



CalvertHealth

A HEALTHY START

New moms grateful
for amazing care
during pandemic

See Story Page 6



A Message from the President



#StrongerTogether

It's hard to believe it's been a year since the first case of COVID-19 was diagnosed in Calvert County. It's no small matter to say this pandemic has changed our lives in ways we could never have imagined. One thing that remains constant is our sense of community and the way Calvert County continues to come together to fight this virus.

It's taken a team approach to overcome the hurdles that were placed before us. From the medical center personnel, doctors, nurses, providers, and care teams here and in our community, we have all come together with a common goal -- to ensure the health and safety of our community.

Please take the time to read what infectious disease specialist Dr. Paul Pomilla has to say about the safety and effectiveness of the vaccine on page 5. Also, be sure to check out the video he made with CalvertHealth Pharmacist Kara Harrer, PharmD.

Stories about the *power of community* abound in this issue -- from our cancer team who is improving the quality of care for multiple myeloma patients to how our family birth center is providing a nurturing environment for families, even in these difficult times. Thank you for believing in us as we continue to bring the highest quality of care to our community.

Tomorrow will always bring new challenges, but I am confident that we are all stronger together.

With great appreciation,

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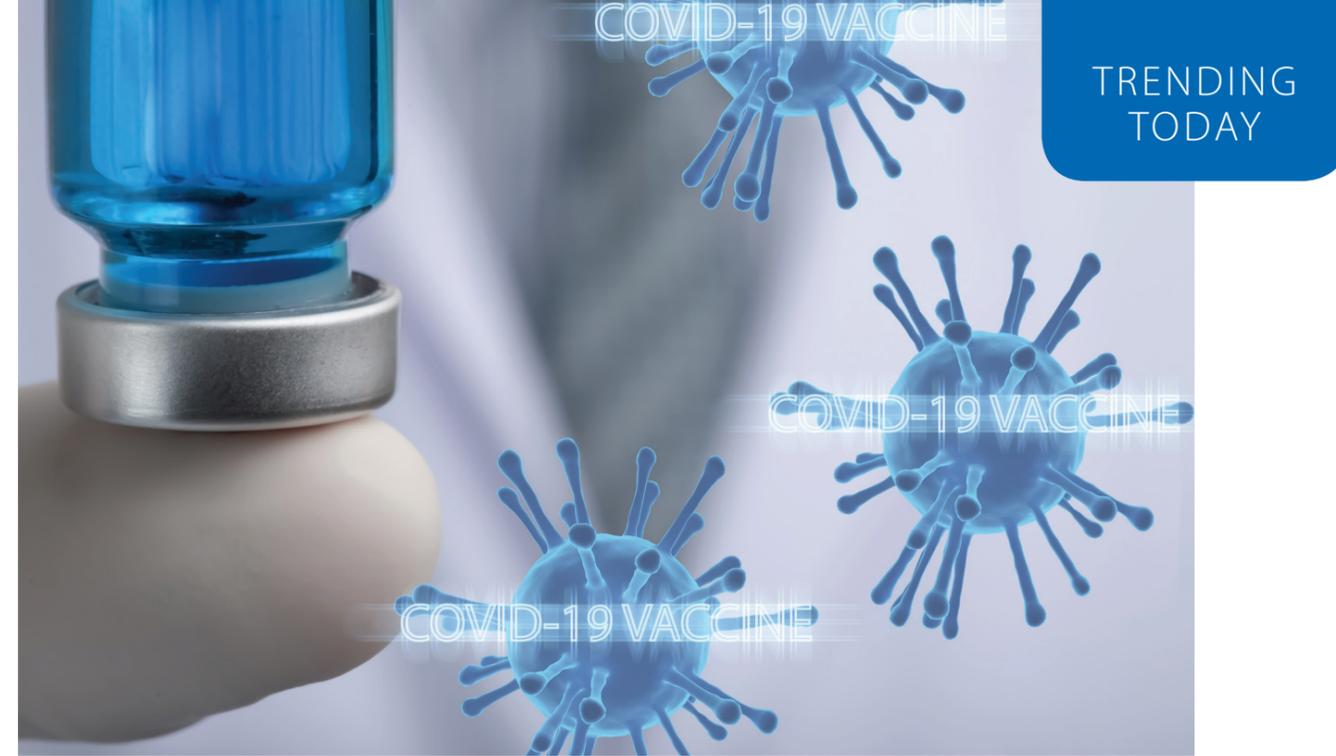
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Rachel Crim of Lusby shares a tender moment with her 5-year-old daughter, Madelyn, and her little sister, Paisley, who was born on Jan. 5.

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TRENDING TODAY

Local COVID Vaccination Effort Presses Forward Despite Shortages

Public Awareness Campaign Emphasizes Safety and Effectiveness

“CalvertHealth is committed to partnering with the Calvert County Health Department to support the local vaccination effort,” said Chief Operating Officer **Tony Bladen**. “We believe the COVID-19 vaccine is a giant step to help move our community forward. It is also very important to get the word out about its safety and effectiveness.”

Bladen went on to add, “We are trying to help educate the community on the benefits of receiving the vaccine. Our goal is to encourage as many people as we can to get it... recognizing this is a personal decision for everyone.”

Infectious disease specialist **Dr. Paul Pomilla** of Calvert Internal Medicine Group addresses many of the concerns about the vaccine in a special column on page 5. Dr. Pomilla also joined CalvertHealth Pharmacist **Kara Harrer, PharmD** to answer frequently asked questions in an educational video available for viewing by scanning the code at the top of page 5.

Despite limited supply, Calvert County moved quickly to administer the doses received early on. According to the Maryland Department of Statistics as of Feb. 7, Calvert County has the fifth highest rate of vaccination among Maryland's 24 counties.

Additionally, 100 percent of the vaccines received by the Calvert County Health Department (CCHD) have been administered. The Feb. 7 report showed 10,566 county residents had received at least one dose of the vaccine.

Pre-register for your vaccine today at:
www.calvertcountymd.gov/vaccine or call 410.535.0218



Calvert County Health Officer Dr. Laurence Polsky administers the COVID-19 vaccine to a volunteer from the St. Leonard Volunteer Fire Department. The first 100 doses received locally went to EMS and healthcare workers involved in COVID testing and treatment.

Outreach Prioritizes High-Risk Residents

Calvert County Health Officer Dr. Laurence Polsky told the county commissioners in January, “We’re going to continue to expedite this as best we can. It is our goal to administer the doses we receive as quickly as we reasonably can.”

Dr. Polsky said the first 100 doses were administered within four hours. In late December, another 800 doses were administered within 36 hours to first responders and other healthcare workers.

“This is a work in progress,” Dr. Polsky told the commissioners at the Jan. 5 briefing. “We don’t know from week to week when we will receive our next shipment of the vaccine and how many doses we’ll receive. Planning has been difficult to put it mildly.”

He went on to add, “We’re working with the primary care providers across the county to help identify those who are in the greatest medical need. I know there has been frustration but everything is being done in good faith.”

In addition to the 4,000 healthcare workers, first responders and classroom educators in Calvert who have been prioritized for vaccination in Phase 1A and 1B, there are 15,000 seniors who live in the county.

Health Department Spearheads Coordination

In spite of these challenges, Dr. Polsky said the health department has been working seven days a week to coordinate and administer vaccine doses since the first shipment was received with less than 24 hours-notice on Dec. 17.

According to Dr. Polsky, the health department regularly discusses policies and planning with a group of more than 40 local doctors, nurse practitioners and hospital administrators to ensure the most efficient and fair process possible given the limitations of the resources and the urgency of the situation.

On Jan. 18, Calvert County opened its online pre-registration portal for the COVID-19 vaccine at www.calvertcountymd.gov/vaccine. Already, some 27,000 residents have signed up. For individuals unable to register online, you may call 410.535.0218. Residents are required to pre-register to be vaccinated at the CCHD drive-thru location at the Industrial Park in Barstow. For the most up-to-date information on where you can get vaccinated, go to: covidlink.maryland.gov.

A coordinated effort between the local office on aging, health department and CHMC has led to a higher percentage of vaccines going to seniors in Calvert than elsewhere in Maryland. This will continue to be a priority. The recent approval of a third vaccine should speed the pace of reaching those who are still in need of inoculation.

Why I Decided to be Part of a COVID-19 Vaccine Trial

“I feel like being in this trial, I was able to make a small contribution to something that could help millions,” said Melissa Hall, RN, BSN, MSN, FNP, who has been a nurse for more than 20 years and is currently Chief Information Officer at CalvertHealth.



“I had never participated in a clinical trial before but I felt this one was important due to how many people were affected globally,” she said. Closer to home, her husband is immunocompromised and is working at home. She worries because she is out of the house every day.

Hall, 52, was part of the Moderna clinical trial that started early last year at the University of Maryland in Baltimore. She joined Phase 3 in August and received her first shot then. “I keep an eDiary and I have had to go onsite a few times so far. They have taken blood samples and nasal swabs each time. All in all, it has been very easy.”

Phase 3 trials include thousands of volunteers from diverse ethnicities. The goal here is to test the safety and effectiveness of the vaccine in the general population.

Even though she is not currently in direct patient care, Hall said, “the idea that I would want my patients to know I feel this is important enough to participate drove me to make the decision to join the trial.”



Community Wellness staff from Calvert Health Medical Center helped vaccinate seniors at the North Beach Community Center. Special efforts were made to assist older residents without access to technology or to transportation.

Infectious Disease Specialist Debunks Common Vaccine Myths

Board-certified infectious disease specialist Dr. Paul Pomilla of Calvert Internal Medicine Group sets the record straight on some of the myths circulating about the COVID-19 vaccine.



MYTH: The COVID-19 vaccine is not safe because it was rapidly developed and tested.

Both the Moderna and Pfizer vaccine were tested in over 40,000 patients each (about half of whom received placebo). This is almost twice the number of patients that were tested for the shingles vaccine the FDA approved in 2017. Vaccine development occurred quickly because both companies were well-along in developing mRNA vaccines for other diseases, including influenza, so the technology was already in place. And recruitment of volunteers occurred more quickly than usual due to the public realizing the urgency of the situation. Finally, the trial was ended early because the vaccines were so effective that an independent review board, who were the only ones who knew who had gotten the vaccine vs placebo, quickly noticed almost all those becoming infected with COVID had gotten the placebo, not the vaccine. Even at that point, they extended the trial further to make sure there were no side effects occurring later that were not apparent early on.

MYTH: I already had COVID-19 and I have recovered, so I don’t need to get a COVID-19 vaccine.

If you have already had COVID, the evidence suggests you are probably relatively protected from getting it again for at least 3 months. The Centers for Disease Control and Prevention (CDC) recommends, but does not require, that you consider waiting 3 months before receiving the vaccine. But foregoing the vaccine entirely is not wise. There are occasional cases of someone getting COVID twice, and “natural” immunity (from having the disease) is likely not to provide lifelong protection, as we have learned in the past from other infectious diseases.

MYTH: There are severe side effects of the COVID-19 vaccines.

Serious side effects are quite uncommon, and there have been no credible reports of death related to the vaccine. All those receiving the vaccine are monitored for 15-30 minutes afterward to watch for severe allergic reaction, and all vaccination sites have medicine on hand to treat someone if they develop such a reaction. Minor side effects (sore arm, fatigue, low-grade fever), like with most vaccines, are common and usually last just a day or two.

MYTH: I won’t need to wear a mask after I get vaccinated for COVID-19.

Although the vaccines prevent illness from COVID, it is not yet known if it can prevent a vaccinated person without symptoms from passing it on to others (this is being studied). Likewise, both vaccines are greater than 90 percent, but not 100 percent effective. Thus, mask-wearing remains imperative for all, right now, but the sooner we all get vaccinated, and continue to mask and maintain social distance, the sooner the pandemic will fade and masking recommendations and mandates will be able to be lifted.

MYTH: The COVID-19 vaccine was developed to control the general population through microchip tracking.

Microchip tracking through vaccination is highly implausible and has been deemed a discredited conspiracy theory.

MYTH: COVID-19 vaccines will alter my DNA.

The mRNA vaccines from Pfizer and Moderna do not enter the nucleus of cells (where the DNA is) and are not able to alter someone’s DNA. It does attach to a part of the immune cell, called the ribosome, and helps it make a small part of the “spike” protein of the virus, which then causes the immune system to make antibodies against the spike protein, and those antibodies and other activated immune cells will immediately defend your body against an encounter with the real COVID virus, should that occur.

MYTH: COVID-19 vaccines were developed using fetal tissue.

No fetal tissue is being used in the vaccines, a fact confirmed recently by Dr. Francis Collins, the evangelical director of the National Institutes of Health (NIH).

MYTH: COVID-19 vaccines cause infertility or miscarriage.

There is no evidence that the mRNA vaccines cause infertility or miscarriage. In fact, about 20 women became pregnant shortly after receiving the Pfizer vaccine during its trial. Furthermore, pregnancy is a known risk factor for severe COVID, so vaccination during pregnancy may be particularly helpful. I would encourage anyone with concerns about vaccination during or around pregnancy to talk with their OB/GYN.

MYTH: I am allergic to eggs so I shouldn’t get the COVID-19 vaccine.

Unlike some other vaccines, there is no egg product in the COVID vaccines, so egg allergy is not a concern.

MYTH: COVID-19 vaccines must be stored at extremely low temperatures because of preservatives in the vaccines.

mRNA vaccines need to be stored at low temperatures because the mRNA, and the lipid layer it is enveloped in, is fragile and will degrade after several hours or more at room temperature.

WANT TO KNOW MORE?

Scan this code to get answers to FAQs about the vaccine.



New Moms Grateful for Amazing Patient Care During Pandemic

Calverthealth Team Strives for Safest and Best Birth Experience Possible



Despite the many ways that COVID-19 has turned life upside down, what hasn't changed is the enormous capacity for understanding and sensitivity the OB team at the CalvertHealth Family Birth Center feel for the women who deliver there. And it is something new moms tell us they appreciate the most.



"The nurses are so personable," said **Rachel Crim** of Lusby. "You make a connection in the short amount of time you're there and that is just so important. It's such a big time in your life ... a life-altering time."

Crim said she especially liked how the nurses kept her informed. "I'm a patient who needs to know what is happening," said the second-grade teacher. "The nurses were really good at explaining everything. I felt like I was very knowledgeable about what the next steps were."

'They Were on Top of It'

Even with an extremely busy birth center, Crim said the nurses were very responsive to her needs. "I know it sounds really small but anytime my water pitcher was empty, even without me saying anything they would already bring a full one back in," said Crim.

"The entire post-partum unit was filled but they were always on top of things," she added. "As a nursing mother, you feel like you could drink a river. I just felt like every time I turned around, it was replenished and thought of ... especially when your husband or whoever you are with can't leave to get it for you."

Extra safety precautions put in place at CalvertHealth Family Birth Center during the pandemic included limiting one approved visitor for mothers during their stay. Visitors may not switch out and are required to remain in the patient room at all times.

Five-year-old Madelyn Crim of Lusby was thrilled to see her baby sister, Paisley, just minutes after she was born on Jan. 5 via FaceTime.

"We will continue to offer sensitive and nurturing care, especially in these difficult times."

- Kelly McKenny RNC-OB, IBCLC, Family Birth Center

Knowing What to Expect

Brandi Campbell of Benedict said talking to her obstetrician, **Dr. Michelle Johnson**, ahead of time about what to expect made a big difference for her. "I truly feel like that helped a lot," she said. "I knew going in we'd have to wear masks and, of course, all of our caretakers would be, as well."

She went on to add, "The overall experience was fantastic, actually. Again, knowing what to expect takes a lot of weight off your shoulders. And everyone (at the birth center) is so real ... they talk to you and they let you know what's going on."

Campbell said the first day after her C-section she was feeling very nauseous and dizzy. "The nurses were so attentive when I told them what my issues were and were so patient."

She was also impressed with the extra attention given to cleanliness. "With COVID looming, I was really grateful for the sanitation and the

masks and sterile clothing."

Although her daughter needed to be flown out to the Neonatal Intensive Care Unit at MedStar Georgetown University Hospital for respiratory issues, Campbell said she appreciated how the CalvertHealth staff kept her in the loop on what was being done to take care of her.

A Chance to Really Bond

Crim said not having visitors turned out to be the best part of her stay. "I think Stephan (her husband) and I would both agree it allowed us time to bond with Paisley before we brought her home and gave us that alone time we wouldn't have gotten before."

"Honestly, with our next baby and COVID is gone, I probably won't have visitors," she said. "It was so rewarding and allowed us to connect and to have that moment together without a lot of other people."



Planning Ahead Is Essential

"I would encourage expectant moms to talk to your OB," said Campbell. "Ask all your questions beforehand because when you get there that day it's game on. That way you do have a better mindset of what to expect and you'll be better prepared."

"And make sure to pack as many comfort items as you can think of," added the 40-year-old hairdresser. "For me, it's my favorite feather pillow and sweet tea."

"We share the frustration and disappointment so many feel about how the pandemic has impacted their plans for labor and birth," said Dr. Johnson. "But I want to reassure our patients that CalvertHealth OB/GYN is committed to working with the team at the family birth center to provide the safest and best birth experience possible."

Local Families Share Their Stories

"I was in your family birth center recently and every doctor and nurse were very, very polite. I don't like to stay in the hospital but I could have stayed longer in this hospital. It felt like a vacation - the best hospital I have ever been to. Every nurse I had was awesome. I love how they teach CPR. The videos were very helpful. The custodian was awesome, as well. Thanks for taking care of my baby & I." - Prince Frederick

"I was afraid moving to a new area at 32 weeks but from day 01 Dr. Kesha Robertson was friendly and professional. After I read about her experience, I had no doubt she would be my OB/GYN. Even during the pandemic, she made us feel very welcomed and explained all the steps we needed to go through. I had to go to the hospital every week by the end of my pregnancy and I found everyone warm and friendly, from the front desk to the doctor. I've just had my baby there and I had such a great experience. If we have to give any number from 0 to 10, for sure it will be 10 or more, the team that work at the hospital are really heroes and prepared! Thank you for all you have done for me." - Prince Frederick

"From the bottom of my heart thank you for such a wonderful birthing experience. I wish I knew the names of every person I encountered. They ALL deserve recognition! My husband and I were treated with the utmost respect. The family birth center is phenomenal! I will refer everyone I know to your hospital. Bernie RN, you will always have a special place in my heart, keep doing what you do, you are amazing and I am certain you impact every patient you encounter." - Hollywood



"The kind and nurturing environment was the best part for me," said Brandi Campbell, cuddling daughter, Dylan.



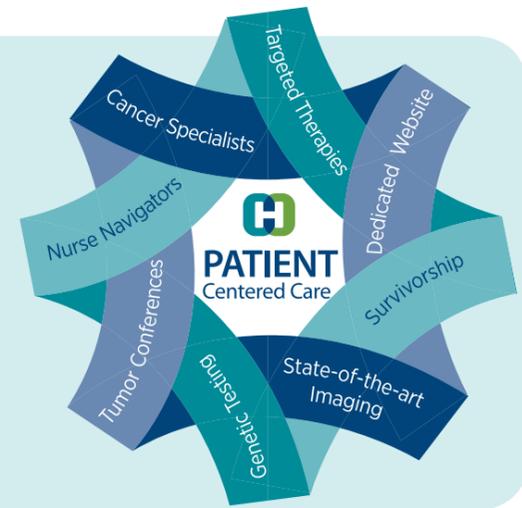
Use the camera app of your smart phone or tablet to take a virtual tour of the Family Birth Center.

Focus on Quality: Hallmark of Cancer Care at CalvertHealth

New Project Reducing Dental Complications in Multiple Myeloma Patients



“There is no doubt in my mind we significantly improved the quality of care for our multiple myeloma patients by participating in this quality initiative with the Association of Community Cancer Centers (ACCC),” said **Dr. Arati Patel**, who is the medical director of quality and outreach for oncology services at CalvertHealth.



Multidisciplinary Approach to Cancer Care

Multiple myeloma is the second most common hematologic malignancy (*cancer of the blood*), after non-Hodgkin lymphoma. It is more common in men than women and occurs more frequently after age 70. The disease can damage and weaken the bones, immune system and kidneys.

According to Dr. Patel, CalvertHealth was selected to participate in the six-month collaborative effort with the ACCC along with two other hospitals nationwide. The program brought together CalvertHealth’s multidisciplinary oncology team with visiting experts from top cancer centers across the country to explore barriers and solutions to optimal care for patients diagnosed and treated for multiple myeloma.

“The opportunity to work with the ACCC and to bring all their resources to bear on our improvement project was really exceptional,” said **Kasia Sweeney**, who oversees oncology services at CalvertHealth Medical Center (CHMC).

Commitment to Quality Underscored

“We have a whole team (our cancer committee) who is constantly reviewing data and evaluating how we care for patients looking for opportunities to make improvements,” added Sweeney.

“Every year, our cancer committee selects one or two quality projects to focus on,” she said. “The physicians make suggestions about potential areas of focus based on their own knowledge of the patient population or different challenges they’ve identified within their practice.”

Sweeney went on to add, “For instance, last year we did a lymphedema project that looked at our patient experience to determine what we could do in terms of enhancing education to provide the best possible outcome.

“Now, all new breast cancer patients are referred to physical therapy for a pre-op evaluation,” she said, “and then followed post-op with measurements to make sure we catch any lymphedema early.

“The prior year we did a thoracic study that was highlighted as best practice by the American College of Surgeons Commission on Cancer,” said Sweeney. “This study resulted

in us making changes to our biopsy process in order to expedite diagnosis and treatment.”

Dr. Patel also emphasized the effort devoted to ensuring the highest quality cancer care at CalvertHealth Medical Center. “I feel like there is a great partnership between administration and the medical leadership at CalvertHealth,” she said. “I take tremendous pride and responsibility in being charged with the quality initiatives for our oncology program.”

Dr. Patel said this “*culture of quality*” is the foundation of the patient-centered approach to care at CalvertHealth. “At all times, we want to make sure we’re following the latest evidence-based guidelines, enhancing patient safety, minimizing complications and maximizing value in the health care we deliver.”

Survival Rates Improving

“This quality study was especially important because of the increasing number of multiple myeloma patients who are living longer with newer treatment regimens,” said **Dr. Bilal Ahmed**, who is board certified in medical oncology and hematology. “It has become one of the more common cancers I treat actually.”

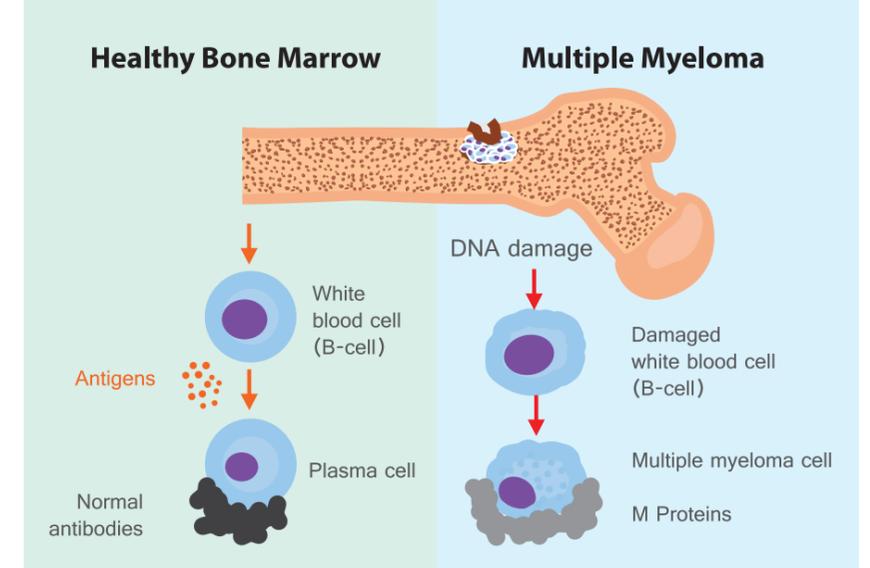
He explained, “Even though the incidence of multiple myeloma is low, the prevalence is high now. Nearly all of the multiple myeloma patients I have seen in the last 10 years are living with what we now call a chronic condition.

“Almost every year, we’re seeing three to four new treatments for multiple myeloma,” said Dr. Ahmed. “Particularly exciting is the research into CAR T cell therapy, which trains your immune system to find and kill cancer.”

He went on to add, “I am very proud of our (oncology) team for incorporating the most cutting-edge treatments as soon as they gain approval.”

Communication and Collaboration Key

According to Dr. Patel, one of the challenges with multiple myeloma patients is effectively addressing the side effects of



“At all times, we want to make sure we’re following the latest evidence-based guidelines, enhancing patient safety, minimizing complications and maximizing value in the health care we deliver.” – Arati Patel, MD

the bone-modifying agents (BMAs), which are administered to treat the bone-related effects caused by the disease. A chief concern being teeth and jaw problems.

“Unfortunately, dental health for this vulnerable population is a huge issue in Southern Maryland,” said Dr. Patel. “Many do not have dental insurance and there is a shortage of dental providers.”

Dr. Patel said the data collected from the study demonstrates CHMC made a meaningful impact in the quality of care for multiple myeloma patients. “We increased the use of evidence-based bone-modifying agents; we did a better job of screening these patients for dental risk; we monitored them better and the patients were more engaged.”

She said enhanced communication and collaboration were key factors in the project’s success. “We had multiple meetings among the members of the oncology team to make sure we were all on

the same page. Additionally, we created multiple tools to make sure these things were happening.”

Infusion center nurse Jennifer Dixon, RN, BSN, agreed with this perspective. “Establishing dental folders and dental screening tools in each myeloma patient’s electronic health record enabled the staff to better assess each patient’s dental health and those at risk for bone-modifying agent complications.”

Dixon went on to add, “The improved order set for bone-modifying agents also helped improve patient safety.”

Dr. Patel recognized the support received from the ACCC during the quality study. “We had constant interaction and support from them. They gave us lots of guidance and feedback. It was a nice collaboration for us.”

She went on to add, “Doing these quality studies enables us to bring the most recent, most innovative and cutting-edge strategies for our patients.”

MEET THE SPECIALISTS

Arati Patel, MD is part of the cancer team at CalvertHealth Hematology & Oncology and is board-certified in medical oncology and hematology. The group also includes board-certified medical oncologists **Bilal Ahmed, MD** and **Kenneth Abbott, MD, FACP**, who is chair of the CalvertHealth Cancer Committee.



Building a Healthy Community TOGETHER

Education, Outreach Vital Strategies in Addressing Priorities

The phrase, “It takes a village,” describes the strategy being used in addressing healthcare needs for all community members in Calvert County. To help put all the pieces together on what CalvertHealth is doing to help our community become healthier, we asked Director of Education & Training and Community Wellness **Mary Golway, MSN, RN, NPD-BC**, and Community Wellness Manager **Erin Farley, MSN, RN**, to explain the process.

Identifying Challenges

The first step in working to build a healthy community is identifying problems and setting priorities every 3 years to fix them.



PRIORITY: CANCER

Incidence rate of breast cancer, prostate cancer, melanoma, cervical cancer and colon cancer were *all higher than state and national rates*, with breast cancer showing an alarming increase.



PRIORITY: HEART DISEASE AND STROKE

With Calvert’s population skewing toward an aging population, the incidence of heart disease skews higher as well, *higher than state and national rates*.



PRIORITY: MENTAL HEALTH & MENTAL DISORDERS

Calvert County’s rate of hospitalizations due to adolescent suicide, intentional self-inflicted injury and pediatric mental health are more than two times the state rate. The death rate from suicide is *higher than state and national figures*. Further, the hospitalization rate due to pediatric mental health is *nearly three times the state average*.



PRIORITY: EXERCISE, NUTRITION & WEIGHT

The percentage of Calvert County adults who are obese is *higher than state and national percentages* and is rising.



CalvertHealth Community Wellness Staff prepare an immunization station at one of their community medical clinics. The Mobile Health Center travels to underserved areas of the county bringing essential services and program to residents who may not have access to traditional health care.

Understanding Priorities and Needs

With almost 350 providers offering more than 45 specialties, CalvertHealth in FY20 served 92,828 patients through outpatient services, deliveries, hospital stays, surgeries and emergencies.

However, according to Golway, through data collected for the 2020 Community Health Needs Assessment, not all members of the community who need health care are getting it.

Gaps in information linked to medical care and subsequent health outcomes were found throughout the data that was compiled in the assessment. “Delays in seeking care and receiving care directly correspond to delays in diagnosis, treatment and recovery,” said Golway.

In all priority areas, lack of knowledge and understanding was identified as a key theme and providing education programs, expanding outreach and increasing community resources were listed as strategies to address these gaps in information.

“It is the responsibility of CalvertHealth’s Community Wellness team to start the conversation on how to bring awareness of

health issues to everyone in the community,” said Farley. “CHMC takes pride in being the catalyst to bring subject matter experts together to discuss the health of our community and ways we can work together to resolve some of these disparities.”

Coming Together to Address Challenges

Once the health priorities have been identified through the Calvert County Health Needs Assessment, CalvertHealth’s Community Wellness hosts a roundtable with all community members who will play a part in addressing the priorities.

“By working collaboratively to identify root causes and establish achievable goals, the Community Health Improvement Roundtable is able to create action plans, monitor what we’ve accomplished year to year and then refocus goals to ensure community health needs are being met,” said Golway.

The roundtable included CalvertHealth Medical Center staff, Calvert County Health Department, Calvert County Social Services, Calvert County Public Schools, Calvert County Office on Aging, the ARC of Southern Maryland, Calvert Alliance Against Substance Abuse, Calvert County United Way, Calvert County Sheriff’s Department, Calvert Family Network and Calvert Hospice.

Out of the roundtable meeting, **four subcommittees** were identified to collaborate and brainstorm in their areas of expertise. Each subcommittee draws on their members to plan the best ways to reach members from different demographics:

- Cancer and Tobacco Coalition
- Diabetes Task Force
- Behavioral Health, Mental Health and Substance Abuse Task Force
- Health Ministry

“A common thread through all four priority areas and all four subcommittees is how to address health disparities and inequities in the community,” said Golway.

“Taking care of the health needs of all people in our community is a big job and no one organization can do it alone,” said CalvertHealth President and CEO **Dean Teague**. “We are proud to work shoulder-to-shoulder with amazing people who represent state and local government, nonprofits and businesses as we help people from every corner of Calvert County live their healthiest lives.”

“A common thread through all four priority areas and all four subcommittees is how to address health disparities and inequities in the community.”

*– Mary Golway, MSN, RN, NPD-BC,
Director of Education & Training and
Community Wellness*

EXPANDING OUTREACH in the Community

As many aspects of the priority areas are intertwined, addressing them simultaneously became a key part of the overall strategy in creating education programs, expanding outreach and increasing community resources.

“If you take a close look at the data, 87 percent of all people who smoke or vape, also have a mental health diagnosis. Cancer, heart disease, diabetes and mental health, along with nutrition and weight, need to be addressed together because they relate to one another,” said Community Wellness Manager Erin Farley, MSN, RN.

Town Halls for High Schools

In order to inform the community on risks associated with smoking and vaping, the coalition has started a program with high schools. The “Real Talk” town halls are virtual due to COVID, and include a panel with high school resource officers, mental health and smoking cessation representatives from the health department, school administrators and CHMC physicians and staff.

CHMC Medical Director of Thoracic Oncology **Dr. Arati Patel**, addresses lung cancer and how people who smoke or vape have a harder time recovering from illnesses such as COVID.

CHMC Behavioral Health Unit Director **Jen Messix, BSN, RN-BC**, addresses mental health aspects of nicotine addiction. Teens and their parents may think vaping is less harmful than tobacco, without realizing that 10 times the nicotine in cigarettes can be loaded into a vaping tool. “As teens and adults are using vaping and smoking as a way to relieve stress, we provide information on other ways to relieve stress, depression and anxiety.

Tobacco Roadshow

Through a grant from the Calvert County Health Department, CHMC Health Educator **Amy Dowling**, visits every middle school biology class to discuss the science behind nicotine addiction, lung disease and heart disease.

Mobile Health Center

To address lack of transportation, CHMC created the Mobile Health Center. With stops at local food pantries, Safe Nights, senior centers, health ministry locations and farmers markets, the mobile center provides services including preventive care and screenings, assistance in applying for health insurance and locating a doctor, referrals to specialty care, immunizations and vaccinations, and dental care.

Health Ministry

The mission of the health ministry is to provide educational resources to people through their places of worship. Expanding the health ministry to include parishes of all sizes throughout the county is a priority. Through brochures and outreach, CHMC is working to provide health information on COVID testing and vaccinations to people in minority and Spanish-speaking communities. “Regardless of a language barrier or cultural barrier, we want all members of the community to have the same access to get tested and vaccinated,” said Farley.

The biggest challenge in addressing the priorities is educating the community on ways they can take charge of their own health.

JUST FOR YOU



TRUST Key to Building a Strong Relationship with Your Primary Care Provider

Regular Screenings Contribute to Improved Overall Quality of Life

When people only seek out the help of healthcare professionals when they are sick, they are missing out on the benefits of having a trusted advocate and confidant. By establishing and maintaining a long-term relationship with a primary care provider (PCP), individuals have access to screenings and diagnostics that not only provide early detection to cancers and diseases, but improve overall health, wellness and quality of life.

Finding the Right Fit

“An ER or urgent care clinic doctor cannot take the place of a primary care doctor,” said **Erin Farley, MSN, RN** who manages community wellness at CalvertHealth. “When you see an ER doctor for a specific injury or illness, that doctor is focused on that injury or illness – not on your overall health.”

Farley went on to add, “Your primary care provider is your advocate for whole body wellness, they are the ones to help you navigate the healthcare system in your community. If you need specialty care or treatment, mental health services or low-cost prescription options, your primary care doctor is the one who can refer you to people who can help.”

*Recently, we sat down with board-certified family medicine physician **Dr. Melissa Stoner** of CalvertHealth Primary Care in Twin Beaches to discuss why it's important to have a primary care doctor.*

Dr. Stoner said she believes a strong doctor-patient relationship is built on respect, communication and patience. “We are a team,” said Dr. Stoner. “I am here to provide guidance but patients also need to take ownership for making appointments when they have concerns and following care plans we’ve developed.”

She encourages patients to search for a doctor they like. “You can ask family and friends, but it’s only until you meet the doctor for yourself can you decide if the fit is right.”

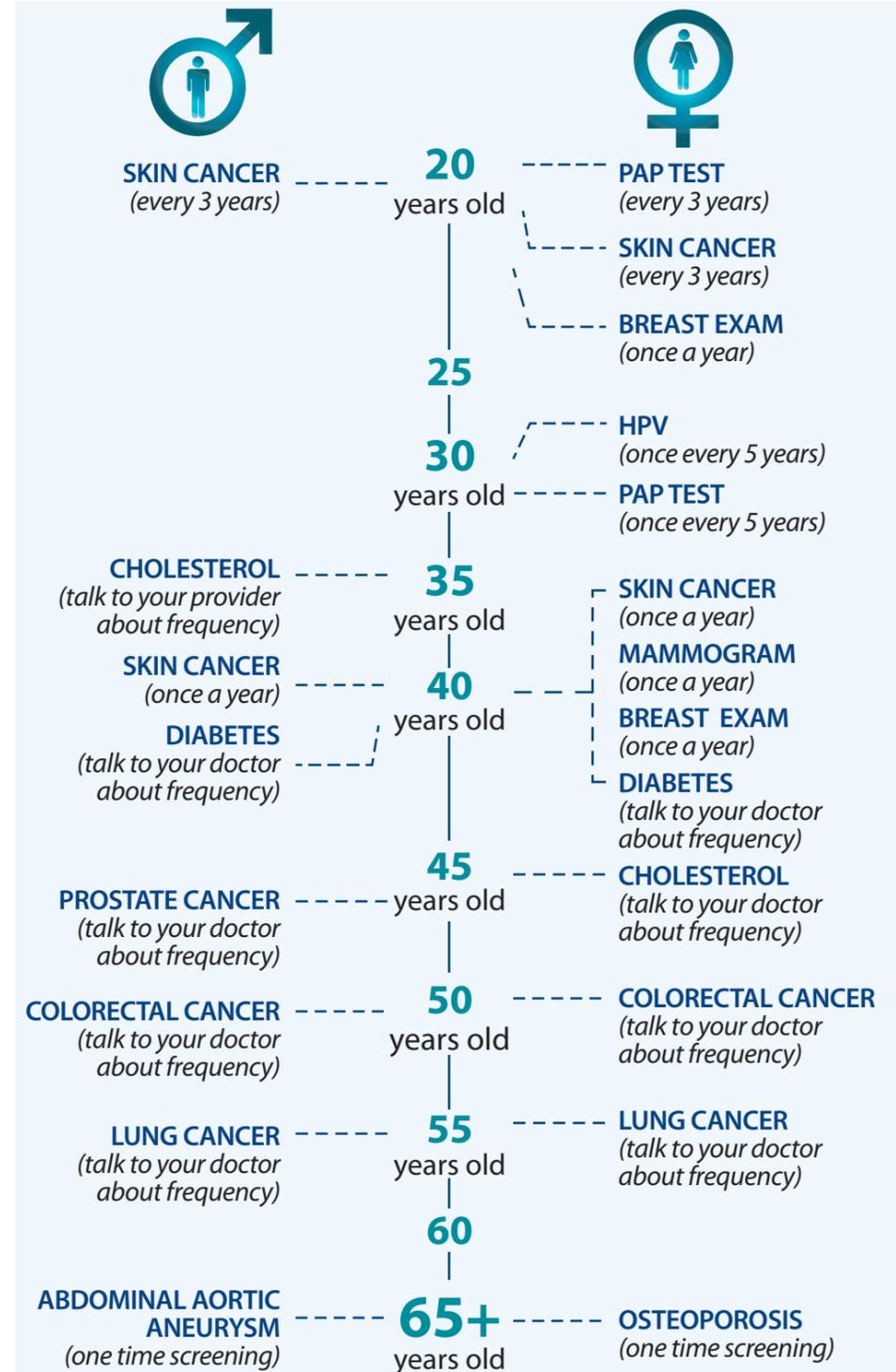
Dr. Stoner understands trust takes time. “Over the years, the patients learn to trust me with their most intimate health concerns. They also learn my character and are more open to share personal or embarrassing issues.”

CalvertHealth Primary Care uses many tools to screen for depression, anxiety, domestic violence and other issues that do not present in physical tests. Dr. Stoner said the practice is especially sensitive to social barriers that can impact a patient’s ability to reach their health goals.

“If lack of transportation is an issue, we want to know about it,” she said. “If a patient is having difficulty affording prescribed medications, we need to know that, too. This is where the trust, respect and communication between patient and the care team result in quality outcomes.”

A rule of thumb, according to Dr. Stoner, is to limit two to three concerns per office visit to allow enough time to adequately address each concern. She suggests scheduling your annual physical or screening appointments in your birthday month as a reminder.

HEALTHCARE SCREENINGS SAVES LIVES



Let's Talk About Prevention

Getting regular, preventative screenings is one of the most important things you can do for your health. Preventative health screenings increase the chances of detecting certain health conditions and cancers early, when they may be easier to treat. These screenings are recommended for those with average risk as part of maintaining optimal health. Your primary care provider, who knows your medical history as well as your family's medical history and monitors your bloodwork and vitals, is best equipped to help you determine which screening plan is right for you.

Early Detection, Early Diagnoses

According to the Centers for Disease Control and Prevention, people diagnosed with diabetes incur on average \$16,750 annually in medical expenses. That's about 2.3 times the medical expenses of a person without diabetes.

"By identifying elevated blood sugar levels during an annual exam, I can address lifestyle choices to help my patients avoid a future diagnosis of diabetes—and future financial burdens," said Dr. Stoner. *See recommended screening guidelines on previous page.*

According to the American Heart Association, at age 24, a person's risk for heart disease is just 20 percent, but by 45 that same person now has a 50 percent risk of heart problems — more than doubled. Bloodwork during an annual exam can identify elevations in cholesterol and triglycerides which are risk factors in cardiovascular disease.

"Again, early warnings can provide an opportunity for patients to adjust their diet and exercise, quit smoking, and lower stress early so as to reduce the risk of having a heart attack or stroke," said Dr. Stoner.

.....
 For help in locating a primary care physician, visit CalvertHealthMedicine.org or call the Physician Referral Line at 888-906-8773.

What Your Doctor Needs to Know

FAMILY HISTORY

Either on a form you are given at your first appointment or in the exam room, you can expect to be asked about your family's medical history. Why? Many conditions or health issues can be hereditary; in other words, they can be passed from grandparent to parent to child.

VITAL SIGNS, HEIGHT AND WEIGHT

Vital signs such as your blood pressure and pulse will help create a baseline for future exams and to signal potential heart and circulatory problems. Knowing your height and weight will help the doctor to know the dosage of any prescriptions that may be needed and to determine your BMI (Body Mass Indicator), which can help identify risks for obesity.

SMOKING AND ALCOHOL USE

You should be honest about the length and frequency of your smoking habit, even if you quit 10 years ago. Current smokers will, of course, be encouraged to quit – and doctors have resources that can help. If you are a former smoker, your doctor can determine if you qualify for lung cancer screenings.

The amount of alcohol you drink is important to share with your doctor. Some medications may be dangerous to take with alcohol.

SAFETY AT HOME

Healthcare providers ask specific questions to determine if a patient would benefit from domestic violence services. This is required by law to provide protection and services to vulnerable persons.

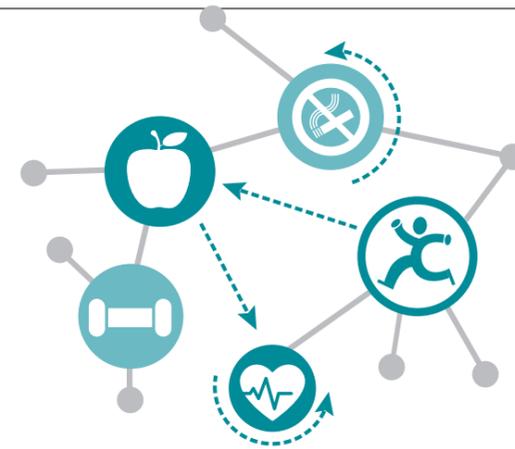
MENTAL HEALTH

Your doctor will ask if you ever contemplate harming yourself or if you have been feeling depressed. These questions are designed to assess the degree of risk for suicide and to open up further conversation. Your doctor is trained to help guide you to not only feeling your best physically, but also mentally.



MEET THE DOCTOR

Melissa Stoner, MD is board certified in family medicine and has been practicing in Calvert County since 2015. She sees patients at CalvertHealth Primary Care at Twin Beaches.



CalvertHealth is proud to bring you classes, wellness programs, health screenings and events to help you live a healthier life. Many classes and events are offered virtually so you can explore from the comfort of your home! For more information about the events listed here, please contact the CalvertHealth Community Wellness Office at 410.535.8233.

DIABETES EDUCATION

Diabetes Self-Management Class

Taught by certified diabetic educators, this comprehensive three-part series includes individual meal planning, meter training, health assessment and goal setting by a registered nurse and certified diabetic educator. Physician referral required, covered by most insurance plans. To register, call 410.414.2778.

HEALTH & WELLNESS

Weight Loss for Life

This eight-week session blends nutritional education with a registered dietitian and group fitness instruction to help you learn how to lose weight and be healthy.

Rock Steady Boxing for Parkinson's

This virtual 12-session course helps fight Parkinson's through non-contact boxing exercises focusing on gross motor movement, balance, core strength, rhythm and hand-eye coordination. This

type of exercise favorably impacts range of motion, flexibility, posture, gait and activities of daily living.

Early Riser Fit for Life & Fit for Life

This virtual class meets twice per week for 4 weeks and is designed for all fitness levels. The exercises are focused on functional training to help perform everyday activities safely and efficiently. The classes include low-impact cardio, strength training, balance, agility and more! Choose from early or afternoon sessions.

NEW! ABC Wellness Coaching

Virtual 8-week program designed to provide accountability, behavioral changes and consistency to your health and wellness regimen.

HEALTHWISE

Personal Nutrition Counseling

Meet one-on-one with a registered dietitian to find out the best nutritional program for you. Call 410.535.8233 to make an appointment.

Red Cross Blood Drives

CalvertHealth is sponsoring blood drives at St. Nicholas Lutheran Church in Huntingtown on April 2, June 4 and July 2. Visit redcrossblood.org to make an appointment.

MATERNITY & FAMILY EDUCATION

Baby Care Basics

This class for new and expectant parents offers a comprehensive overview of baby care basics (*grandparents are invited, too*).

Understanding Childbirth

This interactive online course covers essential information on labor and highlights ways partners can help throughout the process. You'll also get a sense of what labor is really like as you watch several birth stories. You'll even have an opportunity to create your own birth plan! Allow 4-6 hours to complete.

Understanding Breastfeeding

This interactive online course covers the essentials of breastfeeding, including clear animation and plenty of video examples. It lets you know when to call for help and includes partner tips. You will also have the opportunity to track feedings with an easy-to-use tracker! Allow 2-3 hours to complete.

NEW! Infant Massage

Research shows there are many benefits to infant massage including improved sleep quality, improved short-term and long-term development outcomes and stress reduction for parents, caregivers and babies.

CANCER SCREENINGS

CCHD Colorectal Cancer Screenings

You may be eligible for no-cost screenings if: You are age 50 or older, you have no health insurance, your health insurance does not fully cover the cost of the screening or if you are under 50 with a family history or symptoms. Call the Calvert County Health Department at 410.535.5400 x 343 to determine eligibility. *Program funded by the Maryland Cigarette Restitution Fund Program.*

CCHD Breast and Cervical Cancer Screenings - You may be eligible for no-cost screenings if:

You are a woman age 40-64, 65 and older with Medicare Part A only, you have no health insurance, your health insurance doesn't fully cover the cost of screening or you are under 40 with an abnormal exam. Call the Calvert County Health Department at 410.535.5400 x 343 to determine eligibility. *Program funded by Maryland Department of Health and CDC.*

SUPPORT GROUPS

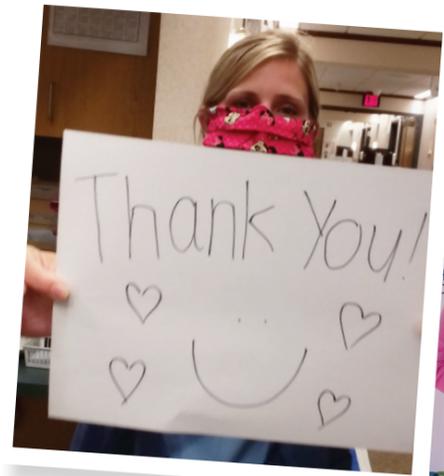
A variety of virtual support groups are available for diabetes, Parkinson's disease, breast cancer and stroke. Call 410.535.8233 for times and links to access the groups.

THE POWER OF COMMUNITY

Standing stronger, together.

We are honored to share with you the incredible impact your 2020 support of the Foundation has had on CalvertHealth. This past year has presented us with many challenges, but we are proud of how our community has come together in support of one another.

CalvertHealth has continued to innovate while addressing growing and diverse healthcare needs. This would not have been possible without the philanthropic spirit and advocacy of supporters like you.



Our community is a special place where friends, families and neighbors care about one another. This has never been more evident than during the COVID pandemic when local businesses and partners came together to support your community hospital in the form of medical supplies and equipment, homemade masks, meals for our frontline workers, financial contributions and words of encouragement.

Breast cancer survivors Dale Morsell and Cindy Jones attended the Survivorship Celebration at the Rod 'N' Reel Resort in October. The event was just one of many made possible through the support of grant funding.

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2020 Key Highlights & Achievements

These successes are a direct result of your kindness and your investment in CalvertHealth.

- Raised \$1.3 million in 2020
- Received support from nearly 500 donors
- Spearheaded the COVID-Response Fund raising \$28,960 in gifts from 70 donors as well as 150 gifts of meals and personal protective equipment to support our workforce
- Recognized more than 84 local young philanthropists for their support of CalvertHealth
- Awarded 50 scholarships totaling \$69,000 to those pursuing degrees in health care
- Launched the Planting the Seeds of Hope Campaign, raising \$256,470 with a matching \$250,000 for a total of \$506,470 for mental health needs in our community
- Recognized 25 healthcare providers on Doctors' Day on March 30

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PLANTING
 THE SEEDS OF

Finding Help.
 Funding Hope.

Hope

As the sole hospital in Calvert County, CalvertHealth takes pride in its 100-year history of bringing safe, quality and accessible care to all patients. In an effort to address our community's growing mental health needs, CalvertHealth set out to create a modern, patient-centered Behavioral Health Unit with distinct treatment spaces for adults and adolescents.



Frank Miller Howes, MD (1885-1949) lost both his parents before the age of ten. It was soon after, he set his sights on becoming a doctor. Although he specialized in cardiology, Dr. Howes felt strongly that healing often required more than a pill and faith and emotion could be a deciding factor.

Thanks to a \$1.7 million grant from the Maryland Hospital Association, a generous anonymous donation and the philanthropic support of our community, CalvertHealth is proud to open the newly renovated **Frank Miller Howes, MD Behavioral Health Unit**.

The following is a list of our campaign sponsors who made this progress possible:

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CalvertHealth Foundation BENEFIT GOLF CLASSIC

Monday, May 3, 2021
The Cannon Club | Lothian, MD

The 32nd Annual CalvertHealth Foundation Benefit Golf Classic will be hosted at the Cannon Club in Lothian, Maryland on Monday, May 3, 2021. The day brings together members of the community dedicated to advancing health care for our local community. We hope you will join us this year and continue your support.

Proceeds from the 32nd annual tournament will be used to support the **Women's Healthcare Initiative** and the expansion of women's health services at CalvertHealth Medical Center including weight management support, breast health and obstetrics and gynecology backed by expert clinicians and the latest technology.

For additional information, please call:
410.414.4570 or visit CalvertHealthFoundation.org/BenefitGolfClassic

