



**healthy  
communities**  
OF THE CAPITAL AREA



A Local Healthy Maine Partnership

## Expanding Efforts in Local Public Health *making connections ~ improving lives*

June 2013

Healthy Communities of the Capital Area (HCCA) is a coalition of local people who work locally to improve the health and quality of life in our communities.\*

### **Mission**

To convene people, organizations and communities to collaborate on quality of life and public health issues.

### **Vision**

Happy, thriving, interconnected people, organizations, and communities who are empowered to improve their quality of life.

Healthy Communities of the Capital Area  
[www.healthycommunitiesme.org](http://www.healthycommunitiesme.org)  
(207) 588-5012

\*Our Local Service Area (LSA) includes the Southern Kennebec County towns of Augusta, Chelsea, Farmingdale, Fayette, Gardiner, Hallowell, Litchfield, Manchester, Monmouth, Mount Vernon, Pittston, Randolph, Readfield, Vienna, West Gardiner, Wayne, Windsor, Winthrop, and Richmond.

HMP is a collaborative effort among 26 local coalitions, the Maine DHHS (Maine CDC and Office of Substance Abuse) and DOE, supported primarily by the Fund for Healthy Maine and federal grants from the US CDC and SAMHSA.



## *Expanding Efforts in Local Public Health*

### **HCCA Annual Meeting**

Harold Alfond Center for Cancer Care, 361 Old Belgrade Road, Augusta

June 3, 2013 ~ 3:00-5:45

### *Comments from Jim Wood, HCCA Board Chair*

June 2013 holds a much brighter outlook for Healthy Communities of the Capital Area.

Looking back – June 18, 2012, the date of last year's Annual Meeting, we had just received the news that the 1/3 cuts voted on by the 125<sup>th</sup> Maine Legislature for Fund for a Healthy Maine Budget Line Item: Community Grants, had a much greater impact locally than 1/3.

The Maine CDC implemented the cuts by

- Eliminating Coordinated School Health Programming, and we had two School Health Coordinators in MSAD 11 and RSU 2
- Designating a lead HMP in each of the 9 Public Health Districts with funding of \$281,000 annually, a designation that went to Skowhegan in Central District
- Designating HCCA and the other 18 HMPs as "Supporting HMPs" at \$120,000 annually.
- School Based Health Centers maintained level funding

In the HCCA local service area the changes translated to over a 70% cut from the Healthy Maine Partnership Community~School Grants. The cuts:

- \$70,000 from MSAD 11 – eliminating the School Health Coordinator position
- \$70,000 from RSU 2 – eliminating the School Health Coordinator position
- \$147,058 from HCCA – drastically curtailing collaborative community efforts to reduce tobacco use and exposure, and improve physical activity and nutrition, within 18 towns and with 70,000 people.

The summer of 2012 meant reduced hours and staff leaving HCCA for more stable employment. It also meant identifying other opportunities that aligned with our mission and primary prevention efforts, connecting with new funders, engaging the board in strategic planning efforts, and writing grant applications. So, for right now, HCCA is paying its payroll, being creative in engaging the community, and moving forward.

I would be remiss however if I did not note that although we have found a variety of funds to support our work *for now*, it is important that, as part of the public health infrastructure of Maine, funding be adequate to continue to perform local functions of informing, mobilizing, and develop policies and plans that support making the healthier choices, the easier choices.

With great staff and an engaged and innovative Board of Directors, I feel confident that HCCA will continue its important role in community health in southern Kennebec County.

A handwritten signature in black ink, appearing to read "Jim Wood", is written over a light gray background.

Serving Augusta, Chelsea, Farmingdale, Fayette, Gardiner, Hallowell, Litchfield, Manchester, Monmouth, Mount Vernon, Pittston, Randolph, Readfield, Richmond, Vienna, Wayne, West Gardiner, Windsor, Winthrop



*Expanding Efforts in Local Public Health  
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HCCA Annual Meeting  
June 03, 2013  
*Board Treasurer's Summary Report*

HCCA is a 501(c)(3) non-profit organization and the Local Healthy Maine Partnership (HMP). We host the Drug Free Communities Coalition, and multiple prevention initiatives funded by Federal, State, and Foundation Grant Awards. The Local Service Area includes 18 communities in southern Kennebec County and Richmond in Sagadahoc County.

- Healthy Maine Partnership funding through the Fund for a Healthy Maine focuses on reducing tobacco use and exposure, improving nutrition and adequate physical activity.
- The Drug Free Communities Coalition Grant is through SAMHSA at the Federal Level. Funding is provided on the Federal Fiscal Year, over five years, began October 1, 2009, with potential for up to 10 years of funding. STOP Act Funds are also Federal Funds and support
- Many smaller funding streams help support a broader approach to collaborative public health including Lead Poisoning Prevention, Student Intervention and Reintegration Program, Assessing Local Foods Capacity/Food Hub viability/Community Food Council format, integrating tobacco treatment in Mental Health and Substance Abuse Treatment settings, providing a home for the FoodCorps member
- Medical Care Development provides financial, IT, HR and employment services via a Management Services Agreement
- HCCAs fiscal year starts July 1 as do the Maine awards, Federal Grants start their fiscal year on October 1, and various foundations largely fund for 1 year from the date of the award which varies. This budget reflects all grants awarded between July 1, 2012 and June 30, 2013 regardless of fiscal year of the grant.

**Annual Budget Summary: Total Budget July 1, 2012 through June 30, 2013 is \$669,487.00**

**Personnel** is the largest expense category with 5 full time and 2 part time employees .

**Healthy Maine Partnership funds:** Maintain the coalition, community health planning, participation in Central District Coordinating Council and efforts to reduce Tobacco use, improve Physical Activity & Nutrition, at all sites, including Richmond

**Substance Abuse Prevention:** includes 2 Federal Grants and 5 streams of funding from the State of Maine

**Access to Local Foods & SNAP-Ed:** Includes FoodCorps, Food Hub funding, SNAP-Ed

**Small Grants:** Range from \$500 to \$25,000 with most between \$4,000 and \$6,000 for short term efforts not covered by larger grants, but clearly identified as needs by the board members, community partners, and the staff

**Annual Budget FY 12, July 1, 2011 through June 30, 2012**

	Healthy Maine Partnership	Substance Abuse Prevention	Local Foods & SNAP-Ed	Small Grants	FY 12 Total
<b>Revenue</b>	\$153,642	\$252,454	\$197,972	\$65,590	\$669,478
<b>Expenses</b>					
<b>Total Personnel</b>	104,546	137,252	100,714	33,444	\$375,956
<b>Operating Expenses</b>	29,083	51,587	62,748	21,581	164,999
<b>Community supports, mini-grants, and consultants</b>	20,013	63,615	34,330	10,565	128,523
<b>Total Expenses</b>	\$153,642	\$252,454	\$197,972	\$65,590	\$669,478

**Personnel Expenses include:** Salary and Fringe for all programs

**Operating Expenses include:** Rent, maintenance, landline and cell phones, internet, website, professional development, advertising, materials and supplies, printing, postage, memberships, publications, meeting supports, staff travel reimbursements, 10% Fee to MCD for Management Services Agreement

**Community Supports include:** Educators, Tobacco Specialist, Champions for School Health Leadership Teams, Youth Engagement, UMA Outreach, Law Enforcement, Responsible Retailer Trainings, Drug Take Back efforts

**Robert Gordon, HCCA Board Treasurer: June 3, 2013**

Service Area: Augusta, Chelsea, Farmingdale, Fayette, Gardiner, Hallowell, Litchfield, Manchester, Monmouth, Mount Vernon, Pittston, Randolph, Readfield, Richmond, Vienna, Wayne, West Gardiner, Windsor, Winthrop

## Expanding Efforts in Local Public Health ~ HCCA Annual Meeting June 3, 2013 Board Secretary's Report to the Members and Guests

**HCCA Board Members:** Mary Frances Bartlett; Richard Dyer, Vice Chair; Robert Gordon, Treasurer; Patricia Hopkins, Kala Ladenheim, Secretary; Barbara Moss; Emilie Van Eeghen; Frederick White; Jim Wood, Chair; Mark Yerrick.

**Staff:** Joanne Joy, Shay Daily, Jane Hutchinson, Neill Miner, Renee Page, Karen Tucker, Jacqui Wainoris

<b>The Board of Directors</b>	<p>The HCCA Board of Directors oversees the policies and finances of the organization, designated as a 501 (c) 3 tax exempt corporation by the IRS. HCCA continues to serve as the local Healthy Maine Partnership (HMP) and a Drug Free Communities (DFC) coalition, and has added the SNAP-Ed programming along with a greater focus on local foods. Medical Care Development is contracted through a Financial Management Services Agreement to provide employment, IT and financial services.</p> <p>Organizations at the Board table include:</p> <ul style="list-style-type: none"> <li>• City of Augusta</li> <li>• Dyer Associates, Public Relations and Management Counseling</li> <li>• United Way of Kennebec Valley</li> <li>• Maine Health Policy dot info and MCD Public Health</li> <li>• Maine General/HealthReach Network</li> <li>• KVCAP</li> <li>• KVYMCA</li> <li>• An Independent Practice Psychologist</li> <li>• Maine-Dartmouth Family Medicine Residency/Family Medicine Institute</li> </ul> <p>Nominations at the 2013 meeting will add the following:</p> <ul style="list-style-type: none"> <li>• Alzheimer's Care Center</li> <li>• Maine State Credit Union</li> <li>• RSU #2</li> <li>• Winthrop YMCA</li> </ul>
<b>Meetings</b>	<p>The Board of Directors meets in regularly scheduled meetings six times per year, on the 4<sup>th</sup> Monday, from 3:30-6:00 in January, March, May, July, September, and November. Meetings are currently held in the offices of the United Way of Kennebec Valley... Current members are active and involved in providing direction, policy and programmatic oversight and budget review.</p> <ul style="list-style-type: none"> <li>• Financial staff was added on a part-time basis to help manage increasingly diverse funding.</li> <li>• A retreat was held to develop long-term and sustainable directions for programming driven by community priorities rather than legislative vicissitudes.</li> <li>• Several staff members received promotions.</li> <li>• The board identified youth and seniors as priority populations and initiated a search for board members to represent their interests.</li> </ul> <p>The Executive/Finance Committee meets prior to the full board meetings. Other Committees meet as needed.</p>
<b>Summary of</b>	<p>The convening and collaborating functions of HCCA, stated in our mission, have placed HCCA</p>

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<p><b>Programming</b></p>	<p>in an excellent position to apply for and be awarded grant funding for prevention efforts. Although HCCA has 5.8 staff members, and 10 Board Members, we have 92 active partners who have integrated changes in their organizations that on a day to day basis provide settings where healthier behavior is a viable option.</p> <p>The existing collaborations and integration of <b>Substance Abuse Prevention</b> lead to the five years of funding for Drug Free Communities Coalition [Southern Kennebec Alliance to Stop Substance Abuse (ASAP)]. Additional substance abuse funding includes programs to reduce underage drinking, the alternative to suspension program (SIRP) which has been expanded to young adults, a new focus on Marijuana Prevention, a Kennebec Sherriff’s collaboration to provide medication drop boxes at law enforcement sites across Central District, and to train lay people to recognize and help prevent overdose, and the law enforcement collaboration among all law enforcement entities in Southern Kennebec which resulted from early HCCA efforts and ongoing collaboration.</p> <p>HMP funding support for School Health Coordinators was eliminated, challenging HCCA activities to <b>Reduce Childhood Obesity</b>. Support for nutrition education services for community members eligible for the Supplemental Nutrition Assistance Program Nutrition Education program (<b>SNAP-ED</b>) form the core of the agency’s current efforts in this area. A September board retreat identified access to local food as a potential area for sustainable growth and two small grants were attained to allow assessment of the potential for establishing a <b>food hub</b>, identifying capacity for production and distribution of local foods, and interest for local communities to create a local Food Policy Council.</p> <p>Supports to improve the overall health of individuals with <b>Behavioral Health</b> Diagnoses expanded in July with the award of a Bingham Program Grant to integrate tobacco treatment into other modes of treatment as part of the statewide Project Integrate efforts, <a href="http://www.project-integrate.org">www.project-integrate.org</a> .</p> <p>HCCA has partnered with several programs funded under short-term Community Transformation grants, including a state project related to Active Communities, Healthy Maine Streets, which organizes small downtown businesses to join together for workplace wellness; and diabetes-related education in partnership with Maine General.</p> <p>HCCA created a Community Health Plan ~ Action Plan based on health data and the interest and needs of communities. The board identified four strategic issues and proposed an action plan. Not all actions would be led by the HCCA. Strategic issues and goals include:</p> <ul style="list-style-type: none"> <li>• Strategic Issue #1: How do we promote a Sense of Community? <ul style="list-style-type: none"> <li>○ Goal #1: People, organizations, and municipalities engage in collaborative efforts to improve quality of life and community efforts that promote sense of connectedness.</li> </ul> </li> <li>• Strategic Issue #2: How do we create healthy lives by integrating risk reduction behaviors into daily living? (PAN) <ul style="list-style-type: none"> <li>○ Goal #1. All persons in our communities will be engaged in healthy levels of physical activity and appropriate nutrition</li> <li>○ Goal #2. All persons in our communities have access to tobacco prevention, tobacco treatment and are free from tobacco exposure</li> </ul> </li> <li>• Strategic Issue #3 : How do we create healthy lives through access to behavioral and physical health services and resources <ul style="list-style-type: none"> <li>○ Goal # 1. All community members will have access to high –quality, affordable health care including behavioral health care and dental health care.</li> </ul> </li> <li>• Strategic Issue #4: How do we affect public policy, policies in organizations, and family policies?</li> </ul>
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	<ul style="list-style-type: none"> <li>○ Goal #1. State, local, organizational and family policies exist that support the public health priorities of the community</li> </ul>
<b>Sustainability</b>	<p>Core strength of HCCA is the ability to convene and collaborate with key partners. HCCA is not merely providing programming, but helping to build the capacity of each partner to integrate healthier, doable, viable options. Therefore much of the work will become sustainable over the course of years as it becomes the culture to be healthier. This takes time and support, but we are making progress.</p> <p>Funding was a roller coaster this year, with great uncertainty around state and federal budgets. At the beginning of the year, staff were shifted to partner agencies and working at reduced hours. Six months later, with major new funding related to nutrition education (SNAP-ED) and substance abuse prevention, a full complement was restored and new members joined the team. Three months later as the state-wide SNAP-ED contractor was slow off the mark; HCCA was keeping a watchful eye out for potential cash flow problems. Healthy Maine Partnership funding has fallen from 80-90% of the HCCA budget in 2007 to 23% as of November, 2012.</p> <p>HCCA staff's resourcefulness, resilience and leadership brought the agency through this year's budgetary crisis, and led the board to deliberate on alternative approaches to addressing its mission that might be more stable and sustainable. To that end, in a retreat in September, the board discussed broadening funding approaches. It charged the agency to explore opportunities related to enhancing use and distribution of healthy local foods. A small grant from Broad Reach Foundation supported planning and assessment activities. Western Kennebec Economic Development Association (WKEDA) provided additional resources as the economic impact of local farms and food fits their mission. The funding supported a series of community forums on the topic.</p> <p>Most of the funding other than HMP and DFC received to date do not pay for core functions of convening people to identify the most appropriate interventions, and then to collaborative address issues. The decrease in the Fund for a Healthy Maine (FHM), the Tobacco Settlement Money and not tax money, has reduced the capacity to be response to community members. The FHM continues to be diverted for other purposes than prevention, which in the past 11 years has helped Maine make strides as a healthier state.</p>
<b>Next Steps</b>	<p>The Board and staff continue to collaborate on ways to address the public health and disease prevention needs of our 70,429 community members. The future financial health of Maine surely is significantly improved by reductions in tobacco use and obesity, the two leading causes of chronic disease that the HMPs across the state are working to reduce.</p>
<b>Join HCCA</b>	<p>If you are interested in collaborating with HCCA, or joining our Board of Directors, please let us know.</p> <p>We are particularly interested in efforts across out 18 towns already focused on reducing tobacco use, improving physical activity and nutrition, partnering with health centers, and reducing substance abuse. Call Karen Tucker at 207 588 5012 or email at <a href="mailto:ktucker@mcd.org">ktucker@mcd.org</a> or visit the website at <a href="http://www.healthycommunitiesme.org">www.healthycommunitiesme.org</a></p>

*Submitted by Kala Ladenheim, Board Secretary, May 29, 2013*

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# Notes From Our Staff

## Expanding Efforts in Local Public Health

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### Highlights:

The Community Health Improvement Plan is in the implementation phase. Two years ago I highlighted the number of people and organizations that had provided input into the planning process; now we can start counting the number of people and organizations helping to meet our goals to:

1. **Expand regular communications and systems of communications with municipalities.** HCCA is connecting electronically and via in-person visits to towns to offer more resources and services tailored to each community, including an exciting Rural Active Living Assessment option along with 6 other opportunities.
2. **Expand collaboration and engagement with organizations that promote increased Access to Local Foods** by connecting with stakeholders and their plans. HCCA needed additional funds and people to do this, so we are very pleased to have received two small grants to pay for additional efforts.
3. **Increase the number of settings for tobacco treatment for two very different groups,** 1) youth through Not on Tobacco programming, and 2) behavioral health populations by integrating tobacco treatment into other treatment modalities via Project Integrate, [www.project-integrate.org](http://www.project-integrate.org). Project Integrate has also received funds to expand the work, and HCCA is serving as the fiscal home, staffs the project, and hosts an MPH student intern to expand those efforts.

### Moving Forward:

**The unifying element of HCCA's work is our mission to convene people, organizations and municipalities to collaborate on quality of life and public health issues.** So far, our primary prevention efforts have focused on healthier eating, adequate physical activity, decreasing tobacco use and exposure, and preventing substance abuse through the engagement of and collaboration among many local partners. The first 10 years of Healthy Maine Partnership (HMP)/Tobacco Settlement Funded efforts, the funding supported a high level of community engagement and coalition building. The current scaled down 'assignments' from the HMP grant are more prescriptive, providing fewer natural opportunities to engage in local planning processes. As a result, we need to be more creative in ways to continue, and fund, authentic local engagement. Our Access to Local Foods initiative is a bright star on that front.

**We continue to identify ways to expand public health efforts** with inquiries about Well Water and Arsenic, Farm to School, and Community Engagement efforts. We also continue to educate about the importance of re-establishing the programs we have lost via reduced Tobacco Settlement Fund including the School Health Coordinators and other programs

**And we promote the unique strengths of Maine's Public Health infrastructure,** the system of Healthy Maine Partnerships grounded in local input and engagement and meeting local needs.

*"It is unreasonable to expect that people will change their behavior easily when so many forces in the social, cultural, and physical environment conspire against such change."* Institute of Medicine. (2000). Promoting health: Intervention strategies from social and behavioral research (B.D. Smedley & L.S. Syme, Eds.). Washington, CD: National Academies Press.

## Expanding Efforts in Local Public Health

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### Highlights:

Transitions and changes are the highlights this year. Though we have experienced some funding losses (coordinated school health programming, early child care initiatives, worksite wellness, 5-2-1-0 Let's Go!, and programmatic support for many of our school, after school, and pre-school efforts, among others), we are **sustaining some key programming and infrastructure** (FoodCorps, school policy development, substance abuse prevention efforts, and more!).

Highlights for me this year include transitioning into my **new role as Assistant Director**. This allows me to become more involved with budgeting, staff supervision, program development, and managing the coalition. Being under Joanne's tutelage is educational, inspiring, and fun!

Accomplishments include a newly updated **tobacco policy at RSU 38 Maranacook Schools**, 5 new school folks trained as **Not On Tobacco teen tobacco treatment program** with implementers at Hall-Dale and the Augusta Boys & Girls Club, monthly convening of a new **School Action Team** for substance abuse prevention efforts, a **hands-on cooking work shop** for local school food service folks to better incorporate fresh, local foods into school meals, and work on expanding access to local foods including a **Food Hub feasibility study** and **4 community forums** to convene stakeholders to identify access points to local foods. I completed a course in **U.S. Food Systems: Perspectives from Public Health** at Johns Hopkins University to better inform our local food systems work and became a **National Diabetes Prevention Program Lifestyle Coach**.

### Moving Forward:

Moving forward, I anticipate ongoing collaborations with our schools and other community partners to continue to **make the healthy choice the easy choice**. We will continue to work on **school tobacco, substance use, and wellness policies** to provide healthful environments for our youngest community members to thrive. We will also work to make more public places like **agricultural fairs smoke free** and increase opportunities for **free physical activity through collaborative use agreements**. We will continue to implement **FoodCorps** programming in our neediest school districts as we welcome a new FoodCorps Service Member to HCCA in the fall.

Exciting new initiatives include SNAP (Supplemental Nutrition Assistance Program) nutrition education. **SNAP-Ed** allows us to provide nutrition education for our low-income community members to support the environmental and policy change initiatives we have been doing for years. My favorite new project is developing **community food councils** to create systems to improve access to local foods not only as a health and wellness effort, but also to as an economic development strategy.

I am embracing my new role as Assistant Director and hope to effectively help grow our coalition and expand our reach across our 18 towns to continue making connections and improving lives.

*"We have to challenge the idea that contamination is just the price of living in the modern world. Our bodies don't have systems to process plastics or flame retardants or pesticides. If contamination is the price of modern society, modern society has failed us."* Russell Libby, Organic farmer, Former MOFGA Executive Director, Campaigner for Pollution Free Local Food Economies: 1956 - 2012



Neill Miner, MSW

## Substance Abuse Prevention Program Manager

### Expanding Efforts in Local Public Health

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#### **Highlights:**

Transitions: Neill has transitioned from a full time position to two days per week with HCCA/ASAP, while directing the non-profit AdCare Educational Institute of Maine which is focused on work-force development across Maine's substance abuse service system. Neill has found that these two assignments have aligned well over the past several months, and the collaboration has provided a number of opportunities for the sharing of resources (including staff time, small amounts of funding, materials, and professional connections) to accomplish the organizational goals of both AdCare and HCCA/ASAP.

#### Accomplishments:

- Being awarded and beginning implementation of HCCA/ASAP's second, highly competitive federal award: the \$50,000/year x four years STOP Act grant, focusing on preventing underage drinking and related behaviors.
- The hiring and very successful orientation and phase-in of our new, full-time ASAP Project Coordinator, Shay Daily.
- Completion of one of our first Asset Development projects in cooperation with Winthrop Middle School: the Worksite Visits Project.
- Service as a member of the Attorney General's Task Force to Prevent the Misuse of Prescription Drugs, creating many opportunities to promote statewide awareness and support for community based prevention projects.

#### **Moving Forward:**

- Expanding efforts with local law enforcement to help prevent and reduce substance use. This includes an emerging agreement with the Kennebec Sheriff's Office and its dispatch center at the Department of Public Safety to initiate use of a text-tip service: providing the opportunity for area residents to report, anonymously, information about substance use issues.
- Connections made with our new Kennebec/Somerset County District Attorney, Maeghan Maloney, and the continuation of the PRIME for Life classes for youth caught and cited for underage drinking: over 100 individuals taught what they need to know in order to make less risky choices about substance use going forward.
- Continued dissemination, under the umbrella of the Maine Alliance for Substance Abuse Prevention and in cooperation with several statewide groups, of a powerful public education statement about the risks of marijuana use: what every community member needs to know about this rather popular drug of choice.
- Creation of a partnership with TimeWarner Cable, which now provides the opportunity for HCCA to tape monthly public health prevention messages for statewide dissemination. Messages include, but are not limited to, substance abuse prevention issues.

*"If you want to make a difference, work with those who are ready, on projects of common interest."*

Neill Miner, HCCA Substance Abuse Prevention Manager



Shay Daily, BS Community Health Education

Substance Abuse Prevention Coordinator

## Expanding Efforts in Local Public Health

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### Highlights:

Transitions: Shay was hired in October of 2012 to address and coordinate substance abuse prevention work. He describes substance abuse to be an “iceberg” health issue, saying, “Above the surface you see a seemingly small issue with a simple solution, educate the public on how substances affect your life and encourage community members to make healthier choices. But below the surface the vast complexity of associated behavioral factors and paradigms for addressing the issue lay hidden from view.” Shay is grateful for this opportunity to work with and learn from Neill Miner and other resources already in place to address substance abuse in our communities. He is excited to work and improve the lives of people by utilizing guidance and innovation to reduce substance abuse and improve the quality of life in Southern Kennebec County.

### Accomplishments:

Facilitated by-law adoption by the Alliance for Substance Abuse Prevention Leadership Team ; helped create and disseminate marijuana policy (first policy position of the group)

As a result of new funding from Substance Abuse and Mental Health Services initiated collaboration with the University of Maine at Augusta that has led to dissemination of substance abuse materials and providing prescription drug education to the UMA holistic nursing association. The partnership is expected to continue into the fall.

Responsible Beverage Server Trainings (RBS): held successful on-premise RBS training at the Kennebec Wharf with 33 participants and successful off-premise training at Pine State Beverage Company with 9 participants. Continued trainings throughout the year will bring more business partners to collaborate and reduce risky and unlawful sales.

Published a well received monthly substance abuse newsletter

HCCA and ASAP continue to partner with Maine’s National Guard. The Guard’s Counterdrug Task Force implemented the A.B.L.E program at Winthrop and Maranacook Middle Schools and Cony High School. The Guard’s presence helps reinforce the values of the coalition.

During the past year the Task Force discussed enforcement details which have resulted in illegal transportation violations and OUI arrests. HCCA/ASAP continues to provide funding for party patrols and compliance checks that help reduce local alcohol problems.

### Moving Forward:

HCCA/ASAP has been building its capacity to meet the members of the community “where they are” with the incorporation of greater utilization of social media channels. To do this they are using video and interactive presentations with emergent technologies to provide education and awareness about substance abuse in their community and how community members can get involved and be part of the greater effort to reduce the social costs and increase quality of life.

*“I am part of all whom I have met” Tennyson: Ulysses*



Karen Tucker, MSTD

## Communications and Outreach Coordinator

### Expanding Efforts in Local Public Health

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#### Highlights:

Transitions: Karen transitioned into a new position in January as the Communications and Outreach Coordinator.

Highlights have been focusing energies on assuming and shaping her new position. This new role is all about getting out in the community with information about our activities and offerings both physically and through e-newsletters, the website and other modalities. Balancing this new focus with coordinating programs proves to keep her busy! She remains the go-to person in the office to troubleshoot and help out with emerging needs and assist in meeting deadlines. Hers is still the voice you hear when you call us!

Accomplishments include: in the first half of the year, Karen supported HCCA through a tumultuous financial period resulting from Fund for Healthy Maine reallocations at the state level; coordinating the **Student Intervention and Reintegration Program (SIRP)** and the Prime for Life Program for ages 18-20. The combined programs delivered 22 classes and served 137 youth, sharing information that has been proven to result in Substance Abuse Prevention: becoming a **National Diabetes Prevention Program Lifestyle Coach**; going “on the road” with information about expanded services to communities including the **Rural Active Living Assessment (RALA)**, **Lead Poisoning Prevention**, the **Community Food Council**, **SNAP\_Ed**, **Tobacco Policy and Signage**, **Updating our Places to Be Active Guide** and **Public Health Communications**; Creating and supporting the publication of e-newsletters, recruiting community **chefs for our SNAP-Ed Cooking Matters** classes.

#### Moving Forward:

Moving forward, Karen envisions: increasing her presence in the communities we serve by going to visit each municipality and supporting them in conducting the RALA; collaborating with HCCA staff to ensure the Public Health work done in the communities is shared more widely; supporting the new SNAP-Ed program as it expands and grows; increasing her knowledge and use of technology to facilitate distant group collaboration, which translates to savings in travel costs across the state.

*“All great change in the world begins at the dinner table.”* Ronald Reagan

*“Change will not come if we wait for some other person or some other time. We are the ones we’ve been waiting for. We are the change that we seek.”* Barack Obama



Jane Hutchinson, BS Business

Project Assistant

## Expanding Efforts in Local Public Health

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### **Highlights:**

**Transitions:** Jane joined HCCA in January for two days a week. She has a B.S. in Business from the University of Maine. She is the proprietor of an accounting business established in 2001.

**Accomplishments:** Jane has been seamlessly integrated into the HCCA team and has assumed responsibility for the day-to-day management of the financial transactions of the organization through the Management Services Agreement between HCCA and Medical Care Development. This includes working with the federal on-line system for receiving funds, creating deposits, transfers and making sure all expenses are attributed to the accurate funding stream.

A major accomplishment has been, in conjunction with staff, the coordination of a uniform chart of accounts to be used with all funding streams.

### **Moving Forward:**

- Move towards a paperless financial record keeping system which will increase grant management efficiency by the staff.
- Streamline the accounts payable process to eliminate duplication and create greater efficiency.
- Collaborate with MCD and the tax accountant to accurately file the Federal 990 tax on time.



Jacqui Wainoris, MS, RD, LD

SNAP-Ed Coordinator

## Expanding Efforts in Local Public Health

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### Highlights:

The past year has been full of notable events for me. In May of 2012 I graduated from Case Western Reserve University with my Master's of Science in Public Health Nutrition and completed my dietetic internship. Upon graduation I moved from Cleveland back to my home state, Maine, to prepare for the Registered Dietitian (RD) Examination and work as a health coach. After passing the RD exam and becoming a dietitian, I was hired by HCCA to be the SNAP-Ed Coordinator in December. The past five months have been a whirlwind of transition for me and implementation for the SNAP-Ed program... efforts are going strong! **SNAP-Ed (the Supplemental Nutrition Assistance Program Education), also known as Food Stamp Education**, is a program that allows me to provide nutrition and physical activity education directly to HCCA's low income community members. I have thoroughly enjoyed making connections with community members and increasing their knowledge of the building blocks to a healthy lifestyle.

Accomplishments include: providing over 200 people with recipe cards containing the foods offered at a local **mobile food pantry**; newly implemented **container gardening classes** at the homeless shelter promoting the purchase of seeds and seedlings with SNAP benefits; outreach with community organizations resulted in the kickoff of the **Cooking Matters** program at the YMCA—with others planned there and elsewhere—with great positive response; and a fun, interactive MyPlate lesson for 2nd graders at the **Fresh Start—Kids are Cooking food and agriculture day** at Laura E. Richards Elementary School.

### Moving Forward:

In upcoming months, many more Cooking Matters classes are scheduled to begin through a variety of venues such as the Augusta Food Bank, Kennebec Behavioral Health, Motivational Services, the YMCA and Head Start. This summer I plan to be a familiar face at farmers markets with SNAP EBT machines to promote upcoming SNAP-Ed classes and provide recipe ideas for using local produce. In March, I became an National Diabetes Prevention Program (NDPP) Lifestyle Coach and will be delivering the program to prevent type 2 diabetes to the SNAP-eligible audience at HCCA in August. Ongoing collaborations with local schools will continue and new relationships will begin as the 2013-14 school year approaches.

I am loving my position as SNAP-Ed Coordinator and am eager to continue spreading the word about SNAP-Ed and all it has to offer to the SNAP eligible audience in southern Kennebec County.

*"Let food be thy medicine, thy medicine shall be thy food."* Hippocrates



Lily Joslin, BA in Environmental Studies

FoodCorps Service Member 2012-2013

## Expanding Efforts in Local Public Health

*making connections ~ improving lives*

### Highlights:

FoodCorps is a national organization with the mission to connect kids to local and healthy foods and build a community of future leaders in the fields of food and agriculture. The centerpiece of its work is an Americorps program that places passionate people in high-obesity, limited-resource communities for a year of public service. Lily is the second FoodCorps member HCCA has hosted. Raised in a farming community on the West Coast, she graduated from Bates College where she developed a passion for food and agriculture. In her role as FoodCorps Service Member she is building and tending school gardens, conducting hands-on nutrition education, and facilitating Farm to School programming that brings high quality, local food into schools. Last year, HCCA was one of the original 6 service sites (and 1 of 3 Healthy Maine Partnerships) to host a FoodCorps member in the state of Maine. Now in its second year, with 80 members in 12 states and a new fellowship program to provide additional support for Service Members, FoodCorps plans to expand to three more states next year and broaden their base to 130 members.

### Accomplishments:

**Fundraising:** a second grant from Maine Agriculture in the Classroom to support their initiative with FoodCorps; raised \$2000 through a month-long crowd-sourced funding campaign to support FoodCorps programming.

**Partnerships:** **regular programming** at Gardiner Regional Middle School, Pittston School, River View Community School, Helen Thompson School and Gilbert School; weekly programming at Cony Middle School's 8th grade Health class, and expanded to an 8th grade Science class and two Family and Consumer Science classes (Foods and Joy of Cooking) at Cony High School. Students received hands-on nutrition education while learning how to grow and prepare their own food; **local sourcing** continues to increase in HCCA service area school districts through maintaining partnerships between area farms and food service staff. In Gardiner, FoodCorps worked with MSAD 11 Student Nutrition Services to develop **long-term strategies** for incorporating summer processing of fresh local produce into their Farm to School program, which now regularly features spring greens and grass-fed beef from area producers.

In the Fall, **six-week cooking classes** were offered at Gardiner Regional Middle School with the Cooking Matters Program. In the Winter and Spring, FoodCorps partnered with the Maine Cooperative Extension EatWell Nutrition Program to develop Cook Plant Grow, a **weekly afterschool cooking, nutrition and gardening program** at GRMS. The garden provides produce for taste tests by Garden Club students and will become a resource to help teachers integrate agriculture into their curricula next year.

*"The ultimate goal of farming is not the growing of crops, but the cultivation and perfection of human beings." - Masanobu Fukuoka*



## Internships During FY 13

Emma Vaillancourt and Kalie Hess

### Expanding Efforts in Local Public Health

*making connections ~ improving lives*

#### **Emma Vaillancourt ~ BS Community Health Education**

**Internship: January-May 2013**

**Focus: NO BUTS! & Star Store Programs; Preventing Youth Tobacco Use**

Emma is passionate about preventing youth tobacco use and helping those who use tobacco to quit.

Her recent degree in Community Health Education from University of Maine at Farmington puts her in a great position to be able to make a big impact in Maine in her current position as Tobacco and Substance Abuse Prevention Coordinator at Greater Somerset Public Health Collaborative; she certainly made an impact at HCCA.

Emma's internship focused on contacting over 90 Tobacco Retailers in the 18 towns served by HCCA, identifying whether each store was currently using Maine's NO BUTS! Program to train their staff and provide appropriate materials to prevent youth tobacco purchases. She drafted scripts for phone calls and plunged in. She drafted letters, made face-to-face visits, provided encouragement and technical assistance and even learned how to graciously accept a few No's here and there.

She identified 2 stores with exemplary practices of limiting advertising and obvious displays of tobacco products and was always excited about the power of prevention that our local retailers have.

Additionally, Emma spent time testifying at the Joint Committee on Health and Human Services of the Legislature to support tobacco-free policies for all Maine University and Community College Campuses and worked with the Center to Tobacco Independence to increase their information sharing about Berger's Disease.

#### **Kalie Hess, BA Anthropology, MPH Social Behavior & Community Health (expected December 2013)**

**Internship: May-August, 2013**

**Focus: Project Integrate! Integrating Tobacco Treatment into Behavioral Health Settings**

Kalie is a Master's student at the University at Albany and joined HCCA for her internship requirement through her program. Originally from Orono, she is very excited to be back in Maine for the summer! Kalie will be working on Project Integrate, an initiative to incorporate tobacco cessation into behavioral health treatment modalities in Kennebec County. Her work with Project Integrate will consist of providing trainings and support for local behavioral health treatment centers. Goals of the internship include training 100 people to be able to help others quit tobacco at local organizations, providing support for policy changes at these organizations with regards to tobacco cessation treatment as a priority, and evaluating the approach taken during this time period to see what is most effective with regards to integrating treatment into these organizations. At the end of the summer she will be drafting up a case study of the approach taken so as to better serve others looking to make similar policy changes and to support further grant funding requests.