

# 2020 Community Health Needs Assessment FY21-FY23 Implementation Plan

In accordance with federal law and regulation, and in alignment with CalvertHealth Medical Center’s mission and values, set forth below is our 2020 Community Health Needs Assessment Implementation Plan (the “2020 CHNA Implementation Plan”).

CalvertHealth Medical Center has partnered with numerous community leaders throughout Calvert County, through various coalitions and collaborative relationships that are in place in the county. The CalvertHealth Medical Center Board of Directors has formally adopted the CHNA as its own. A full report of the 2020 CHNA can be found at: <https://www.calverthealthmedicine.org/Uploads/Public/Documents/CommunityNeeds/CalvertHealth%202020%20CHNA.pdf>. Any comments or questions should be addressed to Mary Golway, Director of Education & Training and Community Wellness at [mary.golway@calverthealthmed.org](mailto:mary.golway@calverthealthmed.org), or 410-535-8134.

## MISSION

CalvertHealth’s trusted team provides Southern Maryland residents with safe, high quality health care and promotes wellness for a healthy community.

## VISION

We provide exceptional care and make a difference in every life we touch.

IMPLEMENTATION STRATEGY:

The Community Health Needs Assessment (CHNA) revealed that Calvert County had significant community needs in 11 areas, which are listed in Figure 1.

## Prioritization Process

### Prioritized Significant Health Needs

Figure 1. SIGNIFICANT HEALTH NEEDS

CalvertHealth Medical Center developed a decision-making team to prioritize the significant community health needs of Calvert County, using an online tool, and considering several criteria:

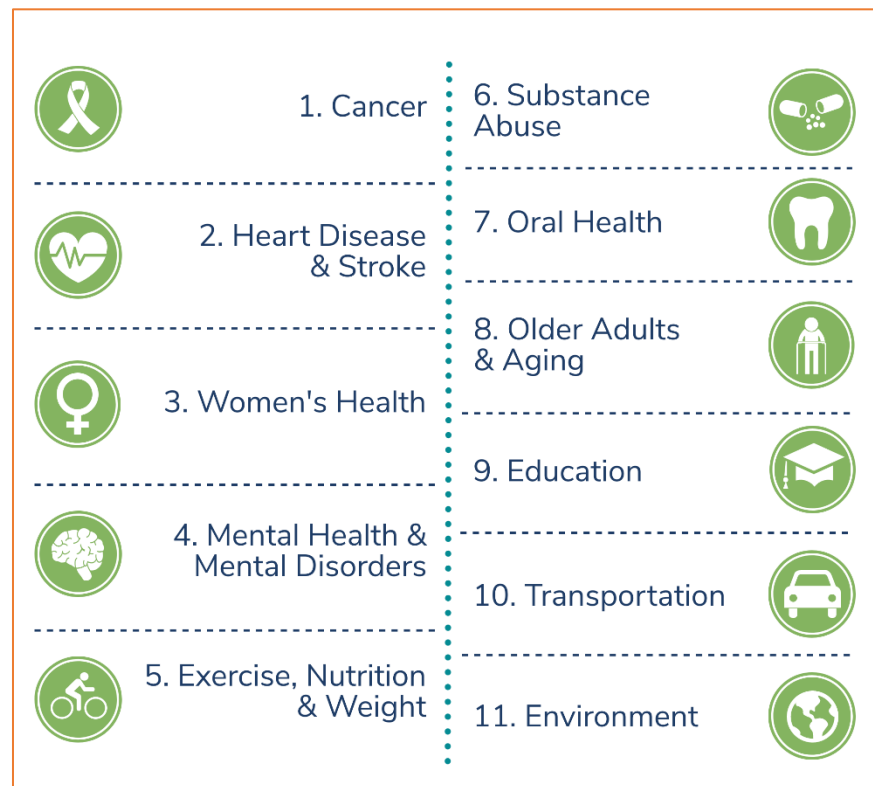
- Alignment with CalvertHealth’s strengths, priorities, and mission
- Alignment with national, state or local priorities
- Disparities impact
- Feasibility of intervention
- Consequences of not intervening

Completion of the online exercise resulted in a numerical score for each health need that correlated with how well each health need met the criteria for prioritization. After reviewing the results, CalvertHealth’s leadership decision-making team met to narrow the list to four priority health areas that will be considered for subsequent implementation planning. The four top health priorities for CalvertHealth are:

1. **Cancer**
2. **Heart Disease & Stroke**
3. **Mental Health & Mental Disorders**
4. **Exercise, Nutrition & Weight (including Obesity)**

### Non-Prioritized Significant Health Needs

The remaining significant health needs that emerged from the CHNA and a review of the primary and secondary data were not explicitly prioritized for the purpose of implementation planning, however they are interrelated to the selected priority areas and are interwoven into this Implementation Strategy and in future work addressing health needs through strategic collaboration with community partners.



## COVID-19 Impact

On March 13, 2020, a U.S. national emergency was declared over the novel coronavirus outbreak first reported in the Wuhan Province of China in December 2019. Officially named COVID-19 by the World Health Organization (WHO) in February, WHO declared COVID-19 a pandemic on March 11, 2020. Upon completion of this report in September 2020, the pandemic was still very much a health crisis across the United States and in most countries.

Key Informant interviews and a community-wide online surveys were used to capture insights and perspectives of the health needs of Calvert County. Included in both the key informant interview guide and survey tool were questions specific to COVID-19.

The following table is a summary of the insights from community survey respondents and community experts gathered in May and early June 2020 regarding the impact of COVID-19 on the community.

### COVID-19 PRIMARY DATA INSIGHTS

Community Survey Insights	Key Informant Insights
90% of respondents felt “very” or “somewhat” informed about COVID-19	More isolation and loneliness were felt, especially with older adults
47% of respondents experienced “moderate” to “major” impact in feeling alone/isolated during the stay at home orders	There was heightened fear and anxiety in school children and their parents when schools closed
49% felt “moderate” or “major” impact of not knowing when the pandemic will end and having a lack of control	Food insecurity rose at the start of the stay at home orders and then diminished when services resumed
	Organizations were innovative and worked together to keep serving the community

## Implementation Strategy

The following section is a description of the CalvertHealth Medical Center’s Implementation Strategy for 2020-2023 and will give some additional information about each of the top health topics in order to understand how findings from the secondary and primary data led to each becoming a priority health issue for CalvertHealth. It will include primary objectives, strategies and actions to achieve the objectives, target populations, key partners, tactics to be utilized, and the plan to evaluate these actions for the four areas of prioritized need.

For many of these objectives and strategies, year 1 of the implementation period will establish baseline metrics, which will be built upon in the subsequent 2 years of the implementation plan. Specific groups (such as committees and task forces) will be delegated to collaborate on implementation and will develop more specific metrics and goals to be included in annual reporting. For each of the four priority areas, the program status, and most recent outcomes will be evaluated and reported on annually. The continued restrictions due to the COVID-19 pandemic will challenge the ability to provide some face to face programs that we would normally provide throughout the community. This plan is being written with the expectation that some face to face programs will return in a phased-in approach over the next 3 years, but not knowing the timeline for that return, or the modifications that may need to be considered.

### Prioritized Health Topic #1: Cancer

## Cancer

Secondary Data Score: **1.70**



### Key Themes from Community Input



- Lack of knowledge of available screenings
- Nearly 25% of survey respondents think cancer is a prevalent health issue

### Warning Indicators



- Age-Adjusted Death Rate due to Breast Cancer
- Age-Adjusted Death Rate due to Prostate Cancer
- Melanoma Incidence Rate
- Cervical Cancer Incidence Rate
- Breast Cancer Incidence Rate

### Primary Data

Approximately 25% of survey respondents selected Cancer as a prevalent issue in the community, while 3% of respondents selected Cancer as a personal health issue. Key informant interviews noted a lack of knowledge about available screenings in the community, which they believed is contributing to the higher cancer incidence and rates reported in the secondary data. Lack of health insurance coverage for preventative screenings, such as mammography for women younger than 40, was noted as a barrier to catching breast cancer at an earlier stage. Additionally, key informants mentioned historically high levels of tobacco use in the county, especially with older community members, which could contribute to the higher cancer rates.

**Secondary Data**

From the secondary data scoring results, Cancer was identified to be a top health need in Calvert County. There are many cancer indicators that raise concern for Calvert County. Calvert County has a higher rate of Breast Cancer Deaths, Prostate Cancer Deaths, Melanoma Incidence, Cervical Cancer Incidence, Breast Cancer Incidence, Oral Cavity and Pharynx Cancer Incidence, Cancer in the Medicare Population, and Colorectal Cancer Incidence than both the overall state of Maryland and the U.S. Further, Calvert County is failing to meet the Healthy People 2020 targets for Age-Adjusted Death Rate due to Breast Cancer, Age-Adjusted Death Rate due to Prostate Cancer, and Cervical Cancer Incidence Rate.

<p><b>Priority Area: Cancer</b>  <b>Primary Objective (s):</b></p> <ol style="list-style-type: none"> <li>1. Early detection and treatment for cancers, increased access to screening and treatment</li> <li>2. Promote healthy lifestyle and support for cancer survivors</li> <li>3. Reduce tobacco use in school age population, reducing negative health impact, including risks of lung cancer related illness</li> </ol>				
Strategy/Action	Target Population	Key Partners	Tactics	Evaluation
Provide cancer screening and education programs in the community.	Calvert County residents at risk for cancers.	<ul style="list-style-type: none"> <li>• Calvert Health Oncology</li> <li>• Calvert Community Dental Clinic</li> <li>• Maryland Dept. of Health Office of Oral Health</li> <li>• Cancer and Tobacco Coalition (Health Department)</li> <li>• Calvert County Health Department</li> <li>• Local Primary Care Providers</li> <li>• American College of Surgeons COC</li> <li>• Cigarette Restitution Fund</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to offer community Events/Health Fairs, Mobile Health Unit that include screening opportunities</li> <li>• Coordinate work of the Tobacco and Cancer Coalition and CalvertHealth Cancer Committee to identify where goals and services align, and where there are additional opportunities to improve screenings and referrals to community</li> <li>• Develop cancer screening “scorecard” tool for community members detailing recommended screenings and preventative care, and including information on how to access free and low cost screenings.</li> <li>• Continue oral screenings and education on HPV infection prevention, and related risk for cervical</li> </ul>	<p>Annually track participation rates in screenings and referrals of positive patient findings. Track outcomes of referred patients, when available.</p>
Provide Oral Cancer Screening to people who smoke, or are over 40.	Calvert County residents who smoke, or are over 40 years of age			
Provide Human Papilloma Virus (HPV) education to dental patients.	Calvert County residents who utilize the services of the Calvert Community Dental Clinic			
Expand existing school-based Oral health screenings in the community.	Low income children who attend Title 1 schools in Calvert County			

<b>Priority Area: Cancer</b> <b>Primary Objective (s):</b> <ol style="list-style-type: none"> <li>1. Early detection and treatment for cancers, increased access to screening and treatment</li> <li>2. Promote healthy lifestyle and support for cancer survivors</li> <li>3. Reduce tobacco use in school age population, reducing negative health impact, including risks of lung cancer related illness</li> </ol>				
Strategy/Action	Target Population	Key Partners	Tactics	Evaluation
			cancers for patients at the Calvert Community Dental Clinic <ul style="list-style-type: none"> <li>• Expand dental outreach to include 2 Title 1 middle schools</li> </ul>	
Continue to expand survivorship programs.	Patients undergoing cancer treatment, and after cancer treatment.	<ul style="list-style-type: none"> <li>• CalvertHealth Oncology</li> <li>• CalvertHealth Cancer Committee</li> <li>• CalvertHealth Outpatient Rehabilitation</li> <li>• Calvert County Health Department</li> <li>• Local Primary Care Providers</li> <li>• American College of Surgeons COC</li> </ul>	Expand nutritional services, rehabilitation services, and other lifestyle programs to be provided to cancer patients, survivors, and their families.	Evaluate annually the number of services offered, participation rates, and feedback from participants.
Expand Tobacco Road Show (TRS) program to educate children on risks and health impact of tobacco use, including smoking and vaping.		<ul style="list-style-type: none"> <li>• Calvert County Public Schools</li> <li>• Calvert County Health Department</li> <li>• Calvert County Sherriff's Dept. Resource Officers</li> <li>• CalvertHealth Oncology</li> <li>• Health Ministry Network</li> </ul>	Expand TRS from middle school only to all 4 county high schools and at least 1 local church youth group, expanding the number of children who are educated.	Evaluate annually number of schools, community members, and youth groups participate in program.  Evaluate annually the number of students that report smoking and vaping.

## Prioritized Health Topic #2: Heart Disease &amp; Stroke

# Heart Disease & Stroke

Secondary Data Score: **1.54**



## Key Themes from Community Input



- Nearly 15% of survey respondents noted high blood pressure as a personal health issue
- For survey respondents representing communities of color, high blood pressure was the top personal health issue they noted

## Warning Indicators



- Ischemic Heart Disease: Medicare Population
- Age-Adjusted Death Rate due to Heart Disease
- Age-Adjusted ER Rate due to Hypertension
- High Blood Pressure Prevalence
- Hyperlipidemia: Medicare Population

### Primary Data

Survey respondents noted Heart Disease & Stroke as a need to address both personally and in the community. High blood pressure was selected by 14.93% of respondents as a personal health issue. When broken down by race, survey respondents representing communities of color selected high blood pressure as the top health concern for themselves and the community. Heart Disease & Stroke was selected by 16.84% of survey respondents as a community health issue. Additionally, survey respondents chose “chronic disease management services” as a resource needed in the community. Key informants stated chronic disease management would help those living with heart disease. Key informants cited transportation issues, especially among older adults as a barrier to accessing chronic disease management services. For this reason, many of the key initiatives will be centered in places such as the senior centers, mobile health unit, and places of worship in the community.

### Secondary Data

From the secondary data scoring results, Heart Disease & Stroke was identified to be a top health need in Calvert County. It had the fifth highest data score of all. Looking at the secondary data, the Medicare population is disproportionately affected by Heart Disease & Stroke in Calvert County. The county has higher percentages than both the state of Maryland and the entire U.S. for many indicators in this category. Given that Older Adults & Aging was one of the top five identified significant health needs for Calvert County based on the data synthesis, and that the population of Calvert County skews slightly older as well, these factors will be integrated into the implementation strategy for the prioritized Heart Disease & Stroke topic area. Once COVID-19 guidance recommends that point of care testing and more preventative services can resume, expanded screenings for heart disease and stroke will be available on the mobile health unit.

<b>Priority Area: Heart Disease and Stroke</b>				
<b>Primary Objective (s):</b>				
<ol style="list-style-type: none"> <li>1. Improve heart health, and expanded resources to obtain medications to treat hypertension and high cholesterol.</li> <li>2. Increase medication compliance by increasing knowledge and understanding of the purpose of the medications.</li> <li>3. Increase safe activity level and promote continued healthy lifestyle behaviors of people who have suffered from heart disease and stroke</li> <li>4. Increased access to screening and treatment for heart disease &amp; stroke</li> <li>5. Target at-risk and most vulnerable populations, and those disproportionately affected by heart disease &amp; stroke</li> </ol>				
<b>Strategy/Action</b>	<b>Target Population</b>	<b>Key Partners</b>	<b>Tactics</b>	<b>Evaluation</b>
Provide community resources to increase understanding of medications for management of blood pressure and cholesterol, increase access to medications, and increase compliance.	Calvert County Residents for whom medication for blood pressure and/or cholesterol management has been prescribed	<ul style="list-style-type: none"> <li>• Calvert County Office on Aging</li> <li>• CalvertHealth Pharmacy</li> <li>• Local Primary Care Providers</li> <li>• Calvert County Health Department</li> <li>• Seedco*</li> </ul>	<ul style="list-style-type: none"> <li>• Increase pharmacist’s involvement in the Ask-the-Expert program on the Mobile Health Unit, and at Senior Centers. Offer at least monthly visits for medication management and reconciliation.</li> </ul>	Track # of programs offered annually, # of persons seen, and # of referrals for medication assistance.
Continue Cardiac Rehab program	Patients that have been hospitalized for heart disease and stroke	<ul style="list-style-type: none"> <li>• Local Primary Care providers and cardiologists</li> </ul>		Track # of hospitalizations that program patients experience in 6 months after completing cardiac rehab program
Expand Mobile Health Unit services to include cholesterol screening along with a consultation with a local PCP.	Calvert County residents at risk for high cholesterol, heart disease, and stroke.	<ul style="list-style-type: none"> <li>• Local food pantries</li> <li>• CalvertHealth Primary Care</li> <li>• Seedco*</li> <li>• Translation services</li> <li>• Health Ministry Network</li> </ul>	<ul style="list-style-type: none"> <li>• Expand services provided on Mobile Health Unit and increase # of clinics offered in community.</li> <li>• Have resources available during clinics to address access to care challenges, and insurance coverage.</li> </ul>	<p>Track annual enrollment in health insurance, and scheduled appointments with PCP.</p> <p>Track # of people getting POC testing ** see reference above regarding POC testing during pandemic</p>
Utilize the Health Ministry Network members and active partners to provide expanded outreach to more African American and Latino community members	African American and Latino community members	<ul style="list-style-type: none"> <li>• Calvert County faith communities</li> <li>• Holy Cross Health – Faith Community Network</li> </ul>	<ul style="list-style-type: none"> <li>• Increase diversity of Health Ministry Network members and active partners</li> <li>• Engage Health Ministry Network to bring heart disease and stroke education to their parishioners, and to expand reach to minority population of Calvert County.</li> </ul>	<p>Attendance at monthly Health Ministry Network meetings</p> <p>Track parish-based educational programs and # participants</p>

\* Seedco provides assistance in determining eligibility for, and enrolling in the Maryland Health Connection. For more information about Seedco’s services, visit: <https://www.seedco.org/maryland/>



## Prioritized Health Topic #3: Mental Health &amp; Mental Disorders

# Mental Health & Mental Disorders

Secondary  
Data Score: **1.52**



## Key Themes from Community Input



- Mental health and behavioral health services was the most commonly selected resource needed in the community
- Key Informants believe there is a need for mental/behavioral health interventions in school

## Warning Indicators



- Age-Adjusted Hospitalization Rate due to Adolescent Suicide and Intentional Self-inflicted Injury
- Age-Adjusted Hospitalization Rate due to Pediatric Mental Health
- Age-Adjusted Hospitalization Rate due to Adolescent Suicide and Intentional Self-inflicted Injury

## Primary Data

Mental Health, including Behavioral Health and Stress, was selected by 29.12% of survey respondents as a health issue in the community. All key informants spoke of mental health issues in the community, the need for more services including inpatient and outpatient programs, and specifically expressed concern for school-aged children. Key informants stated that fear and anxiety among children and their parents was high when schools were closed due to the stay-at-home orders related to the COVID-19 pandemic. When this implementation plan was initiated, the 2020/2021 school year had begun with public schools providing almost all virtual instruction. At the time of this document being published, some students had returned to the physical classroom and school buildings, but many had not. Additionally at the time of writing this document, the pandemic is on a second wave, and there is a possibility that schools may return to mostly virtual. This ever-changing environment may serve to increase fear, anxiety, and mental health issues. Virtual learning will also challenge the ability of healthcare professionals to provide some face to face programs that would normally be provided to school age children in the community. This plan is being written with the expectation that some face to face programs will return over the next 3 years, but not knowing the timeline for that return.

“Services for Adolescents”, including smoking and vaping education/cessation, healthy lifestyle and mental health support, was chosen by 39.55% of survey respondents as services the community would benefit from. Smoking, vaping, and tobacco use is being addressed in the Cancer priority section. “More Mental Health and Behavioral Health Services” was noted as the most needed resource for the community (as selected by 44.66% of survey respondents). Additionally, the need for “Emotional Wellness and Stress Reduction Services” was selected by 28.97% of survey respondents. Key informants expressed concern about the long waits to access mental health services.

**Secondary Data**

From the secondary data scoring results, Mental Health & Mental Disorders was identified to be a top health need in Calvert County. The secondary data reveal that Mental Health & Mental Disorders affect children and adolescents in Calvert County. The Rates of Hospitalizations due to Adolescent Suicide and Intentional Self-Inflicted Injury as well as Pediatric Mental Health are more than double the overall Maryland state values. Furthermore, the Death Rate Due to Suicide in Calvert County is not only higher than both Maryland and the U.S., but also has 16.5 deaths per 100,000 population, which is higher than the CDC Healthy People 2020 target of 10.2 deaths per 100,000 population.

Substance Abuse was one of the top 11 health needs identified on the community needs assessment. Because it is very closely related to Mental Health and Mental Health disorders, strategies around addressing substance misuse and abuse will be addressed under the priority area of Mental Health and Mental Health Disorders.

<b>Priority Area: Mental Health &amp; Mental Disorders</b> <b>Primary Objective (s):</b> 1. Improve services and resources to help combat bullying and prevent suicide. 2.				
Strategy/Action	Target Population	Key Partners	Tactics	Evaluation
Increase awareness and prevention techniques for suicide & bullying in school age children.  Increase identification of children at risk for suicide and provide appropriate referral and intervention	School age children in Calvert County	<ul style="list-style-type: none"> <li>Calvert County Public Schools</li> <li>Local family practice and pediatrician offices</li> <li>Calvert County Health Department</li> <li>CalvertHealth Behavioral Health Unit</li> <li>Calvert Hospice</li> <li>Health Ministry Network</li> </ul>	<ul style="list-style-type: none"> <li>Bring tools and resources to teachers, family practice and pediatrician practice offices, and other community stakeholders.</li> </ul> Resources suggested: 1. Mental Health first aid training: <a href="https://www.mhamd.org/what-we-do/training/mental-health-first-aid-maryland/">https://www.mhamd.org/what-we-do/training/mental-health-first-aid-maryland/</a> 2. BHIPP 3. Adverse Childhood Events screening tool  <ul style="list-style-type: none"> <li>Initiate Town Hall meeting in high schools to address mental health and suicide</li> </ul>	Implementation and adoption of appropriate tools       # of events scheduled, and number of attendees
Collaborate with community partners to address behavioral health and substance abuse.	Calvert County residents	<ul style="list-style-type: none"> <li>Local Behavioral Health Advisory Council</li> </ul>	<ul style="list-style-type: none"> <li>Create a Mental Health and Substance Abuse subcommittee of the Community Health Improvement Roundtable</li> <li>Conduct a crosswalk to identify where goals and strategies align among various community agencies addressing Behavioral Health and Substance abuse, and where gaps in care and services may be.</li> </ul>	Implementation of subcommittee  Actionable goals and metrics will be set by subcommittee, and a dashboard will be created to track trends and attainment of goals  Review of crosswalk with resulting gap analysis
Collaborate with community partners to increase awareness of and resources for	Adult Calvert County residents over the age of 50.	<ul style="list-style-type: none"> <li>Calvert County Office on Aging</li> <li>Local Primary Care Providers</li> <li>Calvert County Health Department</li> </ul>	<ul style="list-style-type: none"> <li>Identify tools appropriate for suicide, depression, and anxiety screening in older adult population.</li> </ul>	Implementation and adoption of appropriate tools

<b>Priority Area: Mental Health &amp; Mental Disorders</b> <b>Primary Objective (s):</b> 1. Improve services and resources to help combat bullying and prevent suicide. 2.				
Strategy/Action	Target Population	Key Partners	Tactics	Evaluation
suicide, depression and anxiety in aging adults.		<ul style="list-style-type: none"> <li>• Calvert Hospice</li> <li>• Health Ministry Network</li> </ul>	Work with community partners to implement use of these tools. <ul style="list-style-type: none"> <li>• Collaborate with Health Ministry Network and Calvert Hospice to bring bereavement programs to local faith communities.</li> </ul>	# of events scheduled, and number of attendees
Foster access to care and continuity of care and treatment throughout various sectors of the community related to mental and behavioral health	Calvert County residents	<ul style="list-style-type: none"> <li>• Calvert County Public Schools</li> <li>• Local Primary Care Provider offices</li> <li>• Calvert County Health Department</li> <li>• CalvertHealth Behavioral Health Unit</li> <li>• Local Behavioral Health Advisory Council</li> </ul>	<ul style="list-style-type: none"> <li>• Create a Mental Health and Substance Abuse subcommittee of the Community Health Improvement Roundtable.</li> <li>• Identify “gaps” in care and services that need to be filled, and work with community partners to address strategy to meet those needs. Make sure that primary care (somatic and physical health) is included in the strategy.</li> <li>• Increase availability, accessibility, and awareness of community hotline numbers available for crisis situations</li> <li>• Expand inpatient and partial hospitalization services on Behavioral Health Unit.</li> </ul>	Implementation of subcommittee  Actionable goals and metrics will be set by subcommittee, and a dashboard will be created to track trends and attainment of goals.

Prioritized Health Topic #4: Exercise, Nutrition & Weight

# Exercise, Nutrition & Weight

Secondary Data Score: **1.44**



## Key Themes from Community Input



- Over 25% of survey respondents noted this as a personal health issue
- Key Informants focused on the need for more places to exercise

## Warning Indicators



- Adults Who Are Obese
- Food Insecure Children Likely Ineligible for Assistance
- Access to Exercise Opportunities
- People with Low Access to a Grocery Store
- SNAP Certified Stores
- Recreation and Fitness Facilities

## Primary Data

Results from the community survey and key informant interviews support the secondary warning indicator of Adults who are Obese in the community. The survey results show Exercise, Nutrition & Weight as the second top health challenge survey respondents personally experience. When broken down by gender, 29.41% of women selected this as the top personal health issue. Key informants noted lack of healthy lifestyle opportunities as contributors to the higher obesity rates in their community. They emphasized the need for more spaces to exercise in the community and specifically requested more sidewalks for people to walk safely. Concern was noted about adolescents' high level of "screen time" versus time spent on healthier lifestyle choices like exercising.

## Secondary Data

From the secondary data scoring results, Exercise, Nutrition, & Weight (including Obesity) was identified to be a top health need in Calvert County.

Overweight and obesity are areas of overwhelming concern for Calvert County, as the percent of adults who are obese is trending upward. The percent is higher in Calvert County (37.2%) than in both Maryland as a whole (31.5%) and the nation overall (30.9%). Additionally, in Calvert County, food insecurity in children and access to exercise opportunities were areas of concern in the secondary data scoring. Although Diabetes was not specifically identified in the community needs assessment as one of the top needs, it has been identified by the Maryland Department of Health as a top concern in the State. The Maryland Department of Health released a 2019-2024 Diabetes Action Plan to be implemented across the State, with specific recommendations for local communities. With this in mind, the Community Health Improvement Roundtable will establish a Diabetes subcommittee to oversee an action plan for Calvert County. Because of its close link to Exercise, Nutrition, and Weight, the work of the Diabetes subcommittee will fall under this priority area.

<b>Priority Area: Exercise, Nutrition, and Weight (including obesity)</b>				
<b>Primary Objective (s):</b>				
<ol style="list-style-type: none"> <li>1. Increase access to programs that promote a healthy lifestyle that incorporates exercise, nutrition, healthy weight, and other health behaviors</li> <li>2. Offer individualized programs on fitness and nutrition for community members over 50.</li> <li>3. Increase safe activity level and promote continued healthy lifestyle behaviors of people who have suffered from heart disease, stroke, and other chronic disease conditions</li> <li>4. Implement strategies based on the Maryland Department of Health Diabetes Action Plan</li> </ol>				
<b>Strategy/Action</b>	<b>Target Population</b>	<b>Key Partners</b>	<b>Tactics</b>	<b>Evaluation</b>
<p>Address and promote exercise, nutrition, healthy weight, and healthy lifestyle</p> <p>Continue to offer healthy lifestyle programs through low cost and free programs that focus on fitness, physical activity and weight management.</p>	All Calvert County residents	<ul style="list-style-type: none"> <li>• Health Ministry Network</li> <li>• CoreLife</li> <li>• Calvert County Health Department</li> <li>• Stroke Support Group</li> <li>• Diabetes Support Group</li> <li>• Office on Aging</li> <li>• Local primary care and pediatrician offices</li> </ul>	<ul style="list-style-type: none"> <li>• Partner with Core Life to expand fitness and nutrition services to county residents</li> <li>• Initiate new programs targeting diabetic and stroke patients to increase physical activity and improve quality of life</li> <li>• Utilize Office on Aging partnership to offer individualized programs on fitness and nutrition for community members over 50</li> <li>• Collaborate with Calvert County Public Schools to provide resources related to healthy lifestyle and disease prevention in the public schools</li> <li>• Provide events, promotions, education, or awareness campaigns around a different theme each month throughout the calendar year</li> </ul>	<p>Monitor # of programs offered monthly and annually and # of participants.</p> <p>Monitor schedule of events and promotions and track # of participants, giveaways, etc.</p>
Implement a Diabetes Action Plan for Calvert County that is based on the Maryland Department of Health Action Plan	Calvert County residents most at risk for diabetes	<ul style="list-style-type: none"> <li>• Calvert County Health Department</li> <li>• Local primary care providers, pediatricians, Ob/GYN providers, and endocrinologists</li> <li>• Calvert County Public Schools</li> <li>• Calvert County Office on Aging</li> <li>• Health Equity Coalition</li> </ul>	<ul style="list-style-type: none"> <li>• Establish Diabetes subcommittee of Community Health Improvement Roundtable to review MDH action plan and set 3 year implementation plan for Calvert County</li> </ul>	<p>Implementation of subcommittee</p> <p>Actionable goals and metrics will be set by subcommittee, and a dashboard will be created to track trends and attainment of goals</p>