

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

Last updated Nov 5, 2021

2021-2022 LHIC Requirements and Deliverables Report Interim Report due Fri, April 1, 2022 – Final Report due Wed, Aug 31, 2022						
Please attach completed products and provide a list of all attachments.	Completed	In Progress	Planne d	Expected/ Actual Completio n Date		
1. LHIC staff participate in a majority (at least 50%) of TA webinars and Community of Practice sessions.						
 LHIC Membership. LHIC maintains current rosters, implement membership strategy and expand and deepen member engagement 	-	-	-	-		
 Rosters with names, organizations, and contact information are updated every 6 months 						
 Attendance reports are maintained (main coalition meetings) 						
 Written strategy to include missing sectors/partners is implemented 						
d. Membership numbers increase from Oct 2021 to Aug 2022 (LHIC sets % or # increase goal)						
e. LHIC uses new member orientation materials						
f. LHIC has dedicated community leaders						
g. Provide names and titles of community leaders, such as LHIC co-chair, or XX Workgroup Lead or Co-lead						
3. A community-oriented approach as indicated by a website presence, open meetings, publicly shared announcements and minutes, accessible data sets and/or other demonstrable indications of community involvement and input.	-	-	-	-		
 Community Engagement Checklist is submitted to the Horowitz Center by March 31, 2022 						
 Community Engagement Checklist is submitted to the Horowitz Center Aug 31, 2022 and shows progress from March 						
c. LHIC holds at least 1 community health training session and adds materials from training to LHIC website*						
d. LHIC reports examples of engagement and collaboration with local providers and payers						

Please attach completed products and provide a list of all attachments.	Completed	In Progress	Planne d	Expected/ Actual Completio n Date		
4. LHIC implements diabetes strategy and reports measurable results aligned with the Maryland Diabetes Action Plan and SIHIS measures.	1	1	1	1		
a. Drafts evaluation plan for diabetes strategy						
 By Aug 2022, implements at least 2 strategies and describes the implementation process with supporting documentation. 						
5. A brief (1 paragraph) update on how you have employed Technical Assistance offered by the UMD School of Public Health Team to assist in achieving these requirements.						
 6. If applicable to the jurisdiction, area Regional Partnership(s) awarded a Catalyst Grant by the HSCRC is a member of the LHIC and is clearly aligned with LHIC diabetes planning and programming. LHIC reports collaborative activities between the LHIC and the Regional Partnerships 						
7. Please provide a brief summary of what has been achieved because of the TA during the reporting period. Describe progress towards achieving the objectives stated in the Local Health Improvement Plan or Diabetes Initiative Plan. Click or tap here to enter text.						
8. Describe planning and progress toward sustainability as of April 1, 20, sources of additional funds to support the LHIC. Click or tap here to enter text.	22 (interim)/Au	g 31, 2022 (fina	al). Please io	dentify		

^{*}These are sessions for LHIC members to understand the meaning of community health and why the coalition exists. The session would cover the LHIC's history and structure, the role of data, the CHNA and CHIP processes, and the goals and objectives of the coalition.

What to submit by April 1, 2022:

- 1. List of webinars/Community of Practice sessions LHIC leaders have attended or watched recordings of
- 2a. Dates of the last 2 roster updates and the planned date for the next roster update
- 2b. Attendance reports for main coalition meetings for the last year
- 2c. Key milestones achieved in implementing strategy for including missing sectors/partners
- 2d. LHIC's membership increase goal
- 2e. Brief description on LHIC's progress toward creating and using new member orientation materials. If applicable, submit final materials.
- 2g. Names and LHIC titles of community leaders
- 3a. Completed community engagement checklist
- 3c. Brief description of LHIC's progress toward hosting community health training sessions
- 3d. Examples of engagement and collaboration with local providers and payers
- 4a. LHIC's progress on diabetes strategy evaluation plan
- 4b. If applicable, description of diabetes strategy implementation with supporting documentation
- 5. Brief update (1 paragraph) on how you have used the Technical Assistance to date
- 6. If applicable, brief description of collaborative activities between the LHIC and the Regional Partnerships