



Maine SHNAPP Community Engagement Phase  
 Summary Report of Forum & Event Input  
 York County  
 June 2016

This serves as a brief summary report of the input provided by community members attending the 3 community forums and 3 community events that took place between November 2015 and May 2016.

**Community Forums**

Meeting	Date	Location
York County Forum	12/14/2015	Wells, ME
York County Forum	1/28/2016	Springvale, ME
York County Forum	2/11/2016	Biddeford, ME
<b>Total Attending Forums:</b>		<b>104</b>

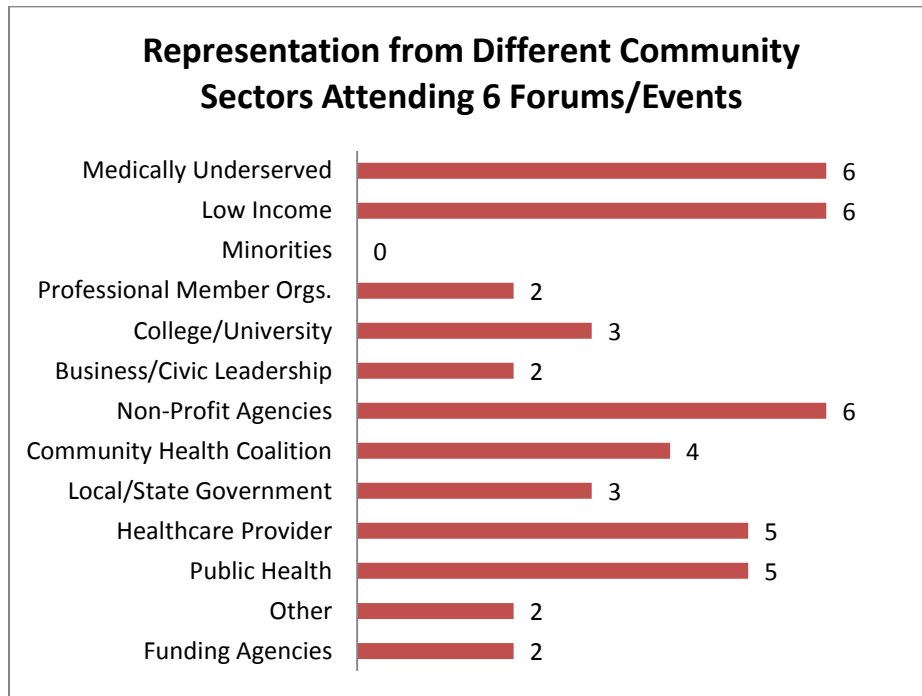
**Community Events**

Meeting	Date	Location
York District Public Health Obesity Work Group	12/2/2015	Biddeford, ME
Choose To Be Healthy Advisory Board Meeting	12/8/2015	York, ME
York Senior Center	5/26/2016	Sanford, ME
<b>Total Attending Events:</b>		<b>30</b>

**Total Attending Forums & Events** **134**

Attendance numbers may contain duplicates if one person attended more than one forum/event.

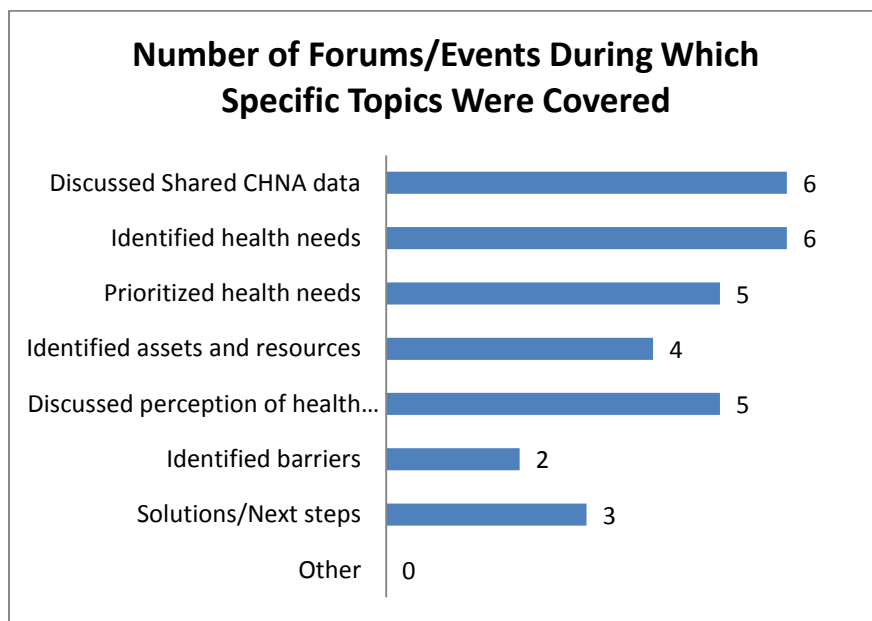
## Community Sectors Represented During Forums and Events



“Medically underserved,” “low income,” and “racial/ethnic minorities” are sub-populations named specifically by the Department of Treasury/IRS regulations.

Other: Federal government, Senior citizens

## Type of Input Obtained During Forums and Events



“Other” included: n/a

## Community Forums

These forums, organized and co-led by Maine CDC District Liaisons and SHNAPP hospital community benefit representatives, typically consisted of a prepared Power Point presentation followed by breakout sessions on health topics. In general, breakout sessions obtained input about:

- Summary statements about the issue and/or its effect on the community
- Identification of local assets and resources to address the issue
- Identification of barriers to addressing the health issue or needs of the community before more adequately addressing the issue
- Ideas for next steps, how to solve the health issue, who to include, and what the community should look like in the future

### Themes Identified During York County Forums

#### Health Issue: **Obesity**

**Summary of assets to resources to address issue:** Technology (Fitbits); natural resources (land trusts); local programs/agencies; schools. (See list of specific programs in appendix on page 6.)

**Summary of barriers or community needs (if reported):** "sugar" is a cheap commodity; food available to homeless is not that healthy; people on food assistance worry about how to make it last and this has an impact on their shopping habits; Disconnect between what people eat and their overall health; Time; Money; Candy given as treats, unhealthy incentives for a lot of things; Lack of healthy food policies at school and work; Transportation; Dangerous to bike, run and walk; Breaking patterns; Effective outreach to at risk populations; Funding effective interventions

**Summary of next steps, solutions, future ideal:** Decrease rates of obesity by conducting needs assessment to identify key intervention points and intervention strategies. Coordinate stakeholders (land trusts, HMPs, schools, concerned organizations, parents) and communicate about better nutrition and increased physical activity.

#### Health Issue: **Substance Abuse**

**Summary of assets to resources to address issue:** Local programs/agencies; community partners; people in recovery; schools; Chief Connolly; grant funds; coalition/task force. (See list of specific programs in appendix on page 6.)

**Summary of barriers or community needs (if reported):** Lack of data (illegal use, treatment numbers, age of data); attitudes/perceptions/stigma (harm from marijuana, "not my kid", quick fix for complex problem); lack of funding/resources/services; lack of transportation; inconsistent or ineffective policies and protocols (prescribing practices, insurance access and/or coverage for SA, law enforcement).

**Summary of next steps, solutions, future ideal:** Take a comprehensive approach. Address social determinants (decrease high school dropout, increase protective factors among youth, decrease stigma around substance use), better utilize people in recovery and create recovery centers/programs, improve collaboration among community stakeholders, and expand education among parents, schools, and community members. Stakeholders need to be advocates and create policy change (reform corrections system, change insurance reimbursement for alternatives to prescription opioids, create more "Angel Programs" among law enforcement) as well as increase treatment programs and prevention services.

**Health Issue: Mental Health**

**Summary of assets to resources to address issue:** Local programs/services; York Hospital; health insurance. (See list of specific programs in appendix on page 6-7.)

**Summary of barriers or community needs (if reported):** Lack of resources and lack of coordination among resources; access to care issues (people without insurance, wait lists, not enough treatment types and capacity); lack of continuity of care/holistic approach/accountability; not enough education/awareness of issue; stigma; need more (free) activities for youth and families.

**Summary of next steps, solutions, future ideal:** A model outlined includes psychotherapy, medication, peer support, and community health workers/navigators that is available to everyone who needs it. There is a need to obtain sustainable resources to make care more accessible (more providers, no wait lists, additional treatment facilities including short-term residential, continuity of care, and follow-up) and on-going education about mental health for parents, children, day care providers, and the public.

## **Community Events**

These events were organized and carried out by community stakeholders (including Maine CDC District Liaisons, SHNAPP hospital employees, or others who sat on local SHNAPP Community Engagement Committees). Typically already formed groups agreed to hold a presentation about the Shared CHNA data and discuss their reactions based on the group leader's questions. In general, input from events consisted of brief summary statements or questions about health issues and health factors affecting the geographic area.

### **Priority health issues identified by York County events:**

- Obesity (2 of 3 events)
- Mental Health (2 of 3 events)
  - Affect on other issues such as Alcohol & Drug Abuse, Sexual Health (STDs, HIV, pregnancy), and Tobacco Use
- Alcohol and Drug Abuse (2 of 3 events)
- Tobacco Use (2 of 3 events)

### **Priority health factors identified by York County events:**

- Cost of medical care
- Access to medical care
- Transportation
- Poor communication with healthcare providers due to
  - Short visits (fee-for-service model)
  - Provider turnover/change in providers
  - Transition from hospital to home
  - Medication reconciliation
  - Confusion over entry to system (ER, urgent care, walk-in clinic, PCP)

### **Themes identified during York County events:**

- The recent closure of in-patient services at SMHC/Goodall Hospital had people thinking about and discussing access to care.
- The York District Public Health Obesity Work Group was surprised at some of the data such as older population in York County and Maine compared to US and overweight/obesity statistics.
- Choose To Be Healthy Advisory Board agreed with priority health issues identified by SHNAPP Stakeholders Survey and noted concerns with mental health and its affect on other health issues and outcomes.

**Appendix: Specific resources listed by priority area**

**OBESITY**

- Fit bits
- Land trusts
- High schools
- (Make your way into) family support system
- Promote exercise- hiking, jump rope club
- SNAP-Ed
- In store dieticians
- Partners for Hunger Free York County
- summer meal programs
- weekend backpacks
- Let's Go 5-2-1-0!
- WIC
- YMCA
- Trail systems
- Bicycle Coalition of Maine

**SUBSTANCE ABUSE**

- Drug take back (events, boxes)
- Community partners for education
- Real estate agents (medication storage during open houses)
- Child care workers (talk to parents about safe medication storage)
- People in recovery
- Community coalition (funded, organized)
- Drug Free Community (DFC) grant
- Partners for Healthier Communities grant
- Outreach workers in schools/school counselors
- Maine Behavioral Health Care
- Nasson Health Care
- Day One
- Milestone in Old Orchard Beach
- YCSPI
- Local therapists
- Substance abuse shelter in Saco
- Substance abuse specialists in Kennebunk
- Chief Connolly
- Public Health Task Force
- Community members who care

**MENTAL HEALTH**

- Sweetser (in schools and co-located with York Hospital primary care practices)
- Housing First Initiative in Portland
- Cornerstone Home Health (staff certified in chronic care and/or behavioral health)
- Community Health Options (coverage includes 3 behavioral health issues at no cost)

- York Hospital
  - Psychiatry practice nursing model
  - Emergency Room
  - In-patient psychiatry
  - Out-patient psychiatry
- Maine Behavioral Health
- NAMI

If you are interested in reviewing individual reporting forms represented in this summary, please contact [communitybenefits@emhs.org](mailto:communitybenefits@emhs.org)