutrition education
- More opportunities to increase physical activity in classroom curricula
- Engaging parents through information and activities

Appendix D

Strategies that have not been proven effective or need more research

Self-assessment tools of childcare centers helped to improve nutrition, nutrition education to parents but had less impact on opportunities for physical activity.

More tools are needed to observe and assess nutrition and physical activity environments in childcare settings.

Many interventions specifically linked to obesity have been documented for childcare centers and preschools but no published studies were found that document obesity-related interventions in family child-care homes.

References/Sources

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Larson N, Ward DS, Neelon SB, Story M. What role can child-care settings play in obesity prevention? A review of the evidence and call for research efforts. *J Am Diet Assoc*. 2011 Sep; 111(9): 1343-62.

Position of the American Dietetics Association: Benchmarks for nutrition programs in childcare settings. *J. Am. Diet. Assoc*. 2005; 105: 979-986.

Montgomery County Resources

Contributors:

Info Montgomery, Montgomery County Collaboration Council, Susan Augusty, Coordinator
Community Asset Map, CHEER, Bruce Baker, Director
University of Maryland Extension, Camila Koufios, Expanded Food and Nutrition Program

May 29, 2014

Recreation Facilities

Name	Facilities	Address	Phone
Takoma Park Community Center	Indoor facility with a multimedia lab, dance room, game room, senior room, teen lounge and a LEED-CI Silver Certified auditorium.	7500 Maple Ave., Takoma Park MD 20912	301-891-7290
Takoma Park Recreation Center	Indoor Facility with two small meeting rooms, a gymnasium and a weight room	7315 New Hampshire Ave., Takoma Park, MD 20912	
Takoma Aquatic Center	Aquatics complex w/ 50-meter by 25 yard competition pool and leisure pool.	300 Van Buren Street, NW, Washington DC 20012	(202) 576-9284
Emery Recreation Center	Indoor/outdoor facility with basketball court, a playground, a fitness room and gymnasium, several classrooms and multipurpose rooms, and a tennis court in future	5801 Georgia Avenue, NW, Washington, DC 20011	(202) 576-3211
Hamilton Recreation Center	Outdoor facility with new playground for older and younger children	1340 Hamilton Street, NW, Washington, DC 20011	(202) 576-6855
Lamond Recreation Center	Indoor/Outdoor facility with basketball court, playground and baseball field	20 Tuckerman Street, NE, Washington, DC 20011	(202) 576-9541
Riggs LaSalle Recreation Center	Indoor/Out door recreation center with water park	501 Riggs Rd NE, Washington, DC 20011	(202) 576-5224
Takoma Community Center	Outdoor field	300 Van Buren Street, NW, Washington, DC 20012	(202) 576-9284
Glenwood Recreation Center	Community pool open memorial day to labor day	10012 Gardiner Ave., Silver Spring, MD 20902	301-681-7599
Long Branch Senior Center	Located within the Community Recreation Center for adults age 55 and over; offers a hot lunch Monday-Friday 10am -2pm	8700 Piney Branch Rd, Silver Spring, MD 20912	240-777-6975

Name	Facilities	Address	Phone
Rollingcrest Community Center & Splash Pool	Indoor facility with a gymnasium, offices, a craft room, meeting room, pre-school room, game room, fitness room, warming kitchen, and a cardiovascular fitness wing connecting to the indoor splash pool.	6120 Sargent Rd, Hyattsville, MD 20782	301-853-9115
Long Branch Community Recreation Center	Indoor/Outdoor facility	8700 Piney Branch Rd, Silver Spring, MD 20912	(240) 777-6975
Langley Park Community Center	Community Center, Computer Lab, Gymnasium, Senior Activities	1500 Merrimac Drive, Hyattsville, MD 20783	(301) 445-4508
Adelphi Manor Park Building	Archery Range (6), Cricket (1), Fitness Station (1), Long Distance Trail (1), Picnic Area (1), Playground (1), Recreation Center (1), Softball Diamond (1)	8001 West Park Drive, Adelphi, MD 20783	
Adelphi Mill Historic Site	Historic Site (1), Long Distance Trail (1), Picnic Area (1), Playground (1)		
University Hills Park	Lake/pond, Recreational, Picnic Area, Picnic Shelter, Playfield, Trails	3400 Stanford Street At Wells Boulevard, Adelphi, MD 20783	
New Hampshire Estates Neighborhood Park	Park features two playgrounds, a football/soccer field, and a picnic area	8825 Piney Branch Rd., Takoma Park, MD 20903	
Hillandale Park	24.2-acre park with playground, softball field, lighted baseball field, and two lighted tennis courts	10615 New Hampshire Ave., Hillandale, MD 20903	
Hillwood Manor Park	2 acre park near the creek with a playground and a basketball court	1301 Elson St., Takoma Park, MD 20912	
Piney Branch Pool (Adventist Community Services)	Community pool hours Monday - Friday: 6:30am - 8:30am, Monday, Wednesday, and Thursday: 4pm - 9pm, Tuesday: 4pm - 8pm, Sunday: 8am - 5pm	7510 Maple Avenue, Takoma Park, MD 20912	(301) 891-8017

Adult & Parenting Education

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Parenting Encouragement Program - PEP	The Parent Encouragement Program 10100 Connecticut Ave Kensington, MD 20895	Phone: (301)929-8824 Email: N/A Website: www.pepparent.org/	English Spanish	All are welcomed	Educating parents, giving them the knowledge and skills to raise respectful & responsible children.	All county	Varies with classes	Varies with classes
Healthy Families Montgomery - FSI	Family Services, Inc. 610 East Diamond Ave. Suite 100 Gaithersburg, MD 20877	Phone: (301)840-3232 Email: info@fs-inc.org Website: www.familyservicesagency.org/HFM.html	English Spanish	First time parents living in Montgomery County	Home-based Parenting Education.	All county	Varies with family	No fee is charged
Baby Steps - FSI	Family Services, Inc. 610 East Diamond Ave. Suite 100 Gaithersburg, MD 20877	Phone: (301)840-3232 Email: info@fs-inc.org Website: www.familyservicesagency.org/babysteps.html	English Spanish	New mother living in Montgomery County	Health screens for newborns and mothers at hospital linking to community health services.	All county	Varies with hospital clinics	No fee is charged
Start More Infants Living Equally Program - SMILE (AAHP)	14015 New Hampshire Avenue Silver Spring, MD 20904	Phone: (240)777-1833 Email: Nia.Williams@montgomerycountymd.gov Website: www.onehealthylife.org/our-programs/infantmortality.html	English Amharic French	Income- eligible, African American mothers living in Montgomery County	Home-based support through nurse case managers visitation to support the needs of parenting mother.	All county	Varies with family	No fee is charged
The MCPS Parent Academy	Office of Community Engagement and Partnership 850 Hungerford Drive, Room 50 Rockville, MD 20850	Phone: (301)517-5940 Email: N/A Website: www.mcpsparentacademy.org	Varies with workshop, interpreter can be provided	Open to parents of students attending Montgomery County Public Schools	Gives parents tips and tools to help their children succeed in school.	All county	Varies with workshop	No fee is charged
Ed Bohrer Parent Resource Center - FSI	Family Services, Inc. 610 East Diamond Ave. Suite 100 Gaithersburg, MD 20877 Classes at Ed Bohrer Community Center	Phone: (301)840-3272 Email: info@fs-inc.org Website: www.familyservicesagency.org/bohrer.html	English Spanish	Opened to general public	Helps reach goals of education, and other needs.	All county	Varies with classes	Varies with classes
Vocational Services Program - Interfaith Works	8210 Dixon Ave Silver Spring, MD 20910	Phone: (301)585-4471 Email: N/A Website: www.iworksmc.org/vocational-services/	English	Referral needed	Prepares clients through job readiness classes for employment retention success.	All county	Varies with group	No fee is charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Neighborhood Opportunity Network - IMPACT Silver Spring (Long Branch)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301)585-4471 Email: carlos@impactsilverspring.org Website: www.impactsilverspring.org	Varies with groups	All are welcomed	Opportunity Circles includes cooking, youth jobs, childcare providers, reading circle, and sewing circle.	Long Branch Community	Varies with groups	No fee is charged
Neighborhood Opportunity Network - IMPACT Silver Spring (Wheaton)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301)585-4471 Email: jihan@impactsilverspring.org Website: www.impactsilverspring.org	Varies with groups	All are welcomed	Opportunity Circles includes English language learning, hobbies and talents, and pedestrian safety.	Wheaton Community	Varies with groups	No fee is charged
Neighborhood Opportunity Network - IMPACT Silver Spring (East County)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301)585-4471 Email: christopher@impactsilverspring.org Website: www.impactsilverspring.org	Varies with groups	All are welcomed	Opportunity Circles includes young men’s group and parents circle.	East County Community	Varies with groups	No fee is charged
National Alliance on Mental Illness (NAMI) – Montgomery County	NAMI Montgomery County 11718 Parklawn Drive Rockville, MD 20852	Phone: (301)949-5852 Email: comments@namimc.org Website: www.namimc.org	Varies with groups	Families with a member diagnosed with a mental illness	Basic education courses, support groups, family groups.	All county	Varies with groups	No fee is charged
Silver Spring Jude Center - MCPS	Location varies by activity	Phone: (301)431-7696 Email: N/A Website: www.montgomeryschoolsmd.org	English Spanish	Rolling Terrace Elementary School attendance area, limited income, registration for activities is required	Family involvement and activities, service coordination and family support, family literacy programs, adult education and parent trainings, and professional development for community child care providers.	Silver Spring	Varies by activities	Fees may be charged
Gaithersburg Jude Center - MCPS	Location varies by activity	Phone: (301)548-8287 Email: N/A Website: www.montgomeryschoolsmd.org	English	Rosemont, Summit Hall, and Washington Grove Elementary School attendance area, limited income, registration for activities is required	Family involvement and activities, service coordination and family support, early identification and intervention, adult education and parent trainings, and professional development for community child care providers.	Silver Spring	Varies by activities	Fees may be charged

Child Care & Schooling

Organization	Office Location	Contact Information	Languages	Eligibility	Services	Area Served	Hours of Service	Cost
Prekindergarten & Head Start - MCPS	Rocking Horse Road Center 4910 Macon Road, Room 141 Rockville MD 20852	Phone: (301)230-0676 Email: N/A Website: www.montgomeryschoolsmd.org/	English	Low-income, living in Rockville or Takoma Park	Prepare young kids with the foundational knowledge and skills necessary for school success.	Rockville Takoma Park	Varies with age	No fee is charged
Early Head Start - FSI	Family Services, Inc. 610 East Diamond Ave. Suite 100 Gaithersburg, MD 20877	Phone: (301)840-3272 Email: N/A Website: www.familyservicesagency.org/HS.html	English Spanish	Low income, live in Upper Montgomery County, and one child younger than 26 months	Home & In-house child development.	Upper County	Varies with family	No fee is charged
Early Head Start - CentroNia	CentroNia 1345 University Blvd East Takoma Park, MD 20912	Phone: (301) 543-8040 Email: N/A Website: www.centronia.org	English Spanish	Low income, child under 2 or pregnant during enrollment	Home-based weekly visits or child care.	Rockville Silver Spring Takoma Park Hyattsville College Park Montgomery Village	Home Based Visits: Varies with family Child Care: M-F: 8:30 am - 3:00 pm	No fee is charged
Silver Spring Judy Center - MCPS	Location vary by activity	Phone: (301)431-7696 Email: N/A Website: www.montgomeryschoolsmd.org	English Spanish	Rolling Terrace Elementary School attendance area, limited income, registration for activities is required	Our services include Literacy Play and Learn sessions for children ages birth through four years old, referrals to full-day, full-year, high quality early childhood programs, literacy programs, and after	Silver Spring	Varies by activities	No fee is charged
Gaithersburg Judy Center - MCPS	Location vary by activity	Phone: (301)548-8287 Email: N/A Website: www.montgomeryschoolsmd.org	English	Rosemont, Summit Hall, and Washington Grove Elementary School attendance area, limited income, registration for activities is required	Our services include Literacy Play and Learn sessions for children ages birth through four years old, referrals to full-day, high quality early childhood programs.	Gaithersburg	Varies by activities	No fee is charged

Clothing & Home Goods

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Interfaith Clothing Center - Interfaith Works	751 Twinbrook Parkway Rockville, MD 20851	Phone: (301)424-3796 Email: N/A Website: www.iworksmc.org/interfaith-clothing-center/	English	Qualified income person, referral needed	Provides qualified, low-income families with clothing and home goods.	All county	T - F: 9:30 am - 12 pm & 1 pm - 3:30 pm Sat: 9:30 am - 1:30 pm	No fee is charged, goods are not free but low priced
NAMI - Thrift Store	11718 Parklawn Drive Rockville, Maryland 20852	Phone: (301)949 -5731 Email: www.namimc.org Website: thriftshop@namimc.org	English	Opened to general public	Clothing and home goods at low prices.	All county	M-Sat: 11:00 am -6:00 pm	Goods are not free but low priced
Catholic Charities	Montgomery County Family Center 12247 Georgia Avenue Silver Spring, MD 20902	Phone: (301) 942-1790 Email: tiffany.tan@catholiccharitiesdc.org Website: www.catholiccharitiesdc.org/mcfc	English Spanish	Qualified income person	Clothing, shoes and diapers.	All county		No fee is charged

Emergency Support

Organization	Office Location	Contact Information	Languages	Eligibility	Services	Area Served	Hours of Service	Cost
Congregation & Community Emergency Support - Interfaith Works	114 W. Montgomery Ave Rockville, MD 20850	Phone: (301)301-1108 Email: N/A Website: www.iworksmc.org/congregation-communityemergency-support/m	English	Low income, referral needed	Provides safety net to those in financial crisis, prevents eviction and utility cutoffs.	All county	Monday - Friday: 9 am - 3 pm	No fee is charged, loans are interest free
Emergency Eviction Prevention - DHHS	Various locations throughout the county	Phone: (240)777-3075 Email: N/A Website: www.montgomerycountymd.gov	English	Low Income families and adults	Emergency financial assistance and/or shelter to families and adults who are homeless, at high risk of losing housing.	All county	Monday - Friday: 9 am - 3 pm	No fee is charged
Utility Assistance - DHHS	MidCounty DHHS Building 1301 Piccard Drive Rockville, MD 20850	Phone: (240)777-4450 Email: N/A Website: www.montgomerycountymd.gov	English	Low Income families and adults	Aids in payments for heating costs and electric bill.	All county	Monday - Friday: 9 am - 3 pm	No fee is charged
Rental Assistance Program & Handicapped Rental Assistance Program - DHHS	MidCounty DHHS Building 1301 Piccard Drive Rockville, MD 20850	Phone: (240)777-4400 Email: N/A Website: www.montgomerycountymd.gov	English	Low Income families and adults	Low income families pay their rent, and the Handicapped Rental Assistance aids low income disabled individuals with support towards rental expenses in licensed care facilities.	All county	Monday - Friday: 9 am - 3 pm	No fee is charged
TESS Center	8513 Piney Branch Rd., Silver Spring, MD 20901	301-565-7675	English Spanish		Assistance to complete applications for food, housing, utilities, cash and medical assistance.			
Adventist Community Services	501 Sligo Avenue, Silver Spring, MD 20910	301-585-6556			Emergency resources, rental assistance and referrals			
Ministries United Silver Spring Takoma Park	8818 Georgia Avenue, Ste. 216, Silver Spring, MD 20910	301-459-4699		Takoma Park Residents	Financial assistance for evictions, utilities, prescriptions and referrals	Takoma Park		
Mid-county United Ministries	2424 Reedie Drive, Silver Spring, MD 20902	301-929-8675			Financial assistance for evictions, water and utilities, prescriptions and referrals			

Food & Nutrition

Organization	Office Location	Contact Information	Languages	Eligibility	Services	Area Served	Hours of Service	Cost
Manna Food Center - Main Warehouse	Manna Food Center 9311 Gaither Road Gaithersburg, MD 20877	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Meet with agents for referrals. Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Referrals- M – F 9 am – 4 pm Food distribution- Mon- Fri: 12 pm-3:00 pm Second Saturday of Every Month: 11:30 am - 1:30 pm	No fee is charged
Manna Food Center - St. Camillus Church	1600 St. Camillus Drive Silver Spring, MD 20903	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Mondays: 2pm - 4 pm	No fee is charged
Manna Food Center - Catholic Charities Community Center	12247 Georgia Avenue Wheaton, MD 20902	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Tuesdays: 4pm -7pm	No fee is charged
Manna Food Center - Salvation Army Center	Salvation Army Center 20021 Aircraft Drive Germantown, MD 20874	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Thursdays: 2pm - 4pm	No fee is charged
Manna Food Center - Long Branch Community Center	Long Branch Community Center 8700 Piney Branch Road Silver Spring, MD 20901	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Wednesdays: 4pm - 7 pm	No fee is charged
Manna Food Center - Family Service Agency	Family Service Agency 630 East Diamond Avenue Gaithersburg, MD 208773	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Thursdays: 5pm - 7pm	No fee is charged
Manna Food Center - Victory Tower	7051 Carroll Ave., Takoma Park, MD 20912	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county		No fee is charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Manna Food Center - Victory Forest	10000 Brunswick Ave., Silver Spring, MD 20910	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county		No fee is charged
Manna Food Center - Tanglewood Apartments	8902 Manchester Rd., Silver Spring, MD 20901	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county		No fee is charged
Manna Food Center - Franklin Apts.	7620 Maple Avenue Takoma Park, MD 20912	301-270-5525			Food Distribution			
Manna Food Center - East County Regional Services Center	East County Regional Services Center 3300 Briggs Chaney Road Silver Spring, MD 20904	Phone: (301) 424-1130 Email: N/A Website: www.mannafood.org/	English Spanish	Qualifying families living in Montgomery County, referral needed	Assisting the hungry in Montgomery County by distributing food, at no charge, to qualified individuals.	All county	Fridays: 2 pm - 4 pm	No fee is charged
Expanded Food and Nutrition Education Program (EFNEP) -University of Maryland Extension	Maryland Cooperative Extension 18410 Muncaster Road Derwood, MD 20855	Phone: (301) 590-2841 Email: N/A Website: www.extension.umd.edu/montgomery-county	English Spanish	Recruitment is done through parters such as schools, community programs, and clinics.	Acquiring skills necessary to maintain nutritionally sound diets.	All county	Varies with programs	No fee is charged

Organization	Office Location	Contact Information	Languges	Eligibility	Services	Area Served	Hours of Service	Cost
Food Supplement Nutrition Education (FSNE) SNAPed University of Maryland Extension	University of Maryland Extension 18410 Muncaster Road Derwood, MD 20855	Phone: (301) 590-9638 Email: N/A Website: www.extension.umd.edu/ montgomery-county	English	Recruitment is done through partners such as schools and community services.	Nutrition education aiding in making healthy food choices, develop food preparation skills, handle food safely, improve shopping skills, and increase their physical activity.	All county	Varies with programs	No fee is charged
Women, Infant and Children Program- WIC	11006 L-10 Veirs Mill Road Wheaton, MD 20902 12850 Middlebrook Road Suite 108 Germantown, MD 20874 200 Girard Street Suite 212-B Gaithersburg, MD 20877 7676 New Hampshire Avenue, Suite 220 Takoma Park, MD 20912	Wheaton Office Phone: (301)933-6680 Germantown Office Phone: (301)515-7576 Gaithersburg Office Phone: (301)840-8339 Takoma Park Office Phone: (301)439-7373	English Spanish	Pregnant woman, new mom, breastfeeding mom, child under the age of five, you meet the income guidelines listed, you have a nutritional need.	Healthy supplemental foods and nutrition counseling for pregnant women, new mothers, infants and children under age five.	All county	Wheaton Office Hours: M-F: 8:00 am -4:30 pm Germantown Office Hours: M-F: 8:00 am -4:30 pm Gaithersburg Office Hours: M-F: 8:30 am-5:00 pm 1st & 3rd Sat: 8:00 am-4:30pm Takoma Park Office Phone: M- Sat: 8:00 am -4:30 pm	No fee is charged
SNAP (Food Stamps)	MidCounty DHHS 1301 Piccard Drive, Rockville, MD 20850 DHHS Silver Spring Center 8818 Georgia Avenue, Silver Spring, MD 20910 UpCounty Regional Services Center 12900 Middlebrook Road, Germantown, MD 20874	Phone: (240)777-3420 Email: N/A Website: www.montgomerycounty.md.gov	English Interpreter can be provided	Low income, proof of citizenship or immigration status, sign application and interview is required	Provides monthly financial benefits to eligible households to supplement their food purchase budget.	All county	MidCounty DHHS: Mon - Fri 8:30 am - 5:00 pm DHHS Silver Spring Center: Mon - Fri 8:30 am - 5:00 pm UpCounty Regional Services Center: Mon - Fri 7:45 am - 5:00 pm	No fee is charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
SNAP (Food Stamps) - continued	<p>Catholic Charities 12247 Georgia Avenue, Silver Spring, MD 20906</p> <p>Takoma East Silver Spring (TESS) Center 8513 Piney Branch Road, Silver Spring, MD 20901</p> <p>Family Services, Inc. 610 E Diamond Ave, Gaithersburg, MD 20877</p>	<p>Phone: (240)777-3420 Email: N/A Website: www.montgomerycounty.md.gov</p>	English Interpreter can be provided	Low income, proof of citizenship or immigration status, sign application and interview is required	Provides monthly financial benefits to eligible households to supplement their food purchase budget.	All county	<p>Catholic Charities: Wed & Fri 9:00 am - 3:00 pm</p> <p>Takoma East Silver Spring (TESS) Center: Mon - Fri 9:00 am - 11:00 am Appointments Only: 1:00 pm - 3:00 pm</p> <p>Family Services, Inc: Mon- Fri 8:30 am - 5:00 pm</p>	No fee is charged
Crossroads Community Food Network (Farmers Market)	Anne Street -Takoma Park, MD 20912 (between University Blvd. & Hammond Ave.)	<p>Phone: N/A Email: cbalch@crossroadscommunityfoodnetwork.org Website: www.crossroadscommunityfoodnetwork.org/</p>	English	All are welcomed WIC and SNAP Benefits Accepted	Locally, healthy, and affordable foods.	Takoma Park & Langley Park Crossroads	June 4-November 19, 2014 Every Wednesday, rain or shine! 11:00 am - 3:00 pm	Varies with food
Takoma Park Food Pantry	Grace United Methodist Church, 7001 New Hampshire Avenue, Takoma Park, MD 20912	240-450-2092			Emergency Food Pantry			
Turner Memorial AME	7201 16th Pl, Hyattsville, MD 20783	301-408-0750			Food Sharing Program			
Mt. Jezreel Baptist	420 University Blvd., Silver Spring, MD 20901	<p>Cecilia Mason 301-552-2821 Burnetta Robinson 301-899-0637</p>			Food Sharing Program			
Ritchie Citizens Association	149 Ritchie Avenue, Silver Spring, MD 20910	<p>Terri Seamans 301-565-0190</p>			Food Sharing Program			
Plymouth Congregational United Church of Christ	5301 North Capitol St., NE, Washington DC 20011	202-723-5330			Emergency Food Pantry			
Catholic Charities Volunteer Network	6930 Carroll St, NW Takoma Park, MD 20912	301-270-0900			Food Distribution			

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
First Baptist Church of Silver Spring	Temporary Location at Montgomery Hills Baptist Church, 9727 Georgia Ave., Silver Spring, MD 20910	301-585-5454	English Spanish		Food Pantry		Saturdays 10:00 am - 12:00 Noon	
St. Luke Evangelical Lutheran Church	9100 Colesville Rd., Silver Spring, MD 20910	301-588-4363 www.saintluke.us		Referral needed	Food Distribution		Monday - Friday 9:30 am - 1:30 pm, Call first	
Arleeta's Pantry - Woodside United Methodist Church	8900 Georgia Ave., Silver Spring, MD 20910	301-587-1215		Individuals and Families	Provides non-perishable food for 2 days			
Adventist Community Services of Greater Washington	501 Sligo Ave., Silver Spring, MD	301-585-6556 info@acsgw.org www.acsgw.org	English Spanish	Local families and individuals in need	Provides food, clothing and emergency financial assistance		Monday - Thursday 10:00 am - 4:00 pm, Call for appointment	
Spanish Catholic Center	8545 Piney Branch Rd., Silver Spring, MD 20901	301-587-8136	English Spanish	Montgomery County families and individuals	Food Distribution	All County	Monday - Friday 10:00 am - 4:00 pm	
Mid-county United Ministries (MUM)	2424 Reedie Drive, Wheaton, MD 20902	301-929-8675	English Spanish	Zip codes: 20853, 20895, 20896, 20902, 20906	Food Distribution	Zip codes: 20853, 20895, 20896, 20902, 20906	Monday - Wednesday 9:00 am - 4:30 pm, Thursday 9:00 am - 3:00 pm	
The Lutheran Church of St. Andrew	12247 Georgia Avenue Wheaton, MD 20902	301-942-6531	English Portuguese German	Referral preferred	Food Distribution limited to 1 day supply once a month for individual or family		Wednesdays 10:00 am - 12: Noon	
Echoes from the Streets - Silver Spring Church of God	106 Linden Lane, Silver Spring, MD 20910	301-570-5657			Food Distribution		Call between 8:00 am - 9:30 am for instructions to pick up food in the afternoon	
HELP	Silver Spring	301-585-4357		Live in geographic area served	Food Delivery of 3-day supply once a month	Takoma Park, Silver Spring, Woodmoor, Southern Colesville		
	Wheaton	301-585-4357		Live in geographic area served	Food Delivery of 3-day supply once a month	Aspen Hill, Twinbrook, Wheaton		

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
	Rockville FISH/HELP	301-564-0800		Live in geographic area served	Food Delivery of 3-day supply once a month	Rockville Twinbrook South Derwood		
	Olney	301-774-4334	English Spanish	Live in geographic area served	Food Delivery of 2-day supply once a month	Ashton Brinklow Brookeville North Derwood Olney Sandy Spring		
	Bethesda	301-294-4884		Live in geographic area served	Food Delivery of 3-day supply once a month	Bethesda Cabin John Chevy Chase Garrett Park Glen Echo Kensington Potomac North Bethesda		
	Germantown	301-482-1320		Live in geographic area served	Food Delivery of 3-day supply once a month	German- town		
	Damascus	301-253-4100		Live in geographic area served	Food Delivery of 3-5 day supply once a month	Clarksburg Damascus North Gaithers- burg Hyattstown North German- town		
	WUMCO	301-972-8481		Live in geographic area served	Food Delivery of 3-day supply once a month	Barnesville Boys Dickerson Poolesville Beallsville		

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Shepherd's Table	8210 Dixon Avenue, Silver Spring, MD 20910	301-585-6463			Family-style meals		Brunch Served Saturday and Sunday 10:30 am - 11:15 am Dinner Served Daily 6:00 pm - 7:30 pm	
Capital Area Food Bank - Clifton Park Baptist Church	8818 Piney Branch Rd., Silver Spring, MD 20903	301-434-2456 www.cliftonparkbaptistch urch.org						
Capital Area Food Bank - Marvin Memorial United Methodist Church	33 University Blvd. E., Silver Spring, MD 20901	240-583-0862 www.marvinchurch.org						

Health Care

Organization	Office Location	Contact Information	Languges	Eligibility	Services	Area Served	Hours of Service	Cost
Affordable Healthcare Program - Interfaith Works	114 W. Montgomery Avenue Rockville, MD 20850	Phone: (301)708-1620 Email: N/A Website: www.iworksmc.org	English Spanish Mandarin Vietnamese French Amharic	Person who does not have health insurance	Provides accesible healthcare.	All county	Tuesdays & Thursdays: 6pm - 8pm	No fee is charged
Holy Cross Health Center - Aspen Hill	13975 Connecticut Avenue Suite 250 Aspen Hill, MD 20906	Phone: (301)557-1940 Email: N/A Website: www.holycrosshealth.org/hchc	English Spanish French Interpreter can be provided for other languages	Person be 18 years or older, have income under 250 percent of the federal poverty level, and live in Montgomery County.	Providing affordably priced health care services to adults who face financial barriers to accessing care.	All county	Monday - Friday: 8 am - 4:30 pm Evening & Saturday appointments are available.	Fees are discussed with financial officer
Holy Cross Health Center - Silver Spring	7987 Georgia Avenue Silver Spring, MD 20910	Phone: (301)557-1940 Email: N/A Website: www.holycrosshealth.org/hchc	English Spanish French Interpreter can be provided for other languages	Person be 18 years or older, have income under 250 percent of the federal poverty level, and live in Montgomery County.	Providing affordably priced health care services to adults who face financial barriers to accessing care.	All county	Monday - Friday: 8 am - 4:30 pm	Fees are discussed with financial officer
Holy Cross Health Center - Gaithersburg	702 Russell Avenue Gaithersburg, MD 20877	Phone: (301)557-1940 Email: N/A Website: www.holycrosshealth.org/hchc	English Spanish French Interpreter can be provided for other languages	Person be 18 years or older, have income under 250 percent of the federal poverty level, and live in Montgomery County.	Providing affordably priced health care services to adults who face financial barriers to accessing care.	All county	Monday - Friday: 8 am - 4:30 pm	Fees are discussed with financial officer
Care For Your Health - Silver Spring	Episcopal Church of the Transfiguration 13925 New Hampshire Avenue Silver Spring, MD 20904	Phone: (240)844-2552 Email: information@care4yourhealth.org Website: www.care4yourhealth.org/index.html	English Spanish Portuguese Interpreter can be provided for other languages	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	Silver Spring	Varies with appointments	Fees can be charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Community Clinic, Inc. - Silver Spring	8630 Fenton Street, Suite 1200 Silver Spring, MD	Phone: (301)585-1250 Email: N/A Website: www.cciweb.org/index.html	English Spanish Interpreter can be provided for other laguages	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	Silver Spring	Monday - Friday 8 am - 4:30 pm Every other Saturday	Fees can be charged
Community Clinic, Inc. - Takoma Park	7676 New Hampshire Avenue, Suite 220 Takoma Park, MD 20912	Phone: (301)431-2972 Email: N/A Website: www.cciweb.org/index.html	English Spanish Interpreter can be provided for other laguages	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	Takoma Park	Mon: 7:30 am - 5:00 pm Tues: 7:30 am - 6:30 pm Wed: 7:30 am - 5:00 pm Thur: 7:30 am - 6:30 pm Fri: 7:30 am - 5:00 pm Sat: 7:45 am - 4:15 pm	Fees can be charged
Community Clinic, Inc. - Gaithersburg	200 Girard Street Gaithersburg, MD 20877	Phone: (301)216-0880 Email: N/A Website: www.cciweb.org/index.html	English Spanish Interpreter can be provided for other laguages	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	Gaithersburg	Mon & Wed: 8:00 am - 4:30 pm Tue & Thur: 8:00 am - 7:00 pm Fri: 8:00 am - 5:30 pm Sat: 8:00 am -4:30 pm	Fees can be charged
CCACC Pan Asian Volunteer Health Clinic - Gaithersburg	7 Metropolitan Court, Suite 1 Gaithersburg, MD 20878	Phone: (240)599-6858 Email: N/A Website: www.ccaccdc.org/index_e.asp	English Varied laguages spoken in Asia	Person be Asian American, 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing primary care, diagnosis and treatment for acute and chronic illnesses, refer patients to connected facilities for diagnostic imaging, and referrals to specialists and management plan for patient's follow-up care.	All county	Varies with appointments	Fees can be charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Community Ministries of Rockville Mansfield Kaseman Health Clinic - Rockville	8 West Middle Lane Rockville, MD 20850	Phone: (301)917-6800 Email: N/A Website: www.cmrocks.org/	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Mondays - Fridays: 9:00 am - 5:00 pm	Fees can be charged
Mary's Center for Maternal and Child Care	8709 Flower Avenue Silver Spring, MD 20901	Phone: (240)485-3160 Email: N/A Website: www.maryscenter.org/	English Spanish	Women must be expecting child and children must be 12 years old or younger, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing pregnant women regular check-ups, evaluations and screenings to monitor the baby as well as the mother. Providing children with complete care aiming to prevent illness and promoting growth and development.	All county	Mondays - Saturdays: 8:30 am - 5:00pm	Fees can be charged
Mercy Health Clinic - Gaithersburg	7 Metropolitan Court, Suite 1 Gaithersburg, MD 20878	Phone: (240) 773-0300 Email: N/A Website: www.mercyhealthclinic.org/	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Monday: 9 am – 5 pm Tuesday: 9 am – 7 pm Wednesday: 9 am – 5 pm Thursday: 9 am – 7 pm	Fees can be charged
Mobile Medical Care	8700 Piney Branch Road Silver Spring, MD 20903	301-493-2400 schedule@mobilemedicalcare.org www.mobilemedicalcare.org	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county		\$40 per visit, additional charges for xrays as needed

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Muslim Community Center Medical Clinic - Silver Spring	15200 New Hampshire Avenue Silver Spring, MD 20905	Phone: (301)384-2166 Email: N/A Website: www.mccmd.org/	English Arabic	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Sunday - Friday: 9:00 am - 5:00 pm	Fees can be charged
Proyecto Salud - Wheaton	2424 Reedie Drive Wheaton, Maryland 20902	Phone: (301)962-6173 Email: N/A Website: www.mccmd.org/services/medical-clinic	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Monday - Thursday: 8:30 am to 9:00 pm Friday: 8:30 am to 5:00 pm Saturday: 8:30 am to 12:30 pm	Fees can be charged
Proyecto Salud - Olney	18111 Prince Philip Drive, Suite 312 Olney, Maryland 20832	Phone: (301)260-1073 Email: N/A Website: www.proyectosalud.org/index.php	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Monday - Friday: 8:30 am to 5:00 pm	Fees can be charged
Spanish Catholic Center Medical Clinic - Silver Spring	12247 Georgia Avenue Silver Spring, MD 20902	Phone: (301) 434-8985 Email: N/A Website: www.catholiccharitiesdc.org/SCCmedical	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing medical check-ups, medicine, lab tests, cancer screenings and access to specialists.	All county	Mon: 8:30 am - 8 pm Tues: 8:30 am - 5 pm Wed: 8:30 am - 5 pm Thur: 8:30 am - 5 pm Fri: 8:30 am - 5 pm	Fees can be charged

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
The People's Community Wellness Center - Silver Spring	3300 Briggs Chaney Road Silver Spring, MD 20904	Phone: (301) 847-1172 Email: N/A Website: www.montgomerycountymd.gov/eastcounty/services.html	English Spanish	Person be 18 years or older, lives in Montgomery County, does not have health insurance and not eligible for any state or federal insurance programs, and income is at or below 250% of the Federal Poverty Level	Providing routine physical exams, preventive and wellness care, nutrition counseling, and lifestyle management counseling.	All county	Varies with appointments	Fees can be charged
Diabetes Wellness Circle - Community Health and Empowerment through Education and Research (CHEER)	CHEER 7724 Maple Avenue, Apt. 13 Takoma Park, MD 20912	Phone: (301)589-3633 Email: bruce@communitycheer.org Website: www.communitycheer.org/	English Spanish	Persons living with diabetes	Improve health and fitness, prevent illness, develop a sense of well being, and foster each person's potential for a long, active, and fulfilling life.	Takoma Park Silver Spring	Vary with program	No fee is charged
Fast Track Urgent Care	13428 New Hampshire Avenue Silver Spring, MD 20904	800-416-1431			Basic Health Services, Pharmacy, Xrays, Laboratory			Fees are charged
Minute Clinic	7939 New Hampshire Avenue Langley Park, MD 20718	301-434-3121			Minor illness and injury care, vaccines, physical screenings			Fees are charged
Langley Park Walk-in Medical Clinic	1040 E. University Blvd. Langley Park, MD 20783	301-445-7026			Primary care services for the insured and uninsured			Fees are charged
Advanced Walk-in Urgent Care	10801 Lockwood Drive, Ste. 140 Silver Spring, MD 20901	301-592-1780			Urgent care and primary care clinic			Fees are charged
Metro Immediate and Primary Care	8484 Georgia Avenue Silver Spring, MD 20910	301-755-6655			Urgent care			Fees are charged
Planned Parenthood	1400 Spring Street #450 Silver Spring, MD 20910	301-608-3448			Reproductive health and STI treatment for men and women			Fees are charged
TAYA	1400 Spring Street #200 Silver Spring, MD 20910	301-565-0914			Gynecological care for women and teens			Fees are charged
School-based Health and Wellness Centers	Broad Acres Elementary School, 710 Beacon Rd., Silver Spring, MD 20903	301-431-7616	English Spanish		Primary care services			

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
	Rolling Terrace Elementary School, 705 Bayfield St., Takoma Park, MD 20912	301-431-7600	English Spanish		Primary care services			
	New Hampshire Estates Elementary School, 8720 Carroll Avenue Silver Spring, MD 20903	301-431-7607	English Spanish		Primary care services			
	Northwood High School, 919 University Blvd., W, Silver Spring, MD 20901	301-649-8088	English Spanish		Primary care services			

Housing

Organization	Office Location	Contact Information	Languges	Eligibility	Services	Area Served	Hours of Service	Cost
Community Vision - Interfaith Works	Community Vision 8210 Dixon Avenue Silver Spring, MD 20910	Phone: (301)585-4471 Email: N/A Website: www.iworksmc.org	English	Homeless person in MontgomeryCounty	Outreach day program for the homeless.	All county	Mon - Fri : 9 am - 3 pm	No fee is charged
Interfaith Housing Coalition	114 West Montgomery Avenue Rockville, MD 20850	Phone: (301)762-8682 Email: mbarberis-young@iworksmc.org Website: www.iworksmc.org	English	Homeless families in Montgomery County	Provides permanent housing and supportive services to families in 26 units across the county.	All county	N/A	No fee is charged
Carroll House Men's Shelter	9625 Dewitt Drive Silver Spring, MD 20910	Phone: (301)587-7270 Email: N/A Website: www.iworksmc.org	English	Homeless men in Montgomery County	Program offers residents intensive case management, vocational programming, and a range of services.	All county	N/A	No fee is charged
Wilkins Avenue Women's Assesment Center	12250 Wilkins Avenue Rockville, MD 20852	Phone: (301)770-2413 Email: N/A Website: www.iworksmc.org	English	Homeless women in Montgomery County	Aids homeless women in recovery & stability, help with housing, medical, mental health, and social services.	All county	N/A	No fee is charged
Housing Opportunity Commission of Montgomery County (HOC)	HOC Main Office 10400 Detrick Avenue Kensington, Maryland 20895 East Deer Park -Upcounty Office 231 East Deer Park Drive Gaithersburg, Maryland 20877	HOC Main Office Phone: (240) 627-9400 East Deer Park - Upcounty Office Phone: (240)627-9744 Website: www.hocmc.org/	English	Meets income eligibility, atleast one member of family has eligible immigration status, qualifies as a "family" (may be single or family, elderly, or disabled)	Provide affordable housing and supportive services that enhance the lives of low- and moderate-income families and individuals.	All county	HOC Main office: Mon -Fri 8:30 am- 5 pm East Deer Park - Upcounty Office: Mon -Fri 8:30 am- 5 pm	No fee is charged
Montgomery Housing Partnership	12200 TechRoad Suite 250 Silver Spring, MD 20904	Phone: 301-622-2400 Email: info@mhpartners.org Website: www.mhpartners.org/	English	Check availability with property management company	Develops affordable housing, the properties are managed by property management companies. If you are interested in renting one of the apartments featured, please call the management company.	Rockville Silver Spring Takoma Park Wheaton		Rent varies with property management companies

Organization	Office Location	Contact Information	Languages	Eligibility	Services	Area Served	Hours of Service	Cost
Stepping Stones Shelter	8818 Georgia Avenue, Silver Spring, MD 20910	240-777-3075						
HomeFirst / Montgomery County Coalition for the Homless		301-217-0314			Permanent housing for chronically homeless single adults			

Physical Activities

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
Germantown Hardknocks Youth Foundation	N/A	Phone: N/A Email: lorenzo33_1@hotmail.com Website: www.leaguelineup.com/hardknocksbasketball	English	5 - 18 years old	Focusing kids attention in positive ways through basketball.	All county	Varies with classes	Varies with classes
Long Branch Athletic Association Program (LBAA)- IMPACT Silver Spring (Long Branch)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301) 298 -5117 Email: kie@impactsilverspring.org Website: www.impactsilverspring.org	English Spanish	All are welcomed	Soccer and Basketball	Long Branch Community	Varies with groups	No fee is charged
Long Branch Athletic Association Program (LBAA)- IMPACT Silver Spring (Wheaton)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301) 298 -5117 Email: damian@impactsilverspring.org Website: www.impactsilverspring.org	English Spanish	All are welcomed	Basketball	Wheaton Community	Varies with groups	No fee is charged
Long Branch Athletic Association Program (LBAA)- IMPACT Silver Spring (Briggs Chaney)	IMPACT Silver Spring 8807 Colesville Rd, Lower Level Silver Spring, MD 20910	Phone: (301) 298-5117 Email: chirstopher@impactsilverspring.org Website: www.impactsilverspring.org	English Spanish	All are welcomed	Soccer	Briggs Chaney Community	Varies with groups	No fee is charged
Montgomery County Road Runners Club	Montgomery County Road Runners Club P.O. Box 1703, Rockville, MD 20849	Phone: (301) 525-7984 Email: office@mcrrc.org Website: www.mcrrc.org/	English	All are welcomed	Variety of running groups based on age, and level of runner.	All county	Varies with groups	Registration fee
Montgomery County Recreation	4010 Randolph Road, Silver Spring, MD 20902	Phone: (240)777-6840 Email: N/A Website: www.montgomerycountymd.gov/rec/	English	All are welcomed	Variety of activities offered for people of all ages.	All county	Varies with activity	Varies with activity
YMCA	1102 Forest Glen Road Silver Spring, MD 20901	Phone: (301) 593-1160	English	All are welcomed	Variety of physical activity and child care.	All county	Vary with location and activity	Varies with activity
	9800 Hastings Drive Silver Spring, MD 20901	Phone: (301) 585-2120						
	6201 Tilden Lane Rockville, MD 20852	Phone: (301) 230-1577						
	7425 MacArthur Blvd Cabin John, MD 20818	Phone: (301) 229-1347 Website: www.ymcadc.org						
Kidsfit	Classes at HOC sites and Silver Spring Boys and Girls Clubs	Holy Cross Hospital www.holycrosshealth.org	English	After-school program participants	Exercise and Health Education	After-school program sites	Vary with location and activity	No fee is charged

Socialization

Organization	Office Location	Contact Information	Laguages	Eligibility	Services	Area Served	Hours of Service	Cost
4-H	Maryland Cooperative Extension 18410 Muncaster Road Derwood, MD 20855	Phone: (301)590-9638 Email: N/A Website: www.4-h.org/	English	8 - 18 years old	Hands-on learning activities in the areas of science, citizenship and healthy living.	All County	N/A	Fees can be charged
Friends in Action – Interfaith Works	114 W. Montgomery Ave Rockville, MD 20850	Phone: (301)762-8682 Email: mbarberis-young@iworksmc.org Website: www.iworksmc.org	English	Low income families	Connects people from different backgrounds and faiths, works with families for one year providing skill building.	All County	N/A	No fee is charged

Meeting Evaluation Results						
	Number of Respondents	Strongly Disagree (%)	Disagree (%)	Not Sure (%)	Agree (%)	Strongly Agree (%)
1. Overall Evaluation of Meeting						
The meeting was well organized	34	(0)	(0)	(5.88)	(32.35)	(61.76)
The pace of the meeting was appropriate	34	(0)	(5.88)	(8.82)	(35.29)	(50)
The meeting was productive	34	(0)	(0)	(17.64)	(32.35)	(50)
2. Presentation/Discussion of Name, Vision, Mission						
The method of voting worked well	33	(6.06)	(6.06)	(33.33)	(39.39)	(15.15)
<p style="text-align: center;">Any additional thoughts about this part of the meetings?</p> <p>Comments provided (all):</p> <ul style="list-style-type: none"> Really liked hearing broader comments from large group; wish there could have been more time. Not clear on objective of the voting. The opening comments took much of meeting time. I would have appreciated more time to work. Needed better process to create buy-in – first engage, discuss, and then [provide] a meaningful way to contribute to shared vision and goals. It might be helpful to have the statement translate into Spanish and then back into English to ensure the language is culturally responsive. 						
3. Presentation/Discussion of Partnership Organizational Structure						
NOTE: The group was not asked to vote on the organizational structure. The presentation was not followed by a vote.						
The method of voting worked well	32	(3.12)	(9.75)	(28.12)	(40.62)	(18.75)
<p style="text-align: center;">Any additional thoughts about this part of the meetings?</p> <p>Comments provided (all):</p> <ul style="list-style-type: none"> Did we vote on this? It was lively and inclusive. 						
4. Work Group Sessions						
The purpose of the work groups was clear	34	(0)	(8.82)	(20.58)	(35.29)	(35.29)
The work group handouts were helpful	32	(0)	(9.35)	(34.37)	(28.12)	(28.12)
The facilitation was helpful	33	(0)	(15.15)	(30.30)	(18.18)	(33.33)
The work group was productive	33	(0)	(0)	(30.30)	(39.39)	(30.30)
<p style="text-align: center;">What worked well in the Work Group?</p> <p>Comments provided (all):</p> <ul style="list-style-type: none"> Having a facilitator. Group comments and sharing. Note taker did a good job capturing variety of what was expressed by group. Great ideas. Having facilitator to keep discussion on track. Need MCPS Participation. There were good ideas. It was a small group but too small! Participants were allowed to discuss their ideas and share with others their own programs. Level of knowledge of each participant. The different organizations represented. 						

Appendix F

- *Health Care.*
- *The idea of having the group speak up and share time together worked very well.*
- *The facilitation was helpful to bring us back together on our focus.*
- *Open discussion.*
- *Sharing experiences.*
- *Diversity of disciplinary background and community representation. Thank you!*

What did not work well?

Comments provided (all):

- *Time constraint.*
- *Facilitator not prepared so directions needed clarity and work tasks felt rushed.*
- *Not clear on scope of effort for healthcare setting.*
- *Not enough handouts provided and not time to really look at [them]; maybe disseminate beforehand.*
- *I don't feel like I walked away with an action step to accomplish.*
- *The role of the group was not clear enough.*
- *This is a complex problem, need more time and a framework to move forward*
- *Amorphous.*
- *I can't identify a deficit.*

5. Partnership Participation	Number of Respondents	Strongly Disagree (%)	Disagree (%)	Unsure (%)	Agree (%)	Strongly Agree (%)
I will continue to participate in the partnership I believe that the work of the partnership will enhance my own work.	34	(0)	(0)	(17.64)	(23.52)	(58.82)
	34	(0)	(0)	(23.52)	(23.52)	(52.94)
6. Did you work with or meet a new partner?	Answers provided (all): <ul style="list-style-type: none"> • <i>Some new and others known.</i> • <i>Yes</i> • <i>Yes</i> • <i>Yes! Able to provide a number of free resources.</i> • <i>Yes! I had the opportunity to meet people from other agencies.</i> • <i>Yes</i> • <i>Yes. I met a number of individuals from partnership organizations and others I don't [know].</i> • <i>Some</i> • <i>Became knowledgeable of other partners doing similar work within the community.</i> 					
7. Venue	Number of Respondents	Poor (%)	Fair (%)	Good (%)	Very Good (%)	Excellent (%)
a. Meeting Room	32	(0)	(3)	(18.75)	(28)	(50)
b. Food	30	(0)	(0)	(26.7)	(23)	(47)

Please share any additional thoughts or Suggestion about today's meeting or future partnership work below.

Comments provided (all):

- *Pace of meeting felt rushed because good information plus ideas were being shared! For future work groups, use experienced facilitator to help with pace, accurately capturing ideas etc.; Good =having a recorder.*
- *This is fascinating and built to succeed! I think the partnership need a strong branding approach to increase average of 81 its efforts and impact. Healthy Montgomery should be on everything we do in the community!*

**Healthy Montgomery Behavioral Health Action Plan Quarterly Report
(Submitted by Co-Chairs Thom Harr and Kevin Young)
for the September 8, 2014 HMSC meeting**

Preparation for Inaugural Meeting of the Behavioral Health Task Force

We have been meeting with HM staff to discuss several issues: recruitment of members to the new Behavioral Health Task Force, the content and structure of the inaugural meeting of the Task Force, and the organization of the forthcoming implementation work of the Task Force. The Task Force's charge is to implement the Behavioral Health Plan. The Plan calls for the creation of two Task Forces – one to work on the enhancement of *info*Montgomery for the purposes of providing better access to behavioral health information and resources and a second task force to work on developing the protocols necessary to facilitate “warm handoffs” of patients as they move between providers and levels of care. We have decided it best to form one Task Force, at least initially, and will suggest that the Task Force form subcommittees – one that will work on the enhancement of *info*Montgomery and the other to work on developing protocols. HM staff has been working to recruit members to the Task Force under our direction. Recruitment is proceeding well. Representatives from the following organizations have agreed to join the effort (organizations in italics have expressed a strong interest in participating but our contacts at those organizations are still seeking final approval for their participation or are identifying a participant).

Adventist Behavioral Health
African American Health Program
Asian American Health Initiative
Cornerstone Montgomery
Early Childhood Mental Health Consultation Project
Family Services, Inc.
Holy Cross Hospital
Identity Inc.
Latino Health Steering Committee
MedStar Montgomery Medical Center
Mental Health Association of Montgomery County
Montgomery Cares Behavioral Health
Montgomery College
Montgomery County Coalition for the Homeless
Montgomery County Collaboration Council for Children, Youth, and Families
Montgomery County Commission on Aging
Montgomery County Commission on Children, Youth and Families
Montgomery County Department of Corrections
Montgomery County Department of Health and Human Services
Montgomery County Fire and Rescue Services, EMS
Montgomery County Mental Health Advisory Committee
Montgomery County Police
Montgomery County Public Schools
National Alliance on Mental Illness (NAMI) Montgomery County
Operation Second Chance (veterans' organization)
Suburban Hospital
Suburban Hospital Community Benefit Advisory Council

Recruitment has deliberately included organizations and individuals who provided public comments to the Action Plan. Also, we are working to have all three minority health initiatives/programs represented on the Task Force so that the voices of our most vulnerable populations are included in the work.

Plans are being made to hold the Task Force meeting in the first part of November. Adventist Behavioral Health Care will provide the venue for the meeting as well as a trained facilitator. Planning meetings will continue into the next quarter.

Meetings with Montgomery County Office of Legislative Oversight staff

At the request of the Montgomery County Council, the Office of Legislative Oversight (OLO) is preparing a report on the behavioral health system in Montgomery County. During this quarter, we had two meetings with Legislative Analyst Natalia Carrizosa who is leading the behavioral health research project for OLO. At our first meeting, we discussed the possible parameters of the research and talked about many of the current and potential systems level changes that affect the provision and quality of behavioral health services (e.g., the Centers for Medicare and Medicaid (CMS) waiver, the problem of hospital readmissions, the need for health homes and other integrated care models, better management of behavioral health services across the lifespan, patient access to needed medications, affordable housing of patients, and gaps in service because of age, language, minority status etc.). During a second meeting, Natalia asked for our feedback on a draft of the project outline. We are grateful for the work of the OLO and optimistic that the OLO Report will support the work of the Behavioral Health Task Force and implementation of the Action Plan.

Preparation for Montgomery County Commission on Health presentation

The Montgomery County Commission on Health has invited us to present to the Commission members at their meeting on September 18th. They have asked us to discuss the Behavioral Health Action Plan implementation and how the COH can be supportive of the implementation efforts. Our meetings with HM staff this quarter have also included work on preparations for that meeting.

Healthy Montgomery Evaluation Subcommittee Quarterly Report for September 8, 2014 Steering Committee Meeting

At the first meeting of the HMSC Evaluation Subcommittee in April 2014, the Subcommittee members identified several initial tasks:

1. Look at suggested measures in Action Plan logic models and see how they mesh with the indicators that the Healthy Montgomery Data Project Team has identified.
2. Look at the five hospitals implementation plans (see attachment) with respect to obesity and behavioral health and see how they harmonize with Healthy Montgomery implementation and Action Plan measures to determine future possibilities of cost containment for the hospitals as well as improved overall population health.
3. Schedule meetings with the behavioral health and obesity implementation work groups to talk about measures and have a representative from the work groups attend the Evaluation Subcommittee meetings.
4. Look into the PARTNER tool and other tools that would measure the collaboration itself.
5. Look for more evaluation tools like activity logs, tracking pivotal changes, etc. to document process and collaboration.

Progress was made on items 2 and 3 with the help of Georgetown student Alessandra (Allie) Fodera who volunteered her time over the summer. Subcommittee member Mike Stoto and HM staff member Susan DeFrancesco (Institute for Public Health Innovation) met several times with Allie by phone during this quarter. As listed in item 2 above, Allie created a table of the County hospitals' implementation plans – excerpting those sections that address all of the six Healthy Montgomery health priorities and highlighting the hospitals' efforts to evaluate interventions and programs (please see attached). In addition, working from a slide presentation provided by Mike, Allie also created a first draft of a slide presentation that the Subcommittee can work from to create a presentation for the behavioral health and obesity implementation groups on an evaluation framework. This relates to item 3 above and helps prepare the Subcommittee members for the meetings with the implementation groups.

The next meeting of the Evaluation Subcommittee is scheduled for September 18th, 3-5pm at MCDHHS, 1335 Piccard Drive.

<i>Hospital</i>	<i>Hospital priorities/mission</i>	<i>Obesity</i>	<i>Mental/Behavioral Health</i>	<i>Cancer</i>	<i>Diabetes</i>	<i>Heart Disease</i>	<i>Maternal Health</i>
<i>Shady Grove</i>	<p>1. Lung Cancer in the Asian population</p> <p>2. Diabetes among Montgomery Cares (uninsured) patients (Implementation Strategy includes objectives and strategies)</p>	<p>Goal: Provide both individual (1:1) and group nutrition counseling, and health education related to exercise and nutrition to the community at a variety of community locations.</p> <p>Evaluation of Outcomes: Track the number of participants encountered and educated through community outreach. Monitor rates of obesity and overweight at the county level. For Dawson's</p>	<p>Considers Behavioral Health an area that doesn't need to be directly addressed by Shady Grove Adventist Hospital & Rationale</p> <p>Goal: Continue to provide behavioral health referrals to Adventist Behavioral Health, whose main hospital campus is next to the campus of Shady Grove Adventist Hospital.</p> <p>Rationale: SGAH does not provide behavioral health services because these services are already provided by the neighboring specialty care hospital within its hospital system, Adventist Behavioral Health. In addition to Adventist Behavioral Health, there are many organizations that</p>	<p>1. Lung Cancer in the Asian population</p> <p>Goal: Improve the early screening and detection of lung cancer among the Asian population served by Shady Grove Adventist Hospital to improve their 5-year survival rate.</p> <p>Strategies include:</p> <ul style="list-style-type: none"> - Early detection screening program. - Provide a routine follow-up process for identified lung nodules. - Provide smoking cessation literature in top Asian languages spoken by Shady Grove Adventist 	<p>2. Diabetes among Montgomery Cares (uninsured) patients (Implementation Strategy includes objectives and strategies)</p> <p>Goal: Reach target populations through partnership with safety net clinics and community organizations to provide health education and early detection screenings. Encourage prevention of diabetes through community health education at health fairs, senior and community centers. Collaborate with Shady Grove Adventist Hospital</p>	<p>Goal: Provide: free screenings related to cardiovascular health at annual "Love Your Heart" community health fair; strong cardiovascular community outreach, to include the following screenings to community: Lipid Profile, Vertical Auto Profile, Homocysteine, HsCRP, blood pressure, glucose and A1C. Provide free cardiovascular educational materials, blood pressure screenings and body composition screenings (BMI, weight, % body</p>	<p>Goal: Continue to provide the excellent care to expectant/new mothers, their families, and their infants by providing childbirth classes, infant care classes, breastfeeding classes, as well as a variety of support groups. Continue to collaborate with Montgomery County Health Department to provide prenatal services to low-income</p>

		<p>Market Challenge, track results of participants' body composition screenings over the course of 12 weeks to assess any changes (e.g. weight loss, improved BMI, etc.), and document any changes they have made with regard to nutrition and fitness over the course of the program.</p>	<p>provide behavioral health services within the SGAH service area.</p>	<p>Hospital's patient population.</p> <ul style="list-style-type: none"> - Collaborate with community-based outpatient imaging centers to share data on lung cancer population and effective screening programs. -Community outreach to Asian population, partnering with Montgomery County DHHS' Asian American Health Initiative and Pan Asian Clinic to raise awareness. <p>Evaluation Strategies:</p> <ul style="list-style-type: none"> -Track the percent of lung cancer diagnoses at Shady Grove Adventist Hospital in the Asian population compared to all 	<p>Foundation to provide funding for uninsured patients to receive outpatient diabetes education classes from an RN/Certified Diabetes Educator. Improve the % of known uninsured diabetic patients who receive the recommended number of hemoglobin A1C screenings within the SGAH's service area through partnership with the Montgomery Cares Program.</p> <p>Evaluation Strategies:</p> <ul style="list-style-type: none"> -In collaboration with the Primary Care Coalition, we will be able to track and measure the percentage of patients getting the recommended 	<p>fat, % muscle) at health fairs, churches, senior and community centers around the County.</p> <p>Evaluation of Outcomes: Track and analyze numbers of screenings and findings from screenings. Track the number of participants encountered and educated through community outreach.</p>	<p>and uninsured residents.</p> <p>Evaluation of Outcomes: Continue assessment and evaluation of Maternal and Infant programs through tracking numbers of participants and surveys of participant feedback. Monitor maternal and infant health status in Montgomery County.</p>
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			<p>hospitals in the U.S. through the CDC's National Program of Cancer Registries Cancer Surveillance System (NPCR-CSS). -Record the number of people screened at each lung cancer screening event. Track individuals with an abnormal test result, and record all follow-up. -Track the number of flyers distributed and the number of physicians who were targeted about the lung cancer screenings. -Ensure that all screened individuals receive feedback and communication as to their recommendation. <i>Breast Cancer:</i> Evaluation of Outcomes - Track and analyze numbers</p>	<p>number of hemoglobin A1C screenings. -These reports can be automated through the use of the Clinical Decision Support tools built into the electronic health record. -Provide diabetes education classes free of charge to the uninsured; track the numbers of uninsured served and any changes in their hemoglobin A1C. Evaluation of Outcomes: SGAH will conduct a quarterly review of hemoglobin A1C data with Montgomery Cares Program providers and collaborate in offering interventions for improved compliance with</p>		
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				<p>of: mammograms and other screenings provided, breast cancer abnormality findings, and treatment provided. Track number of participants encountered and educated during community outreach.</p> <p><i>Lung Cancer:</i> Evaluation of Outcomes - Track and analyze numbers of: lung cancer screenings, abnormal findings, follow-up, and treatment provided. Track number of participants encountered and educated through community outreach.</p> <p><i>Colorectal Cancer:</i> Evaluation of Outcomes - Track and analyze numbers of: colonoscopies, treatments and</p>	<p>recommended screening frequency. Monitor/report/track the patients' data from the EHRs by December 2013. Stage all 8 clinics to be connected to our Health Information Exchange by Summer of 2014. SGAH will start to provide diabetes classes to the uninsured patients of Montgomery County, measuring initial and final hemoglobin A1C.</p>		
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				<p>outcomes, as well as community encounters. Continue to monitor incidence and mortality rates for colorectal cancer to ensure Montgomery County meets or exceeds the Healthy People 2020 target for decreasing colorectal cancer-related deaths.</p>			
<p><i>Washington Adventist</i></p>	<p>Based on findings from its Community Health Needs Assessment, Washington Adventist Hospital's President's Council decided to focus on 1) behavioral health and 2)</p>	<p>Goal: Provide both individual (1:1) and group nutrition counseling, and health education related to exercise and nutrition to the community at a variety of community locations.</p> <p>Evaluation of Outcomes:</p>	<p><i>(Charts with goal: purpose accomplishments to date, gaps, objective, actions for each objective)</i></p> <p>Goal: Implement strategies to address behavioral health (mental health and substance abuse) needs in the population served by Washington Adventist Hospital.</p> <p>Objectives to be completed by end of</p>	<p><i>Goal: reach uninsured residents, target populations through free early detection screenings and health education outreach; continued partnerships; provide free cancer screenings to the community at the annual cancer screening days; community health fairs</i></p> <p><i>Breast cancer: evaluation of</i></p>	<p>Goal: Encourage prevention of diabetes through community health education at health fairs, senior and community centers. Ensure that patients at WAH who are diagnosed with diabetes receive appropriate education on how to manage their disease.</p>	<p>Goal: Provide free screenings related to cardiovascular health at annual "Love Your Heart" community health fair. Provide strong cardiovascular community outreach, to include the following screenings to community: Lipid Profile, Vertical Auto Profile, Homocysteine, HsCRP, blood pressure, glucose</p>	<p>Goal: Continue to provide the excellent care to expectant/new mothers, their families, and their infants by providing childbirth classes, infant care classes, breastfeeding classes, as well as a variety of support groups.</p>

	<p>influenza.</p>	<p>Track the number of participants encountered and educated through community outreach. Monitor rates of obesity and overweight at the county level.</p>	<p>FY2015:</p> <p>1. Washington Adventist Hospital will refer 100% of admitted patients with identified conditions of substance abuse/chemical dependency to appropriate resources for intervention/follow up.</p> <p>2. Washington Adventist Hospital will establish a transitional care plan for discharged patients with bipolar disorder, to connect them to an FQHC or primary care practice for care that includes integrated behavioral health and home based case management services to reduce readmission rates.</p> <p>3. Washington</p>	<p>outcomes - track and analyze numbers of: mammograms and other screenings provided, breast cancer abnormality findings, and treatment provided. Track number of participants encountered and educated during community outreach. Colorectal cancer: evaluation of outcomes: Track and analyze numbers of: colonoscopies, treatments and outcomes, as well as community encounters. Continue to monitor local incidence and mortality rates for colorectal cancer. Cancer (other): evaluation of outcomes: Track and analyze numbers of: cancer screenings,</p>	<p>Evaluation of outcomes: Track and analyze numbers of participants encountered and educated through inpatient and outpatient diabetes education and through community outreach. Monitor rates of ER visits and hospitalizations due to diabetes.</p>	<p>and A1C. Provide free cardiovascular educational materials, blood pressure screenings and body composition screenings (BMI, weight, % body fat, % muscle) at health fairs, churches, senior centers, and various community locations.</p> <p>Evaluation of outcomes: Track and analyze numbers of screenings and findings from screenings. Track the number of participants encountered and educated through community outreach.</p>	<p>Continue to collaborate with Montgomery County Maternity Partnership Program to provide prenatal services to low-income and uninsured residents.</p> <p>Evaluation of outcomes: Continue assessment and evaluation of Maternal and Infant programs through tracking numbers of participants and surveys of participant</p>
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			<p>Adventist Hospital will provide resources to Victory Towers (low-income senior apartment complex in ZIP code 20912) regarding alcohol abuse.</p> <p>Evaluation:</p> <ul style="list-style-type: none"> - Develop a process to use the electronic medical record to monitor whether patients with substance abuse/chemical dependency receive appropriate resources and follow-up care. - Through the Outpatient Case Management Services, WAH will track this by following up w/discharged patients with bipolar disorder and documenting whether or not they have received adequate follow-up care post- 	<p>abnormal findings, and treatment provided. Track number of participants encountered and educated through community outreach.</p>			<p>feedback. Monitor maternal and infant health status in Montgomery County and Prince George's County.</p>
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			<p>discharge. The referrals can also be tracked through the FQHC on Washington Adventist Hospital's campus.</p> <p>- Track the resources and services provided to Victory Towers.</p>				
<p><i>Holy Cross</i></p>	<p>*(I liked HC's setup of Response to Unmet need through HM lenses: Lack of Access: Unhealthy behaviors: Health Inequities:)</p>	<p>Outreach that improves health status and access for underserved, vulnerable</p> <p>Response to Unmet need through HM lenses: <i>Lack of Access:</i> Health centers in Silver Spring, Gaithersburg, and Aspen Hill; Ob/gyn clinic</p> <p><i>Unhealthy behaviors:</i> Community Fitness Program:</p>	<p>Mentioned as a priority but not detailed</p>	<p>Mission: Outreach that improves health status and access for underserved, vulnerable</p> <p>Response to Unmet need through HM lenses: <i>Lack of Access:</i> Minority and Community Outreach: Mammogram Assistance Program: screening; mammograms; navigation; biopsy; ultrasound; surgery</p> <p><i>Unhealthy behaviors:</i> Minority and Community</p>	<p>Mission: Outreach that improves health status and access for underserved, vulnerable</p> <p>Response to Unmet need through HM lenses: <i>Lack of Access:</i> Health centers in Silver Spring, Gaithersburg and Aspen Hill</p> <p><i>Unhealthy behaviors:</i> Senior Source: Diabetes Prevention Program (DPP); Community Fitness: Chronic Disease Self-Management</p>	<p><i>Cardiovascular health: Mission:</i> Outreach that improves health status and access for underserved, vulnerable</p> <p>Response to Unmet need through HM lenses: <i>Lack of Access:</i> Health centers in Silver Spring, Gaithersburg and Aspen Hill</p> <p><i>Unhealthy behaviors:</i> Community Fitness Program: Senior Fit</p>	<p>Mission: Outreach that improves health status and access for underserved, vulnerable</p> <p>Response to Unmet need through HM lenses: <i>Lack of Access:</i> Ob/gyn clinic; Maternity Partnership program</p> <p><i>Unhealthy behaviors:</i></p>

		<p>Kids Fit</p> <p><i>Health Inequities:</i> Ob/Gyn, Perinatal and Community Fitness: Obesity in Pregnancy Programs</p> <p>Method of Evaluation: Semi-annual fitness assessments; # enrolled in obesity in pregnancy programs</p>		<p>Outreach: Mammogram Assistance Program: breast education; self examination</p> <p><i>Health Inequities:</i> Minority and Community Outreach: Cancer outreach, screening and prevention programs</p> <p>Method of evaluation: # of mammograms; # of breast cancers found; # cancer education encounters; # cancer screenings for at-risk minorities</p>	<p>Program (CDSMP)</p> <p><i>Health Inequities:</i> CDSMP and DPP classes offered in Spanish</p> <p>Method of Evaluation: # of visits; progress on diabetes indicators; # pre-diabetics advancing to diabetics; reduction in hospital admissions and readmissions; #CDSMP and DPP encounters</p>	<p><i>Health Inequities:</i> Minority and Community Outreach Program: ABCS Block Grant</p> <p>Method of Evaluation: Semi-annual fitness assessments; progress on heart failure indicators; # of education encounters; # of people referred to health centers; # of people with kept appointments</p>	<p>Perinatal community education classes</p> <p><i>Health Inequities:</i> Ob/gyn clinic; Maternity Partnership program</p> <p>Method of Evaluation: # of admissions to Maternity Partnership; # perinatal class encounters % low birth weight; reduction in infant mortality</p>
MedStar Montgomery	Implementation Strategy Goal	MedStar Montgomery feels that by focusing on heart	MedStar Montgomery Medical Center already addresses this concern through a full spectrum	<i>Cancer (Breast): Wellness & Prevention - WHIP, Women's Health</i>	Considered "other health priorities that were identified in the CHNA and describe	5 part implementation strategy of activities, outputs, short and	

	<p>Statement: To have an educated public with regard to heart disease prevention and management and available resources</p>	<p>disease factors, we will indirectly address this health concern as well. Additionally, the hospital currently offers Yoga, Aerobics and Tai Chi courses to community members. It also partners with elementary schools in walking groups and hosts weight loss surgery seminars.</p>	<p>of programs, including a 24/7 Mental Health Help Line. MMMC provides transportation to and from programs for those in need. The hospital also hosts the county's only postpartum support group. Behavioral/ mental illness → access to care: 24-hour, 365 day help line; shuttle van to and from programs → wellness and prevention, quality of life: Postpartum Support Group</p>	<p>Initiative Program <i>Cancer: Quality of Life</i> - Monthly support group for patients, family and friends <i>Cancer: Wellness and Prevention</i> - Ongoing lung cancer screening program</p>	<p>why the hospital did not select them": <i>Diabetes: wellness and prevention</i> - MedStar Montgomery offers support groups, health education talks and programs that adequately address this issue. Additionally, MedStar Montgomery feels that by focusing on heart disease factors, we will indirectly address this health concern.</p>	<p>long-term outcomes, responsible parties--- <i>doesn't include an evaluation section</i></p> <p>Example: Activities: Conduct heart disease-related education programs throughout the Aspen Hill/Bell Pre region</p> <p>Outputs: Quarterly health information talks on heart disease-related topics focused in Aspen Hill area</p> <p>Place heart disease prevention advertisements/articles</p> <p>Short-term outcomes: Increase knowledge of heart disease-related</p>	
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						<p>factors based on pre/post-test results¹</p> <p>Educate community on heart disease prevention with placement of two heart disease prevention ads/articles</p> <p>Long-term outcomes: Increase access of primary health care in Aspen Hill area</p> <p>Partnering Organizations: Holy Cross</p> <p>Montgomery County DHHS</p> <p>Community cardiac and vascular physician</p>	
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						groups	
<i>Suburban Hospital</i>		<p>Goal: Reduce obesity rates through the promotion of healthy lifestyles.</p> <p><i>O1 - Unhealthy behaviors</i></p> <p>Action plan:</p> <ul style="list-style-type: none"> - Provide structured exercise programs -access to healthy foods and weight management programs - Collaboration with other organizations <p>Activities:</p> <p>Senior Exercise Programs, such as Tai Chi, Zumba Gold,</p>	<p><i>B1 – Social and Emotional Support</i></p> <p>Action plan: Increase the proportion of seniors that participate in educational and community- based program;</p> <p>Provide tools and resources that improve family functioning and positive parenting</p> <p>Activities: Support groups</p> <p><i>B2 - Lack of Access</i></p> <p>Action plan:</p> <p>Collaborate with HM to support the development of a centralized internet database for behavioral health services in the County</p> <p>Link patients in need of behavioral health services to appropriate</p>	<p>Goal: Improve cancer prevention and survivorship.</p> <p>Implementation plan includes community health need, goal, target population, action plan, activities, and partnering organization <i>but not outcome measures/method of evaluation</i></p>	<p>Goal: Reduce diabetes prevalence and associated health complication.</p> <p>Implementation plan includes community health need, goal, target population, action plan, activities, and partnering organization <i>but not outcome measures/method of evaluation.</i></p>	<p><i>Cardiovascular health</i></p> <p>Goal:</p> <p>Improve cardiovascular health through prevention and timely treatment.</p> <p>Implementation plan includes community health need, goal, target population, action plan, activities, and partnering organization <i>but not outcome measures/method of evaluation.</i></p>	<p>Goal: Improve health outcomes for youth and families.</p> <p>Implementation plan includes community health need, goal, target population, action plan, activities, and partnering organization <i>but not outcome measures/method of evaluation.</i></p>

		<p>Pilates, Senior Shape; Mall walking; Healthy Choices Class; Community Supported Agriculture Program; Heart Well; Nutrition Counseling <i>O2 - Health Inequities</i> Action plan: Coordinate with public and private agencies to increase knowledge and utilization of available obesity services Activities: Nutrition Seminars; HeartWell in Action; Create Your Weight; Healthy Cooking Series</p>	<p>community resources Activities: Suburban On-Call; Behavioral Inpatient and outpatient services</p>				
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Hospitals and Community

Working Together to Transform Patient Care

Featured Speaker

Kevin Sexton, President & CEO, Holy Cross Health

The State of Maryland has transformed and modernized its unique hospital payment system. This transformation, known as the Maryland Medicare Waiver, promotes greater integration between hospital delivery systems and community health.



What does this mean for Montgomery County?

This event will explore the challenges and opportunities this transformation in hospital payments presents for Montgomery County government, hospital systems, and community based organizations who will need to collaborate effectively in the new environment.

To register go to: <http://bit.ly/MedicareWaiverMD>

Please register by Sept. 19, 2014

On-site registration opens at 7:30 AM

**For more information: contact Hillery Tumba at
Hillery_Tumba@primarycarecoalition.org or at
301.628.3425**