



## Executive Team Meeting

January 16, 2015

9:00 to 11:00 am

### Introductions

#### Oral Health Initiative Update

- Greg reports that he, Nancy DuMont, Sherry Thornberg, and Dana Micholvic have developed a plan for using public health dental hygienist to provide care for uninsured adults in community-based locations and are three to four months from pilot activities.
- A contract amendment with the NH DPHS is underway to fund planning around access to oral health care. This is funding that this group determined should be directed at oral health care when given the choice.

#### Collaborative Action

##### *Developing Response to DPHS Request for Proposals*

We have four program areas to discuss and determine if/how to request funding. Application is due February 12. Alice provided issue briefs for each program area to provide parameters for our decisions. Alice recommended we discuss in terms of 1) meeting regional priority; 2) feasibility (muscle, time); 3) what impact activities would have on lasting capacity in the region.

Greg and Alice have different understandings of the project periods for this funding, which needs to be clarified before plans are final. However, several program areas include performance measures that clearly identify end dates.

#### Community Readiness Assessments to Increase Access to Safe and Affordable Physical Activity

- Nate Miller (UVLSRPC) identified Enfield, Lyme, and Newport as communities that may be interested in the readiness assessment. Kristen Coats and others thought Canaan might also be ready and that wrapping in Orange, Grafton, and Dorchester might be beneficial; the rail train might serve as a unifying element to build off.
- Sullivan County is willing to have us request funds to do this project in both regions, given that UVLSRPC covers both areas.
- Alice mentioned that MVHI may be able to add to the mini-grant fund to make more funds available. We might also try to build a mini-grant fund that would go beyond this project period and allow us to use the model with other communities, thus creating sustainable capacity.
- Consensus was to apply for this portion of funds, discuss with Sullivan County, and try to start with Enfield, Lyme and Newport. Karen Borgstrom is involved with a group in Lyme (Lyme Cares?) and will help connect us to that group to make sure we are leveraging existing efforts. Will work with Mascoma Recreation Coordinator in Enfield.

#### Preventing Older Adult Falls

- Discussed relative benefits of TJQ:MBB and MOB programs and agreed that building capacity of MOB made the most sense given the project time period.
- There are two instructors available in the region which allows us to expand that pool.

- This would give us the opportunity to train leaders for senior centers that are not already served, senior housing sites, and recreation departments. Julia recommends reaching out to Dartmouth's FLIP program.
- We discussed building the flow of participants from MOB to TJQ:MBB. Greg suggested seeing if CATV would consider airing a weekly TJQ:MBB program so that seniors could follow along from their own homes.
- Consensus was to apply.

#### Preventing Suicide

- Clarification on Connect trainings:
  - Connect is largely focused on suicide issues among youth; There are four plus trainers in the Upper Valley now for Prevention training; The training can be delivered in four hours for general audiences and six hours for gatekeepers; Postvention is a four hour training and we currently have no trainers; and Trainers are supposed to do at least one training per year.
- After discussion, we came to consensus to:
  - Start with team that currently exists (and expand it);
  - Offer a postvention training for the team and open to others;
  - Select a few people for postvention Train-the-Trainer.
  - We should consider planning one 8 hour day to do both pre- and postvention training for the team.
- CALM training is available through the Injury Prevention Center, with Elaine Frank as trainer. This is a good chance to target law enforcement, bar association, and Halls of Hope mental health court personnel.

#### Preventing Health Effects from Severe Weather and Climate

- Nate Miller says UVLSRPC can take this on; he thinks June 30<sup>th</sup> deadline for the draft plan is tight but that the Upper Valley already has data that no other part of the state has.
- Julia Griffin thinks the RCC (emergency planning) is a natural key partner.
- UV Adaptation Workgroup is also willing to support and help, bearing in mind they have no staff or dedicated resources.
- Karen Borgstrom suggested Vermont Law School as a source of interns and offered to make connection.
- Upper Valley Strong is also an important partner/resource.
- We explored the question of whether this is something we need to do? Determined that we have had multiple weather related problems in the past few years and that communities have focused planning on infrastructure concerns. This is a good opportunity to look at this from the health perspective.

In final discussion of relative weight of each of the programs, if we cannot apply for all of them, the group agreed that priority would be 1) Falls, 2) Suicide, 3) Physical Activity. The funding for Health Effects of Climate Change is separate, so that one we can definitely apply for.

#### Next Steps:

Greg and Alice will reach out to people who are potential partners and subcontractors. If we contact you, please respond quickly as the timeframe is very short.