

Office of Minority Health and Health Disparities (MHHD)
MARYLAND PLAN TO ELIMINATE HEALTH DISPARITIES
Committee Meeting Notes



Committee: Identifying Funding Strategies
Date of Meeting: February 15, 2005, 1pm – 3pm
Location: MedChi
 1211 Cathedral Street
 Baltimore, Maryland 21201

□ In Attendance

Committee Members:

Patricia Horton, Co-Chair
 Michael Preston, Co-Chair

Tina Brown	Sapun Chanchai
Jessica Foster	Wendy Friar
Phyllis Kalar	Maureen Masarik
Michelle Mehrling	Kenneth Pack

New Members:

Last Name	First Name	Title/ Affiliation
Anderson	Ernestine	
Grant	Shelly	Holy Cross Hospital
Greene	Bertha	Pastor
Lyles, ScD, MPH, RPh	C. Alvin	University of Baltimore School of Public Affairs
Mukherjee	Sam	Asian Indians for Community Services, Inc.

Co-Staff:

Janet Adams, MHHD, Lead Co-Staff
 Joyce Pollard, DHMH, Mental Health
 Cyntrice Bellamy-Mills, DHMH, Mental Hygiene

MHHD Staff:

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Total Attendance: 19

□ Meeting Summary and Key Points

- Attendees introductions were made.
- *Identifying Funding Strategies* Committee's Purpose and Charge were reviewed and meeting notes from the January 12, 2005 were discussed. Co-Chairs and Lead Staff for the committee clarified that the proposed priorities documented from the January session were more consistent with the responsibilities of MHHD staff more so than the intended goals of the committee.

- There was a brief presentation on the role of the resource development coordinator in the Office of Minority Health and Health Disparities. Key responsibilities include proposal writing, researching prospective funders (government and private), developing and presenting case statements for major gift funding. Working with Dr. Carlessia Hussein, MHHD Director, the resource development coordinator also helps develop project ideas and identify potential partnerships for collaborative efforts.
- Committee was asked to keep in mind that resources and fund development strategies should be the focus of their recommendations. Example recommendations from five published documents or reports were provided as a point of reference. Examples included excerpts from the:
 - (1) Sullivan Commission Report, Missing Persons: Minorities in the Health Professions;
 - (2) Latino Coalition for a Healthy California's ballot propositions addressing health disparities;
 - (3) The Association of State and Territorial Health Officials (ASTHO)'s May 2004 Issue Report;
 - (4) Minnesota Department of Health's state allocations for addressing minority health disparities; and
 - (5) North Carolina DHHS Office of Minority Health and Health Disparities Plan.
- Co-chairs reviewed the charges of the other three Maryland Plan committees. Members discussed how meeting summaries and feedback from other committees will support the progress of the *Identifying Funding Strategies Committee*.
- Co-Chairs presented a proposed format for the June 30th report. The format was drafted by MHHD staff and approved by co-chairs. The report outline includes sections for determining problems and developing goals, solutions (recommendations) and strategies in response to the problems. Committee will use format as a framework for completing its task.
- A proposed problem list was presented to the committee. The problems were listed under the following suggested chapters for the June report:
 - (1) Maryland lacks the resources needed to eliminate health disparities
 - (2) Maryland needs to develop and expand its leadership base to support policy
 - (3) Health disparities programs, projects and initiatives lack needed collaboration

NOTE: The problem list was drafted using notes from the January 2005 meeting, co-chair feedback, and conclusions from other minority health plans across the United States.

- **An open discussion of the problem list resulted in the following draft recommendations for the June 2005 report:**

Recommendation: The state of Maryland should establish a line item budget to fund the Office of Minority Health and Health Disparities. This budget should include funds for the Office to act as an intermediary for community-based initiatives.

Recommendation: The state of Maryland should allocate funds to help educational institutions promote health careers and offer cultural competency projects targeting and or supporting minority populations.

Recommendation: Local leadership from political, business, health care, community-based, faith-based, and educational entities should collaborate to consider the financial and public health benefits of focusing on health disparities in Maryland.

Recommendation: The state of Maryland should allocate funds for data collection, analysis, and reporting on minority groups who are underrepresented in existing epidemiological reports e.g., Native Americans, Hispanics

Recommendation: The state of Maryland should allocate funds to help small businesses that can not afford employee health insurance premiums.

Recommendation: The Office of Minority Health and Health Disparities should convene an annual leadership forum to promote resource and partnership development among stakeholders committed to eliminating health disparities.

Recommendation: The Office of Minority Health and Health Disparities should research private funding opportunities e.g., foundations and corporations.

Recommendation: The Office of MHHD should collaborate with local health care institutions to develop an evidence-based, medical model that targets one disease or health problem (e.g., obesity, cardiovascular disease, mental illness) in a specified geographical location. State funds should be allocated to fund this project.

Other Key Points

- The *Identifying Funding Strategies Committee*'s role in relationship to the other Maryland Plan to Eliminate Health Disparities Committees
- The significance of leadership as a primary resource for promoting the issues around minority health and health disparities—leaders representing health care institutions, providers, businesses, community-based organizations, government agencies and educational institutions.

- The role of Maryland's Office of Minority Health and Health Disparities
- The Healthy Maryland 2010 Plan and how that plan should be a catalyst for the next steps in address health status and disparities in Maryland

FOLLOW-UP

□ Action Steps

- Next meeting will be on **Wednesday, March 9, 2005 at from 1:00pm – 3:00pm.**
- Janet Adams will advise [full] committee of next meeting date and location via email.
- In next meeting, the [full] committee will discuss in detail proposed recommendations outlined in February 15th session.

□ Parking Lot Items – NONE