

CCPHCC Steering Committee 3/29/07

In attendance: Deb Deatruck, Colleen Hilton, Don Ward, Malory Shaughnessy, Meredith Tipton, Elizabeth Trice, Kaki Dimock, Doug Gardner

Handouts: Committee contact list, CCPHCC Scopes of Work, Budget, Workplans for Governance, Comprehensive Community Health Coalition (CCHC), and Legislative Subcommittees

1. Welcome and introductions

- Julie will send letter to Trish requesting that Lisa Kavanaugh be added to the reconstituted PHWG membership as delegate from this group
- Need to note with asterisks who's on the CCPHCC list just as a cc, not a participating member
- Need to talk to Holly Korda/Becky Whittemore re UNE/MPH representation on Council

2. Scope of work for coordinating council

(See attached materials)

One key deliverable is Regional Health Profile. Community coalitions have to update profiles done a few years ago, also Maine Health is planning to profile the 10-county region served. Coordination is needed, other organizations e.g. hospitals may be able to contribute to offset costs. All divisions at Maine CDC have just started working on regional health profiles; a department-wide data group has been created.

3. Scope of work of each committee

(See attached materials)

Fundraising: current budget for city's PH dept. is 25% tax funds, but actually closer to 40% once you include employee benefits. Fundraising Cmte can also function as treasurer or maybe city should administer funds? As more resources accumulate, administration can become more professional, but for now county can continue to hold and distribute funds. PROP can't administer funds without taking out of 9-12%.

Governance and Financing: look at 2005 chartbook, Colleen Hilton recommends Drew Gattine – city councilor in Westbrook, lawyer in Portland - for committee. Doug might have someone from Harpswell.

What are objectives of the group?

Julie: to create a county-wide public health entity

Deb: to create public health infrastructure for the Cumberland County region – this is our mission.

“Cumberland Regional Health Authority”

Julie will send out existing one-pager on our effort for the group to work on. Group also needs visuals – how everything fits together. Will do for May meeting.

CDBG money needs to be planned ASAP - # of people will be served, and what services (probably STD and immunization). Colleen asked Julie to look at organizations that already have health workers in the county and try to use them rather than hire new staff. Need to coordinate, and make sure that any money spent in the county is strategic: collects data on needs, make good relationships with local elected officials and health officers, as well as coordinating with current health and anti-poverty work in the county.

There needs to be agreement and clear lines around what state does and what new entity would do.

Healthy Cumberland County (CCHCs):

(See attached materials)

Kaki expects to see coalitions morphing and merging. There are no school reps on the larger coordinating committee. Some school representation happens through CCHCs, but there has not been a broad appeal yet. (There have been broad appeals to local health officers and elected officials.)

Health Data: Part of CCHC is data collection and management, is thinking of hiring someone who could act as staff for HD committee. Need someone with the political skill to manage multiple groups.

Steering committee: Develop and implement overall strategy, oversee workplans of subcommittees, review recommendations before presentation to full council, promoting overall mission.

4. Use of funds raised - draft budget

(See attached)

- Need to have larger spreadsheet with unrestricted funds vs restricted.
- Legal research. We need to do a review of public health statutes to know what kind of things might need to be changed in order to establish a county-wide public health entity. It may be that certain powers only require an MOU with state. We also want to make sure that anything we do makes it easier to get federal funds. Find out what other states do. Julie will move forward with Barbara Shaw.
- There may be an opportunity to get started sooner rather than later with CCHC person to start doing data collection and planning- they are planning on hiring a full-time person. Kaki, Meredith and Julie will coordinate. Discuss idea of having a staff person for RCC. Florida has regional health planning councils that are very effective in collecting and providing health data and provides facilitation and convening.

5. Legislative update

- Group will have two weekends' notice before hearing. There needs to be a strategy for the hearing – town managers testifying etc.
- Deb will look at “reasons why” summary by Julie, edit, and then we can start distributing.

6. Membership outreach/recruitment plan

- Don suggests that people come down from MCDC periodically to increase local understanding of where the state is in process regarding preparedness; federal CDC cannot give money directly to county, other parameters that will govern future programming. Can incorporate into May 26 large group meeting.
- Should also send out Trish's infrastructure illustration to start thinking about how new infrastructure could be based on connectivity.

7. **Meeting schedule:** steering committee will meet monthly, next meeting April 23, 2:30-4 Portland City Hall.