

# Maryland Commission on Public Health Timeline



## 2024

	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Meeting Date, Chair	04 Apr, Tosin	02 May, Meena	06 Jun, Tosin	11 Jul, Boris	01 Aug, Meena	05 Sep, Tosin	03 Oct, Boris	07 Nov, Meena	05 Dec, Tosin
Focus	Preparation and status updates	Future state visioning	Defining models and frameworks; visioning	Assessment and information gathering	Reviewing preliminary findings and reflecting	Deep dive into Gov. / Org Capabilities	Deep dive into Comms/PE	Deep dive into Funding; prep for interim report	Submission of interim report; review progress
Assessment	<ul style="list-style-type: none"> <li>Collecting questions and existing sources</li> </ul>	<ul style="list-style-type: none"> <li>Collecting questions, defining approach</li> </ul>	<ul style="list-style-type: none"> <li>Finalize scope of work, review questions</li> </ul>	<ul style="list-style-type: none"> <li>Continue assessment calibration, protocols</li> </ul>	<ul style="list-style-type: none"> <li>Assessment activities underway, outreach</li> </ul>	<ul style="list-style-type: none"> <li>Assessment activities underway, outreach</li> </ul>	<ul style="list-style-type: none"> <li>Assessment activities underway/released; guides developed</li> </ul>	<ul style="list-style-type: none"> <li>Assessment shift to KII/focus groups</li> <li>Review preliminary trends</li> </ul>	<ul style="list-style-type: none"> <li>KII/focus groups continue</li> <li>Review and analysis</li> </ul>
System Engagement	<ul style="list-style-type: none"> <li>Dr. Joshua Sharfstein, HSCRC</li> <li>16 Apr, St. Mary's Co HD site visit</li> </ul>	<ul style="list-style-type: none"> <li>Camille Blake Fall, MH &amp; Health Disparities</li> <li>Chelsea Cipriano, Common Health Coalition</li> <li>23 May, Washington Co HD Site Visit</li> </ul>	<ul style="list-style-type: none"> <li>MDH Secretary Laura Herrera Scott, HCCC Ben Stefan</li> <li>13 Jun, Howard Co HD Site Visit</li> </ul>	<ul style="list-style-type: none"> <li>Mark Luckner, MCHRC; (tent. Jon Kromm, HSCRC)</li> <li>30 Jul, Montgomery Co HD Site Visit</li> </ul>	<ul style="list-style-type: none"> <li>(Tentative: Dr. Georges Benjamin; UMD/MSU Speakers)</li> <li>07 Aug, Talbot Co HD Site Visit</li> </ul>	<ul style="list-style-type: none"> <li>(Tentative: MDE Secretary/Designee)</li> <li>Mid-Sept. Baltimore City Site Visit</li> </ul>	<ul style="list-style-type: none"> <li>Other partners/entities to visit/meet with?</li> <li>Focus groups/KII meetings begin</li> </ul>	<ul style="list-style-type: none"> <li>Summarize site visit findings</li> <li>Focus groups/KII meetings continue</li> </ul>	<ul style="list-style-type: none"> <li>Focus groups/KII meetings continue with system partners</li> </ul>
Public Engagement	<ul style="list-style-type: none"> <li>16 Apr, So. MD Listening Sess.; online form</li> </ul>	<ul style="list-style-type: none"> <li>23 May, West MD Listening Session</li> </ul>	<ul style="list-style-type: none"> <li>13 Jun, Central MD 1 Listening Session</li> </ul>	<ul style="list-style-type: none"> <li>30 Jul, Central MD 2 Listening Session</li> </ul>	<ul style="list-style-type: none"> <li>07 Aug, Eastern Shore Listening Session</li> </ul>	<ul style="list-style-type: none"> <li>Mid-Sept. Baltimore City Listening Session</li> <li>Public comment form and phone line close</li> </ul>	<ul style="list-style-type: none"> <li>TBD</li> </ul>	<ul style="list-style-type: none"> <li>Summarize public comments</li> </ul>	<ul style="list-style-type: none"> <li>Issue press release and social media campaign highlighting CoPH work</li> </ul>

## 2025

	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Post-Oct 2025
Meeting Date, Chair	23 Jan, Boris	20 Feb, Meena	13 Mar, Tosin	03 Apr, Boris	01 May, Meena	05 Jun, Tosin	10 Jul, Boris	21 Aug, Meena	11 Sep, Tosin - final mtg	No meeting	
Focus	Deep dive into Data & IT	Deep dive into Workforce	Status update and transition to change	Recommendations: Gov. and Org Cap.; Comms & Public Eng.	Recommendations: Funding; Workforce	Recommendations: Data and IT; Procurement and Systems Integration)	Draft report	Respond to feedback, refine	Final adoption	Focus: Submit report by 01 Oct; decommission	Outreach and build coalition support for the work
Assessment	<ul style="list-style-type: none"> <li>Surveys and assessments completed</li> <li>Analysis underway (except PH WINS)</li> </ul>	<ul style="list-style-type: none"> <li>All findings and analysis complete (except PH WINS)</li> </ul>	<ul style="list-style-type: none"> <li>Review completed of existing data sources, PH WINS avail</li> </ul>	<ul style="list-style-type: none"> <li>Discuss recs., review options, provide input; workgroups iterate</li> </ul>	<ul style="list-style-type: none"> <li>Discuss recs., review options, provide input; workgroups iterate</li> </ul>	<ul style="list-style-type: none"> <li>Discuss recs., review options, provide input; workgroups iterate</li> </ul>	<ul style="list-style-type: none"> <li>Review broad substance of report and sections; iterate</li> </ul>	<ul style="list-style-type: none"> <li>Reviewing comments, coordinating with workgroups</li> </ul>	<ul style="list-style-type: none"> <li>Houseskeeping items, no new activities.</li> </ul>	<ul style="list-style-type: none"> <li>No activities; submit report.</li> </ul>	<ul style="list-style-type: none"> <li>Consider implementation strategy</li> </ul>
System Engagement	TBD	TBD	TBD	<ul style="list-style-type: none"> <li>Public health week; coordinate PSAs &amp; messaging</li> </ul>	TBD	TBD	<ul style="list-style-type: none"> <li>Outreach to key informants, mandated stakeholders with draft</li> </ul>	<ul style="list-style-type: none"> <li>Update to key informants, mandated stakeholders</li> </ul>	<ul style="list-style-type: none"> <li>No new activities</li> </ul>	<ul style="list-style-type: none"> <li>Ensure key informants, mandated stakeholders get final copy (incl. legislators, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>Meetings and engagements with system partners as needed</li> </ul>
Public Engagement	TBD	TBD	TBD	<ul style="list-style-type: none"> <li>Public health week; develop PH messaging for general public</li> </ul>	TBD	TBD	<ul style="list-style-type: none"> <li>Draft posted 11 Jul - 11 Aug</li> </ul>	<ul style="list-style-type: none"> <li>2nd draft with response to substantive comments posted</li> </ul>	<ul style="list-style-type: none"> <li>No new activities</li> </ul>	<ul style="list-style-type: none"> <li>Final report posted, communications events</li> </ul>	<ul style="list-style-type: none"> <li>Social media activity, coordination</li> </ul>

*Disclaimer: This advisory document is used to help guide the Commission's activities in fulfillment of the enabling statute's requirements. As such, the contents will change and be updated regularly to reflect current priorities and any updates based on emerging needs. Please check the website for more information. All information contained herein is subject to change without notice should not be used to make any binding decisions.*

# Workgroup Charters



	Gov. & Org. Capabilities What should the public health system look like and what does it include?	Funding How can funding be optimized and more flexible to deliver public health?	Workforce What are the needs of today's and tomorrow's public health workforce?	Data & Information Tech What are the data and IT needs for tomorrow's public health system?	Comms & Public Engagement What are the best ways to share information with and get meaningful input from the public?
Workgroup Specific Activities	<ul style="list-style-type: none"> <li>Accountability and performance management</li> <li>Identify and make recommendations for organizational competencies</li> <li>Identify primary lead for FPH area recommendations and implementation</li> <li>Address linkage to clinical care concerns/challenges</li> <li>Consult with Dept of General Services and Dept of Mgmt &amp; Budget</li> <li>Study organization of state and local PH depts</li> </ul>	<ul style="list-style-type: none"> <li>Document investments in both FPH capabilities and FPH areas</li> <li>Document funding for each FPH area</li> <li>Identify ways to maximize funding flexibilities while promoting fiscal transparency</li> <li>Identify ways to reduce process friction for procurement, contracting, and other administrative processes</li> <li>Integrate community health benefit and other plans into broader PH system</li> <li>Consult with Dept of Mgmt &amp; Budget</li> </ul>	<ul style="list-style-type: none"> <li>Identify the diversity of the PH workforce</li> <li>Review and analyze PH WINS and other data sets to identify trends</li> <li>Review workforce in context of FPH areas, especially access to behavioral and primary care</li> <li>Make recommendations for talent development pipelines, recruitment, retention, and onboarding processes</li> <li>Improve Medical Reserve Corps recruitment and processing</li> </ul>	<ul style="list-style-type: none"> <li>Characterize assessment and surveillance systems capabilities and limitations</li> <li>Make recommendations on cybersecurity, protection of data, system integration and maintenance</li> <li>Assess system capabilities of LHDs</li> <li>Make recommendations to improve systems, especially centralized administrative systems/software</li> <li>Identify procurement and contractor oversight challenges as pertains to systems and projects</li> </ul>	<ul style="list-style-type: none"> <li>Identify communication channels preferred and used by public</li> <li>Assess effectiveness of public health outreach and messaging</li> <li>Assess engagement of the public and community-based partners in PH work</li> <li>Identify ways to improve health literacy, cultural humility, and accessible resources</li> <li>Identify best practices for maintaining inclusion and engagement from public in public health policymaking</li> </ul>
Workgroups Basic Activities	<p>Research, analyze, and assess the MD public health system at all levels. Define current state and future state gaps, opportunities, and vision for future. Collaborate with other workgroups as needed.</p> <p>Identify exemplar states, best in class practices, and other innovations to be studied. Host speakers and subject matter experts from across the country to help inform analysis.</p> <p>Identify stakeholders, key informants, and other relevant data to inform the Commission's work. Track themes and incorporate into research.</p> <p>Draft workgroup sections of report based on template/format outlined by Commission, including findings. Assist with editing and review based on input.</p>				
Cross-cutting Themes	<ul style="list-style-type: none"> <li>Integration of Behavioral Health, Clinical Medicine, and Public Health</li> <li>Procurement and Contractor Oversight</li> <li>Infant Mortality Rates</li> <li>SUD/ODU-related Deaths</li> </ul>		<ul style="list-style-type: none"> <li>Health Equity</li> <li>COVID-19 Response (and general emergency preparedness)</li> <li>Maternal Mortality Rates</li> <li>Other public health issues/areas of concern</li> </ul>		

FPH = Foundational Public Health. Refers to PHAB's FPHS framework.

All workgroups will explore the content assigned to them in addition to discussing and analyzing how the cross-cutting themes interact or impact their specific areas. Workgroup basic activities are the baseline effort that each workgroup should undertake in order to achieve the statutory requirements for the Commission. Workgroup specific activities address more granular concerns or questions that have emerged during discussion, analysis, and discovery. Workgroup Co-Chairs should convene the workgroups and/or subcommittees at least once a month to maintain member engagement and ensure sufficient time to incorporate expert testimony, rich discussion, and generating well-crafted recommendations.

# Foundational Public Health Services

## Foundational Areas

Public health programs, or Foundational Areas, are basic public health, topic-specific programs and services aimed at improving the health of the community. The Foundational Areas reflect the minimum level of service that should be available in all communities.

## Foundational Capabilities

Public health infrastructure consists of Foundational Capabilities that are the cross-cutting skills and capacities needed to support basic public health protections, programs, and activities key to ensuring community health, well-being and achieving equitable outcomes.

