Review of Caroline, Dorchester, and Talbot County Data

Data sources: MRHP, 2019 Mid-Shore CHNAs, RWJF County Data

From the MRHP…

	Teen Birth Rate (per 1000 teenage females)	Early Prenatal Care	Adults Who Are Not Overweight or Obese	Adolescents Who Have Obesity (only 2014 data available)	Adults Who Currently Smoke	Adolescents Who Use Tobacco (only 2014 data available)	Children Receiving Dental Care in the Last Year	Uninsured Emergency Department (ED) Visits	Total Number of Drug and Alcohol-Related Deaths Occurring in Maryland by Place of Occurrence **
Allegany	24.7	77.2%	27.2%	13.5%	22.1%	24.9%	58.4%	5.6%	22
Calvert	9.6	72.1%	22.8%	10.1%	15.5%	20.7%	58.6%	4.8%	20
Caroline	27.0	76.7%	21.2%	13.9%	23.5%	26.1%	72.1%	6.8%	3
Carroll	6.8	75.9%	31.7%	8.9%	11.6%	15.0%	56.0%	5.4%	40
Cecil	18.3	78.2%	44.4%	14.1%	17.5%	25.2%	55.5%	5.8%	32
Charles	15.3	67.6%	23.1%	12.3%	18.4%	17.9%	50.7%	8.5%	22
Dorchester	50.7	78.1%	25.6%	17.2%	19.8%	24.9%	68.7%	6.8%	1
Frederick	11.0	77.5%	39.1%	9.1%	21.6%	16.3%	68.1%	9.3%	40
Garrett	31.8	80.9%	38.9%	16.0%	29.4%	33.0%	72.2%	5.8%	5
Harford	8.8	78.6%	27.7%	10.0%	20.7%	19.2%	60.2%	3.4%	50
Kent	18.2	81.9%	27.2%	12.8%	*	22.9%	71.9%	4.7%	3
Queen Anne's	6.8	75.3%	32.9%	11.7%	17.2%	24.3%	69.9%	5.1%	4
Somerset	22.5	80.5%	31.2%	17.5%	25.0%	27.5%	68.8%	7.6%	6
St. Mary's	14.8	77.2%	31.3%	10.3%	14.5%	22.6%	56.0%	6.9%	18
Talbot	15.4	76.3%	40.8%	10.3%	*	21.6%	73.2%	6.6%	5
Washington	24.7	70.2%	31.6%	14.3%	22.0%	23.7%	58.6%	9.8%	64
Wicomico	20.0	78.8%	34.5%	11.9%	23.0%	21.5%	64.4%	10.0%	18
Worcester	20.9	80.4%	40.4%	13.5%	*	22.5%	63.8%	7.4%	16
MARYLAND	**16.9**	**66.9%**	**35.0%**	**11.5%**	**15.1%**	**16.4%**	**64.3%**	**10.7%**	**1259**

All data is from 2015 unless otherwise indicated. Additional "Data Details" can be found in Appendix II. This table includes data provided by the Maryland State Health Improvement Process (SHIP); the Maryland SHIP does not endorse this report or its conclusions.

* Data for this county did not meet the threshold required for reporting so was therefore withheld for privacy purposes.

** Data provided here is from the "Drug- and Alcohol- Related Intoxication Death in Maryland, 2015" report found here: https://bha.health.maryland.gov/OVERDOSE_PREVENTION/Documents/2015%20Annual%20Report_final.pdf
Also, it is important to note that this is the data for where the death OCCURRED, not the county where the individual RESIDED/LIVED.
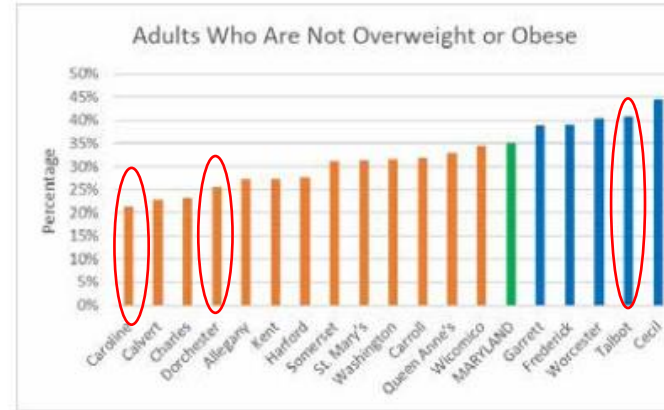

35.0% ●●●

The percentage of Maryland adults in 2015 who are not overweight or obese is 35.0%. A little over seventy percent of rural counties have a lower percentage than the statewide percentage, ranging from 21.2% in Caroline County to 34.5% in Wicomico County. Almost thirty percent of rural counties have a higher percentage than the statewide percentage of adults who are not overweight or obese, ranging from 38.9% in Garrett County to 44.4% in Cecil County.
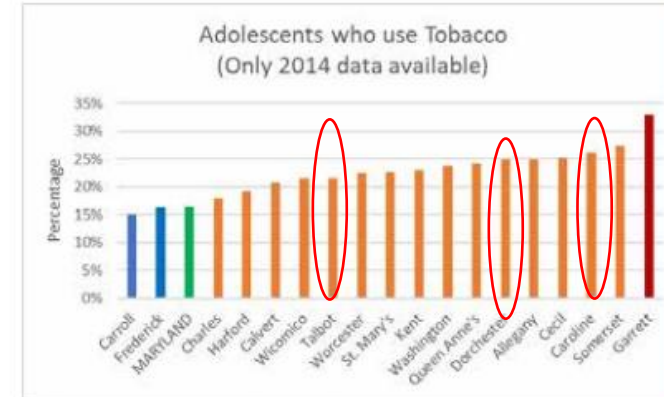
16.4% ●●●

The percentage of Maryland adolescents, according to 2014 data, who use tobacco products is 16.4%. Sixteen rural counties have a greater percentage of tobacco usage among adolescents than the state percentage. These counties range from 17.9% in Charles County to 33%, almost two times the statewide percentage, in Garrett County. Only two rural counties, Carroll and Frederick, have a smaller percentage of adolescents who use tobacco when compared with the state percentage.
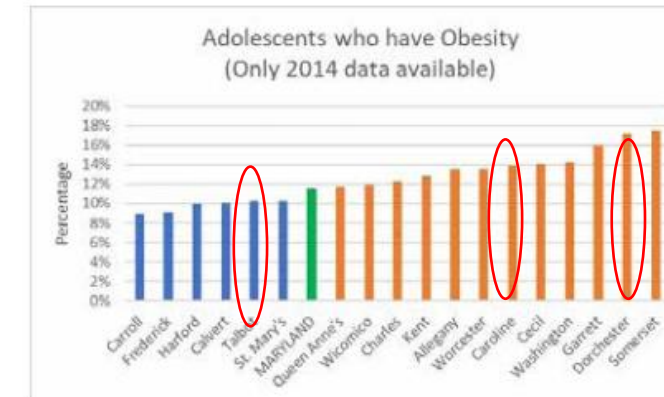
11.5% ●●●

The percentage of Maryland adolescents who have obesity, based on 2014 data, is 11.5%. One-third of the rural counties have a lower percentage compared with the statewide percentage, ranging from 8.9% in Carroll County to 10.3% in Talbot and St. Mary's Counties. The remaining two-thirds of counties have an equal or greater percentage of adolescents who have obesity, when compared with the state, ranging from 11.7% in Queen Anne's County to 17.5% in Somerset County.

Focus Group Data from MRHP

Caroline County

County priorities: obesity, diabetes prevention and management
Consumer noted barriers: transportation, HI networks, lack of oral health care
    Solutions: health education/holistic health center, youth activities, increase provider retention
Provider noted barriers: transportation, fear of deportation, culture and stigma surrounding care
    Solutions: community health center with care coordination services, expansion of mHealth, database of best practices
What works: emergency medical services, comm. Response to opioid crisis, health dept. events, telehealth programs, mHealth, partners in care volunteer program

Dorchester County

County priorities: obesity, behavioral health, cancer
Consumer noted barriers: health education/health care system education, provider shortage, rehab facility
    Solutions: on-demand care
Provider noted barriers: transportation, behavioral health inpatient center, care coordination
    Solutions: care coordination, trust building between providers and consumers
What works: YMCA, mobile crisis, comm. Health education, telehealth

Talbot County

County priorities: health status monitoring, shortage analysis, priority to areas of greatest need
Consumer noted barriers: transportation, care coordination, dental health care
    Solutions: care coordination between agencies, incentives to bring specialists to communities
Provider noted barriers: transportation, HI networks, jobs for well-educated spouses and reciprocity laws
    Solutions: telehealth with medical oversight by PCP, data infrastructure for real-time decisions, living wage for citizens
What works: senior centers, parks and rec, mobile crisis, flexible appts and open access days, school health facilities

To sum up...
- From 2015 county graphs, health characteristics to target recommendations could be obesity and tobacco use
- Obesity is a county priority for 2/3 counties
- What's seen to work is care coordination models, community-based programs (preventative and social support), telehealth
- Transportation, available health staff, and education/outreach are major barriers noted by consumers and providers

2019 Mid-Shore CHNAs Align with MRHP Data

Top 5 health concerns: alcohol drug addiction/abuse, **obesity**, mental health, cancer, **diabetes/high blood sugar**
- Common themes between chronic disease care coordination and obesity concerns in MRHP

Top social/environmental problems: lack of job opportunities**, transportation problems**, availability/access to doctor's office, poverty, access to health insurance, housing/homelessness

Top barriers to not accessing HC: too expensive, **lack of transportation**, no insurance, no doctor nearby, insurance not accepted
- Lack of overall health literacy and health education

Community leader focus group findings:
- Top priorities and concerns: access to care (lack of transportation)**, HC shortage** (primary care, behavioral health), **lack of care coordination**, lack of nonprofits and private orgs to fill gaps; sustainable funding: **caught in transition for payment-for-value vs. FFS**, shift in health depts from direct service delivery to programs with limited capacity to bill for services

Prioritizations:
1. Access to care 2. Preventable ER visits 3. Chronic disease management 4. Mental health/substance abuse 5. Cancer

Snapshot of RWJF County Data

County Demographics

	% below 18 years of age	% 65 and older	%Non-Hispanic Black	American Indian and Alaskan Native	%Asian	% Hispanic	% Non-Hispanic White	% Rural
Caroline	23.7%	16.2%	13.8%	0.9%	1.2%	7.4%	75.5%	76.0%
Dorchester	21.1%	21.6%	27.9%	0.5%	1.2%	5.9%	62.6%	56.2%
Talbot	18.2%	29.2%	12.4%	0.4%	1.4%	6.8%	77.7%	54.7%
MARYLAND	22.2%	15.4%	29.8%	0.6%	6.7%	10.4%	50.5%	12.8%

Clinical Care

	Uninsured Adults	Uninsured children	Primary Care physicians	Dentists	Mental Health providers	Preventable hospital stays
Caroline	10%	4%	2,770:1	2,080:1	2,220:1	4,914
Dorchester	9%	4%	2,300:1	1,390:1	420:1	4,938
Talbot	10%	6%	1,090:1	1,190:1	220:1	3,240
MARYLAND	8%	4%	1,140:1	1,290:1	390:1	4,550

Health Outcomes and Factors

	Poor or fair health	Frequent Physical Distress	Frequent mental distress	Diabetes Prevalence	Adult Smoking	Adult Obesity	Physical Inactivity	Excessive drinking	Drug overdose deaths
Caroline	17%	12%	13%	13%	19%	40%	31%	16%	39
Dorchester	18%	11%	13%	19%	18%	39%	34%	15%	29
Talbot	13%	9%	12%	12%	13%	28%	20%	17%	30
MARYLAND	15%	10%	12%	11%	14%	31%	22%	17%	37

Social and Economic Factors

	High School graduate	Unemployment	Children in poverty	Children eligible for free or reduced price lunch	Median household income
Caroline	82%	3.8%	20%	56%	$56,600
Dorchester	83%	5.2%	27%	100%	$48,700
Talbot	87%	3.7%	15%	48%	$64,200
MARYLAND	88%	3.9%	12%	46%	$83,100

Next Steps

- Review Data and identify priority areas for next meeting?
- Identify potential new types of data that could be useful in generating the Strategic Plan/recommendations
- Look out for data from the Rural Health Collaborative TBD