

5/2/2023

Tuesday, April 25, 2023 9:44 AM

Group Meeting Norms

- When you join, please chat-in or say your name.
- State your name before speaking.
- Verbalize messages in chat.
- Speak for yourself only, using “I” statements: “I do not like...” instead of “we do not like...”
- Raise your hand to speak and use your camera when possible.
- Closed Captioning is available through Teams by clicking on More Actions and selecting “Turn on live captions”.
- Meeting notes will be sent in pdf format at the end of each meeting.
- All meetings will be recorded

Vision

An equitable, just, and well Baltimore where everyone has the opportunity to be healthy and to thrive.

Mission

To protect health, eliminate disparities, and enhance the well-being of everyone in our community through education, coordination, advocacy, and direct service delivery.

LHIC Purpose

1. The coalition’s purpose is to identify and address Baltimore City’s most **pressing structural health disparities** by bringing together a **multisector group**, with representation from community, health, and government.
2. Requires the **shared leadership** of healthcare, government, organizations, community members, and representatives from underserved communities.
3. Each LHIC identifies **3 health priorities** and works to address through a diversity of perspectives, collaboration, and pooling resources.

Attended By

Adeola Alayande, Andres Johnson, Aaron Kaufman, Briana Wagner, Devonne Franklin, Elise Bowman, Kimberly Mays, Mary White, Matt Morgan, Rachel Galkin, Rhonda Ford Chatmon, Sadiya Muqueeth, Alice Siawlin Chan, Sonya Jones, Stephane Bertrand, Tamara Green, Chris Crabbs

Goal: Reduce the prevalence of diabetes in Baltimore City

Related Activities	Today's Discussion	Notes and Next Steps
<ul style="list-style-type: none"> • Increase the number of partnerships btw. Community and DPP/ DSM • Increase the number of referrals to these programs 	<p>1. INTRODUCTIONS: from any new attendees. Please share: name, organization, what you would like to get out of your participation, any shared goals, and what you would like to contribute.</p>	<p><u>Andres Johnson</u> - Film student at Stevenson University. Making a 3-5 minute documentary about diabetes resource access in Baltimore. Interest in diabetes test strip access.</p> <p><u>Aaron Kaufman</u> - Central Baltimore Partnership. Filling in for Ishaan Pathak. Community development work for improved health outcomes.</p> <p><u>Sadiya Muqueeth</u> - Chief Health Policy Officer at BCHD. Working on policy efforts being put forward.</p>
<ul style="list-style-type: none"> • Increase the number of partnerships btw. Community and DPP/ DSM • Increase the number of referrals to these programs 	<p>1. FOLLOW-UP: The AHA- DPP/ DMST partnerships. Angela Ginn-Meadow and Rhonda Chatmon will provide an update about Virtual Chef-led cooking instructions and potential collaboration with the DPPs/ DMSTs.</p>	<p>Ask: Get a representative from Medstar, UMD, LifeBridge, and Hopkins to meet for 1 hour and craft goals and impact of video series.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Elise: reach out to main contacts for each hospital to set up a meeting.

<ul style="list-style-type: none"> • Increase the number of partnerships btw. Community and DPP/ DSM • Increase the number of referrals to these programs 	<ol style="list-style-type: none"> 1. FOLLOW- UP: Engaging Community Members. Please share the flyer. 2. Invite a community member 	<p>Secured funding to pay \$30/hour for community members. Recruitment plan is together.</p> <p>Asks:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Share our flyer with your organization <input type="checkbox"/> Bring someone from your PFAC or community to this meeting
<p>Utilize data to understand the problem and improve our response</p>	<ol style="list-style-type: none"> 1. DISCUSSION: Shared Measures of Success. What are 1-2 Outcome Measures that we want to share ACROSS all of the diabetes work to share with the larger LHIC? This should be data that <ol style="list-style-type: none"> 1. Reflects the outcomes of both regional partnerships AND other diabetes stakeholders, 2. Can be/ already is being collected and tracked, 3. Can be shared with the LHIC on a regular basis (monthly/ quarterly). <p>Ex: Review proposed dashboard and metrics for feedback and input.</p>	<p>Thoughts:</p> <ul style="list-style-type: none"> • Include other races and ethnicity data • Proximity to fresh food • Healthy habits and progress over time • Diabetes social determinants data (food access) • Income • Enrollment in FoodRX programs <ul style="list-style-type: none"> <input type="checkbox"/> Elise: Follow up with Rachel from LifeBridge for data on Food as Medicine. <input type="checkbox"/> Elise: Follow up with partners re: access to program enrollment data and target goals.
<p>Utilize data to understand the problem and improve our response</p>	<ol style="list-style-type: none"> 1. REVIEW: Diabetes map. Showing 1. Diabetes Prevalence, 2. Obesity, 3. Rates of primary care visits, 4. DPP/ DSMT locations, 5. other stakeholder 	<ol style="list-style-type: none"> 1. **To complete the Diabetes Map, we will need a list of stakeholder. Please send Stephane a list of your stakeholders with their roles, so they can be mapped and shared with the workgroup.