

Charting Trends, Affecting Change

Talbot Family Network

Needs Assessment for Children, Youth and Families

June 2013



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Charting Trends, Affecting Change

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Executive Summary

Charting trends and affecting change. This Needs Assessment of the Talbot County Community of Children and Families is an effort to chart the trends and inform the Talbot Family Network with the data it needs to take the next steps – affect change.

Affecting change is much easier said than done in these economic times. With limited resources, funding decisions need to be made wisely to maximize the effects on a community. Careful consideration needs to be given to how the system works as a whole to best support the holistic growth of children and families.

Out of the 30 data points that were analyzed for this Needs Assessment, the curve for the vast majority was leading in a positive direction. The Talbot Family Network identified 2 indicators and/or New Perspectives recommended by the Governor’s Office for Children, as well as 2 additional indicators of local concern.

Of these thirty, data indicated that 16 were moving in a clearly positive direction – Infant mortality, Low birth weight, Immunizations, Hospitalizations, Child deaths, Health insurance coverage, Asthma prevalence, Kindergarten assessment, Academic Performance – HSA, Academic Performance – MSA, Truancy, High school dropout rate, High school program completion, Graduation of students with disabilities, Educational attainment, and Recidivism. Ten of these data points showed signs of stagnation, slight negative trends or required more information for a clear determination. These 10 indicators warrant close monitoring – Births to adolescents, Obesity, Smoking, Youth employment, Juvenile felony offenses, Maltreatment, Out-of-Home Placement, Homelessness, Crime and Child Poverty.

The remaining four data indicators were of clear concern – Substance Use, Emotional Health, Bullying & Harassment and Hunger. The data was clear that without intervention a negative trend will persist. These 4 issues were heard repeatedly in focus groups, from key informants and in the Community Survey.

Talbot Family Network

Past and Present

In 1995, the Maryland General Assembly enacted a statute (Article 49D of the Maryland Code) requiring each county and Baltimore City to establish a Local Management Board (LMB). The purpose of the LMB was and is to develop and facilitate effective, coordinated, outcome-based family services responsive to the needs, strengths, and priorities of families. The Talbot Family Network, the LMB for Talbot County, was created in 1997 and is comprised of public agency and private sector representatives. Now in its 16th year, the Talbot Family Network has evolved and adapted to the changing economic times and has a consultant that manages day to day operations on a part time basis.

The mission of the Talbot Family Network is, through collaboration with public and private entities, to identify and develop support systems for a safe, healthy and caring community for all Talbot County children and families.

LMB efforts across Maryland are tracked by the Governor's Office for Children, who provide partial funding to operate LMBs and who assess progress through the monitoring of eight results areas organized into three themes - Health, Education and Community. The health of these result areas is measured by 20 indicators of child and family well being. The Governor's Office for Children has added "New Perspectives" to track the trends of potential new indicators. The Talbot Family Network has also elected to add a few issues not adequately assessed by the current indicator.

Theme: Health

Result 1: Babies Born Healthy

Result 2: Healthy Children

New Perspectives – Obesity, Health Insurance Coverage, Substance Abuse

Local Additions – Emotional Health, Smoking, Reproductive Health

Theme: Education

Result 3: School Readiness

Result 4: School Success

Result 5: School Completion

Result 6: School Transition

New Perspectives – Bullying & Harassment

Theme: Community

Result 7: Safety

Result 8: Stability

New Perspectives – Crime, Child Poverty

Charting Trends, Affecting Change

Talbot Family Network's Needs Assessment for Children, Youth and Families

On June 18, 2013 the Talbot Family Network Board of Directors held a Needs Assessment Data Review and Initial Strategic Planning meeting. The Board invited key community partners from the school system, law enforcement, substance abuse prevention coalition, multi-cultural center, Hispanic community and faith organizations. At this time data for each Result area and Indicator was reviewed and discussed.

As a whole, the group categorized each Indicator as one of the following: Positive Progress, Monitor or Concern. Indicators labeled Positive Progress showed a strong indication that the data was moving in a positive direction and that little intervention was needed at this time. Indicators labeled Monitor fell into two categories – either there was a trend that was concerning and warranted close monitoring of the data or there was not enough information to act on at this time. Indicators that were labeled as Concern were agreed upon to be the items that the data was suggesting needed action sooner rather than later.

As you review the Needs Assessment you will see to the right of each indicator the designation (Positive Progress, Monitor or Concern) it was given during this initial meeting. For those items in the Concern category there is generally more data and information about trends provided. This additional information is being utilized to help the Talbot Family Network Board make Strategic Planning decisions.

As a result of this Needs Assessment the Talbot Family Network has identified two key result areas for the Strategic Planning Process.

Healthy Families - Behavioral Health and Stability

Charting Trends, Affecting Change – Talbot Family Network Needs Assessment for Children, Youth and Families has multiple purposes. As stated earlier, the collection of data trends is used to monitor the progress of programs supported by the Talbot Family Network. Other purposes for this needs assessment are:

- 1) Help Talbot County organizations, agencies, and communities determine needs or challenges to enable stronger and more focused collaboration;
- 2) Assist citizens in greater understanding of where progress has occurred in addressing child and family concerns;
- 3) Raise awareness among citizens of the potential return on their state tax investment in the Talbot County Local Management Board;
- 4) Provide a source of assessment data to justify future requests of private and public grant funding to support the sustainability or development of services for children and families in Talbot County; and
- 5) Present an overview of programs and services designed in response to the strongest needs among children and families in Talbot County.

TALBOT COUNTY DEMOGRAPHIC PROFILE

Talbot County continues to be primarily rural, with 62% of the 259 square miles of land area being agricultural, the number one land use in the county (University of Maryland Extension Service). Additionally Talbot County includes 67.7 miles of waterways and 605 miles of shoreline (Maryland Geological Survey). Predominant bodies of water include the Chesapeake Bay, Eastern Bay, Miles River, Wye East River, Harris Creek, Broad Creek, Tred Avon River, Choptank River, and Tuckahoe Creek. Adjacent to Talbot County is the Chesapeake Bay to the west, Dorchester County to the south with the Choptank River as a natural border, Caroline County to the east with the Choptank River and Tuckahoe Creek as natural borders, and Queen Anne's County to the north.

Talbot County has a population of 37,782, with 8,137 of the population being in the age <1 to 19 year old age group according to the 2010 U.S. Census. The most recent U.S. Census data estimates the 2012 population of Talbot County at 38,098. The population increased by 11.8% from 2000 to 2010 (33,806 to 37,782), and is projected to increase at a slower rate through 2020. The population is projected to reach 39,200 by the year 2015 (a 3.8% increase) and projected to reach 40,860 by the year 2020 (an 8.1% increase). Talbot County's projected growth rate is a few percentage points above Maryland's. The state's population is projected to increase by 1.5% from 2010 to 2015, and by 5.2% by the year 2020. The projected change in the youth/adolescent population for Talbot County shows a slight decrease by the year 2015 (from 8,137 to 8,090 / less than a one percent change), and a slower increase compared to the overall population by the year 2020 (from 8,137 to 8,350 / a 2.6% increase).

There were 19,645 housing units in Talbot County according to 2011 U.S. Census data (population: 38,025). The population density in 2011 was 141 people and 73 housing units per square mile.

The median age of Talbot County residents is 47.4, with the age range of 60 – 69 year olds representing the largest population group at 15% according to the 2010 U.S. Census. The residents from age <1 - 19 years comprise 21.5% of the population, and 23.6% of the population is 65 years or older, compared to 26.3% and 12.3% respectively for Maryland.

Population Distribution by Age (2010 U.S. Census)

AGE GROUP	POPULATION		% of TOTAL POPULATION	
	Talbot	Maryland	Talbot	Maryland
Under 5	1,861	364,488	4.9%	6.3%
5 – 9	2,091	366,868	5.5%	6.4%
10 – 14	2,061	379,029	5.5%	6.6%
15 – 19	2,124	406,241	5.6%	7%
20 – 29	3,572	787,246	9.4%	13.6%
30 – 39	3,553	745,903	9.4%	12.9%
40 – 49	5,070	879,748	13.5%	15.2%
50 – 59	5,590	818,608	14.8%	14.1%
60 – 64	2,902	317,779	7.7%	5.5%
65 – 69	2,767	226,596	7.3%	3.9%
70 – 79	3,719	284,340	9.8%	5%
80 & Above	2,472	196,706	6.5%	3.4%
TOTAL	37,782	5,773,552	100%	100%

The Talbot County ethnic distribution according to the 2010 U.S. Census indicates 79% of the population is Caucasian, 12.6% are African American, and 5.5% are Hispanic or Latino. The American Indian/Alaska Native (-11%), and African American (-7.4%) populations have decreased slightly since the year 2000, while all other ethnicity groups have shown an increase. The largest change has been with the Hispanic or Latino population, increasing 237% from the year 2000 to the year 2010 (615 to 2073).

Ethnic Distribution

ETHNICITY	POPULATION		% of TOTAL POPULATION	
	Talbot	Maryland	Talbot	Maryland
American Indian & Alaska Native	48	13,815	0.1%	0.2%
Asian	463	316,694	1.2%	5.5%
African American	4,778	1,674,229	12.6%	29%
Native Hawaiian & Other Pacific Islander	16	2412	0.1%	0.0%
Caucasian	29,829	3,157,958	79%	54.7%
Hispanic or Latino	2,073	470,632	5.5%	8.2%
Other Ethnicities	69	11,972	0.2%	0.2%
Two or More Ethnicities	506	125,840	1.3%	2.2%
TOTAL	37,782	5,773,552	100%	100%

U.S. Census Bureau / www.census.gov

The town of Easton (population: 16,598 – 2012 U.S. Census estimate) is the county seat and serves as the commercial hub for the mid-shore area. U.S. Route 50, a major east-west route of the U.S. Highway System passes through Easton, with an annual daily traffic volume of over 34,000 vehicles in 2012, (Maryland State Highway Administration, Data Services Engineering Division). Easton Airport, a

general aviation airport is located in two miles north of Easton’s town center and serves Talbot County and the mid-shore area. Other incorporated towns in Oxford, St. Michaels and Trappe. Many small towns are located along the waterways, and throughout Talbot County and yield a rich colonial, maritime, and Native American history. In 2010 Talbot County had 1,677 businesses employing 16,622 workers (2010 Economic Report – Talbot County). 2011 U.S. Census data shows 1,458 private nonfarm establishments and 17,162 employees. Healthcare is the largest private employment sector in the county, with Shore Health Systems as the top employer, with 1,641 employees. Federal, state, and local governments are also major employers in Talbot County.

Top Twenty Private Employers – Talbot County – 2011			
Employer	Number of Employees	Employer	Number of Employees
1. Shore Health Systems	1,641	11. Chesapeake Publishing	135
2. Allen Harim Foods	408	12. Lowes	134
3. William Hill Manor	262	13. Wildlife International	130
4. Genesis HealthCare / The Pines	250	14. United Parcel Service	127
5. Walmart	215	15. Giant Food	126
6. Chesapeake Bldg. Components	185	16. McDonald’s	119
7. Aphenia Pharma Solutions	180	17. YMCA of Talbot Co.	115
8. Shore Bancshares	178	18. Comfort Keepers	113
9. Health Integrity	166	19. ACME Markets	103
10. Sotera Defense Solutions	148	20. Inn at Perry Cabin	98

Maryland Department of Business & Economic Development / www.choosemaryland.org

For the 2011 – 2012 school year there were 4,547 students enrolled in the Talbot County Public Schools. Enrollment has remained fairly constant over the last ten years, and is projected to remain stable. Attendance rates were above the state satisfactory standard of 94% in all schools except St. Michael’s High School (93.2%). The graduation rate was 88.8% which exceeds the state standard of 81.5%. The graduation rate goal for 2020 is 95%. All students met their AMOs (Annual Measureable Objectives) for 2012. In addition to the eight public schools, there are four private schools (elementary thru high school) with an enrollment of 1116 students, and two private Pre-K schools.

Talbot County Public School Enrollment, 2011 – 2012 School Year		
School	Enrollment	Attendance Rate
Chapel District Elementary	395	≥95%
Easton Elementary	1,086	≥95%
St. Michael’s Elementary	392	94.2%
Tilghman Elementary	95	≥95%
White Marsh Elementary	350	≥95%
Easton Middle School	737	≥95%
Easton High School	1,103	94%
St. Michael’s Middle / High School	389	94.2% / 93.2%
TOTAL:	4,547	≥ 95% - Elementary 94.6% - Middle 94.1% - High

2012 Maryland Report Card / www.mdreportcard.org

In 2012, Talbot County's unemployment rate averaged 7.4%; above the state average of 6.8%. The unemployment rate is down from a high of 8.5% in 2010, but still significantly above the 3.3% unemployment rate from six years ago in 2007, (Maryland Department of Labor, Licensing & Regulation). The 2011 per capita personal income for Talbot County was \$55,721, compared to \$50,656 for Maryland. However the 2011 median household income for Talbot County was \$55,145, compared to \$70,004 for Maryland, (Maryland Department of Business & Economic Development). Over 17% of the county households had an annual income of under \$25,000 in 2011, and 7.7% of Talbot County residents lived below the poverty level, compared to 9% for Maryland. However, 12.7% of the county's population under the age 18 is living in poverty, compared to 11.5% for Maryland. The percentage of families living in poverty with a female head of the household, no husband present and related children under the age of five was 73.4% compared to 28.3% for Maryland, and is the second highest rate among all counties in Maryland, (U.S. Census Bureau, 2007 – 2011 American Community Survey 5 Year Estimates).

Health

Result 1: Babies Born Healthy

Indicators

Infant Mortality	Positive Progress
Low Birth Weight	Positive Progress
Births to Adolescents	Monitor

Result 2: Healthy Children

Indicators

Immunizations	Positive Progress
Hospitalizations	Positive Progress
Child Deaths	Positive Progress

New Perspectives

Health Insurance Coverage	Positive Progress
Obesity	Monitor
<u>SUBSTANCE USE</u>	<u>CONCERN</u>

Local Additions

<u>EMOTIONAL HEALTH</u>	<u>CONCERN</u>
Smoking	Monitor
Reproductive Health	Positive Progress

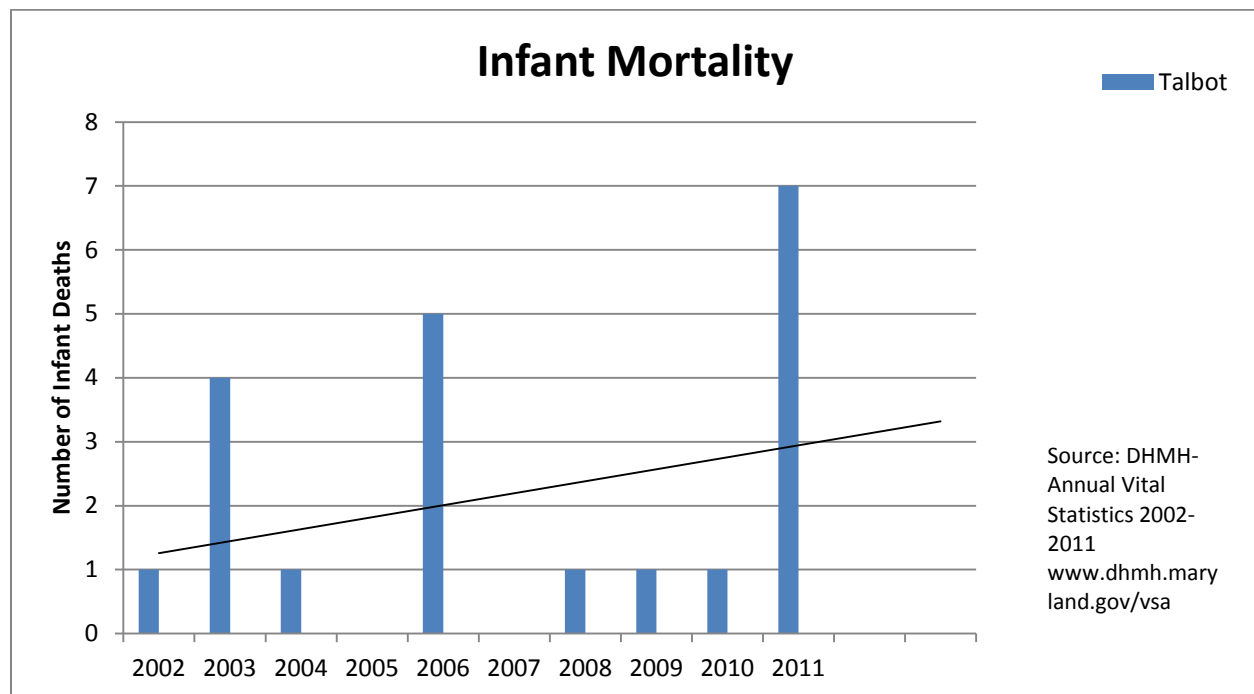
Indicator: Infant Mortality

POSITIVE PROGRESS

Significance: This indicator is a measure correlated to the access to health care, prenatal and pediatric, and environmental risks within the family and home.

Definition: The number of deaths occurring in infants, under one year of age, of live births.

Data:



Overall the rate of infant mortality in Maryland has been trending downward over the last 10 years. During this 10 year time period Maryland reached a high in 2004 with 632 infant deaths and has been on the decline to 493 deaths or 6.7 per 1,000 in 2011. Nationally, according to the CDC, in 2011 the infant mortality rate per 1,000 was 6.05.

A recent study (4/1/13) published in the journal *Pediatrics* links the leveling off of the rate of low birth weights in the US with the advances in neonatal medicine particularly in the area of premature and multiple births. Researchers concluded that the infant mortality rate has not experienced a substantial decline because of the increased proportion of low birth weight and preterm infants being born in the US. This study reports that when adjusted for birth weight and gestational age, normal birth weight and term infants' survival rate is increasing.

In 7 out of the last 10 years, Talbot's infant mortality per year is 0 or 1. Talbot does experience "spikes" in the infant mortality rate. Statistically with numbers this low any rise is experienced as a spike and stands out in the data field. In 2011 there was a "spike" in infant deaths. Of the 7 deaths, 5 were deaths due to complications of extreme prematurity (less than 24 weeks gestation) – 2 of the 5 were from multiple births, the result of

infertility treatment. Of the remaining two, one was a 2 month old accidental asphyxiation and the other was born full term, suffered uterine hypoxia and lived 17 days.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Of the 375 individuals responding to this question on the Talbot Needs Assessment Survey, 3.2% rated the infant death rate as the biggest problem in Talbot County.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Infant Death Rate	31.47% (118)	40% (150)	21.07% (79)	4.27% (16)	3.2% (12)	375

2013 Talbot Needs Assessment Survey

Infant mortality was not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

Indicator: Low Birth Weight

POSITIVE PROGRESS

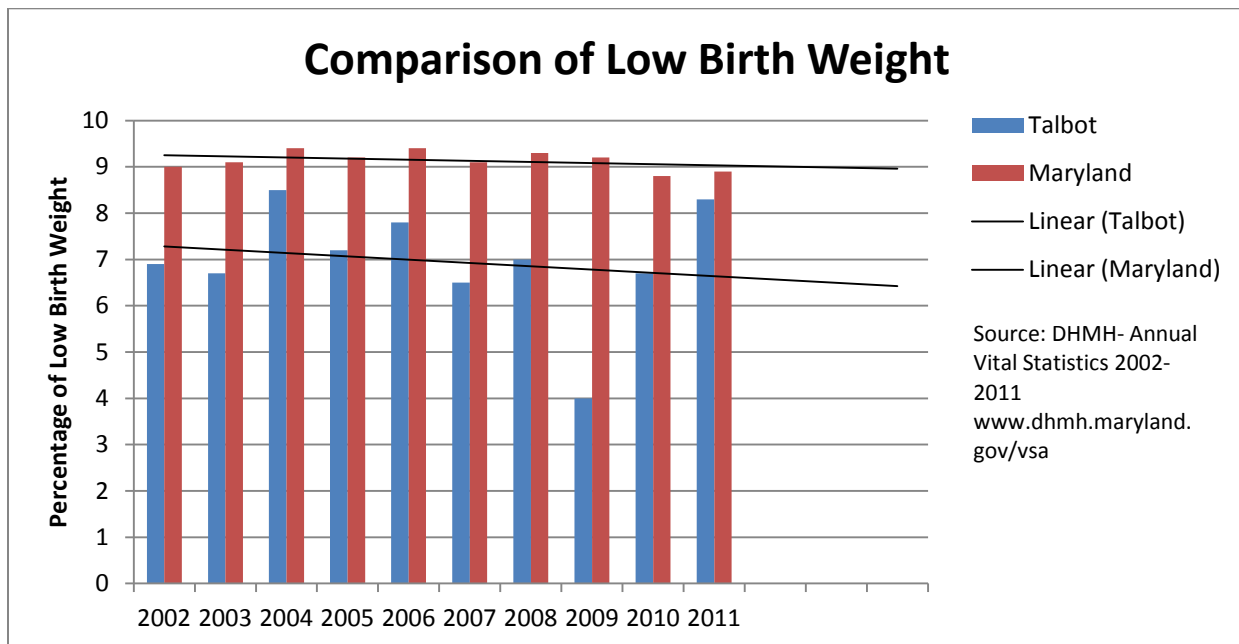
Definition: The percentage of all births with birth weights less than 2,500 grams (approximately 5.5 pounds.)

Significance: An infant's weight at birth is strongly associated with infant survival, health and overall development. Infants weighing less than 2,500 grams are more likely to experience issues related to physical health and development such as mental retardation, cognitive impairment, visual or hearing deficits, chronic respiratory issues and learning difficulties.

Data:

Percentage of Infants with Low Birth Weights, 2011

National	Maryland	Talbot
8.2%	8.9%	8.3%



Nationally, according to the CDC, in 2010, 8.2% of infants were born with low birth weight. This rate has held steady since 2006. A recent study (4/1/13) published in the journal *Pediatrics* links the leveling off of the rate of low birth weights in the US with the advances in neonatal medicine, particularly in the area of premature and multiple births.

In Talbot there is a slow but steady decrease in the rate of Low Birth Weights with the 10 year average being 6.96%.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Of the 372 individuals responding to this question in the Talbot Needs Assessment Survey, 4.3% rated Low Birth Weight Babies as the biggest problem in Talbot County.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Low Birth Weight Babies	21.51% (80)	34.41% (128)	30.11% (112)	9.68% (36)	4.30% (16)	372

2013 Talbot Needs Assessment Survey

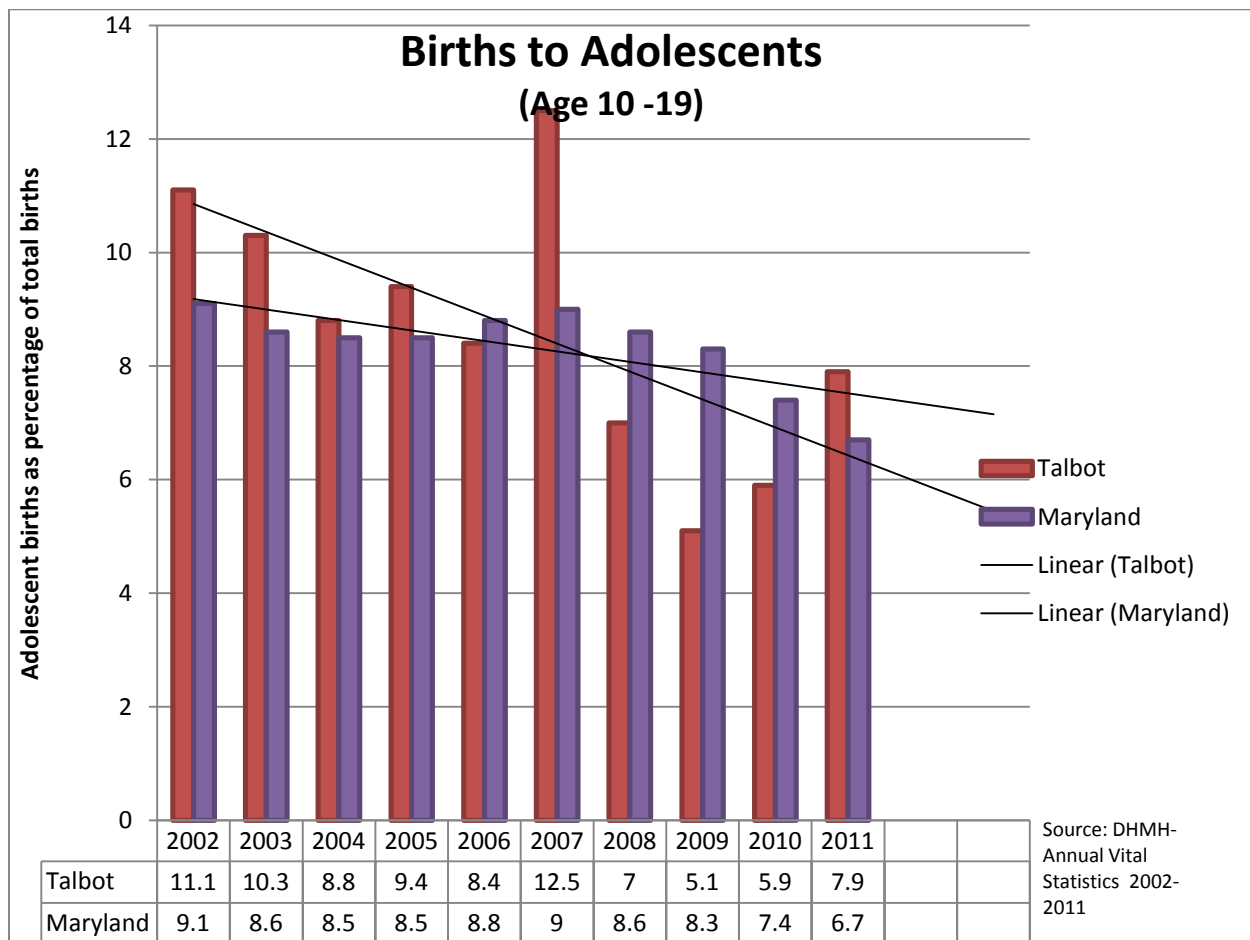
Low Birth Weight was not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

Indicator: Births to Adolescents

Definition: The rate of births, per 1,000, to adolescent females ages 10-19.

Significance: According to the National Institutes of Health, babies born to adolescent mothers are more at risk of low birth weight, prematurity, infant mortality, and/or developmental disabilities. Teen mothers are more likely to develop health complications related to pregnancy, drop out of high school, be unemployed or underemployed and earn lower wages than mothers that delay childbirth until after the age of 20. Later in life, girls born to teen mothers are more at risk of becoming teen mothers themselves and boys have a higher than average rate of being arrested and jailed.

Data:



Talbot County, with a few exceptional years, has shown a decline in births to adolescent mothers for the last 10 years. In 2011 there were 25 births to adolescent mothers in Talbot County. The decline is predicted to continue at a slow rate of .32% per year which is approximately .1% faster than Maryland’s declining adolescent birth rate. Nationally the adolescent birth rate has dropped dramatically and is at the lowest level in 7 decades for teens aged 15-19 at 34.3 per 1,000. <http://www.cdc.gov/nchs/data/databriefs/db89.pdf>

Adolescent Births by Age / Race – Talbot County																		
Year	White			White, Non-Hispanic			Black			Black, Non-Hispanic			Asian and Pacific Islander			Hispanic, All Races**		
	<15	15 to 17	18 to 19	<15	15 to 17	18 to 19	<15	15 to 17	18 to 19	<15	15 to 17	18 to 19	<15	15 to 17	18 to 19	<15	15 to 17	18 to 19
2011	0	4	4	0	4	3	0	5	9	0	5	9	*	*	*	0	0	3
2010	0	2	12	0	2	10	0	3	4	0	3	4	*	*	*	0	0	2
2009	0	6	5	0	3	4	0	2	5	-	-	-	0	0	0	0	3	1
2008	2	4	9	0	0	8	1	1	10	-	-	-	0	0	0	2	4	1
2007	0	8	25	0	3	19	1	5	6	-	-	-	0	0	1	0	5	6
2006	0	6	15	0	4	10	0	5	3	-	-	-	0	0	0	0	2	5
2005	0	11	15	0	8	11	0	3	5	-	-	-	0	0	0	0	3	4
2004	0	4	16	0	3	10	0	6	7	-	-	-	0	0	1	0	1	6
2003	0	5	14	0	5	10	0	5	7	-	-	-	0	0	0	0	0	8
2002	1	7	12	1	6	9	0	4	11	-	-	-	0	0	0	0	1	3

*Not Listed

**Includes all births to mother's of Hispanic origin of any race.

For the years 2002 – 2009, the Hispanic race category includes races categorized as “unknown” or “other”.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Of the 383 individuals responding to the Talbot Needs Assessment Survey, only 17.23% indicated that the Teen Pregnancy rate was the biggest health related problem.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Teen Pregnancy Rate	7.57% (29)	15.40% (59)	32.38% (124)	27.42% (105)	17.23% (66)	383

2013 Talbot Needs Assessment Survey

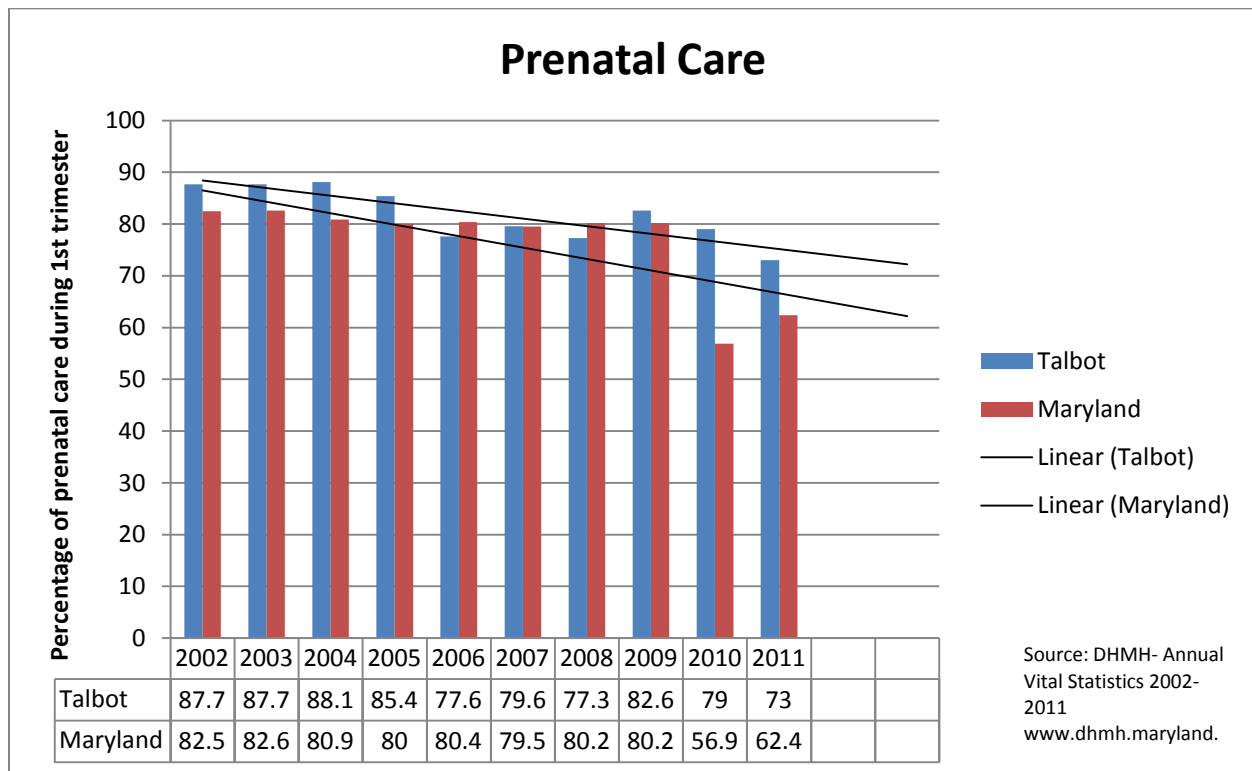
Sixteen youth responded to the Youth Talbot Needs Assessment Survey and of these 31.25% indicated that the Teen Pregnancy was a big health related problem.

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Teen Pregnancy	25% (5)	37.5% (6)	31.25% (5)	16

2013 Youth Talbot Needs Assessment Survey

Births to adolescents was not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

Supplemental Information



BIRTHS / PRENATAL CARE / LOW BIRTH WEIGHT / INFANT-FETAL DEATHS

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Births	334	341	388	363	357	368	387	351	357	315
Early Prenatal Care	293	299	342	310	277	293	299	290	282	230
Late or No Prenatal Care	8	9	9	14	17	21	30	17	17	23
Births to Adolescents	37	35	34	34	30	46	27	18	21	25
Low Birth Weight Babies	23	23	33	26	28	24	27	14	24	26
Very Low Birth Weight Babies	2	8	9	5	6	3	8	1	4	6
Perinatal Deaths	2	4	4	1	2	3	1	1	3	5
Fetal Deaths	2	2	6	3	3	3	2	1	5	0
Infant Deaths	1	4	1	0	5	0	1	1	1	7

Source: DHMH – Annual Vital Statistics 2002 – 2011

www.dhmh.maryland.gov/vsa

Indicator: Immunizations

POSITIVE PROGRESS

Definition: The percent of children ages 19 through 24 months who have received the full schedule of recommended immunizations.

Significance: Children that are immunized are more likely to avoid death, disability or developmental delays associated with immunization preventable diseases.

Data: Children under age 2 Immunized on schedule, 2010

National	Maryland	Talbot
74.9%	73.3%	Not Available

Estimated Vaccination Coverage Among Children Between the Ages of 19 Months - 35 Months, Survey Years 2002 - 2010v

	2002	2003	2004	2005	2006	2007	2008	2009	2010
MD	70.7%	77.4%	76.0%	78.6%	78.1%	91.3%	80.2%	84.0%	73.3%
Baltimore City	69.1%	74.3%	80.0%	76.5%	72.2%	72.3%	74.6%	**	**
Rest of State	71.0%	77.8%	75.4%	78.9%	78.9%	**	81.0%	**	**
US	65.5%	72.5%	76.0%	76.1%	76.9%	77.4%	76.1%	76%	74.9%

** Data come from the National Immunization Survey, which are unavailable because the sample size is not sufficient to disaggregate further beyond the state level.

Data Source: National Immunization Survey / Maryland Results for Child Well-Being 2011 / Maryland Governor's Office for Children.
www.goc.maryland.gov

Unfortunately the data for this indicator was unobtainable on the county level. Children under the age of 2 largely receive their health care via their Primary Care Provider and their immunizations are covered by various funding streams – private insurance, medical assistance, private pay, etc. – so while data is collected on the state level it is not collected at the jurisdiction level until school age. To enter a public school program a child must be fully immunized as per Maryland law.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Of the 373 individuals responding to this question in the Talbot Needs Assessment Survey, only 3.49% rated the Under age 2 Immunization Rate as the biggest problem in Talbot County.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Under age 2 Immunization Rate	26.81% (100)	37.53% (140)	25.93% (93)	7.24% (27)	3.49% (13)	373

2013 Talbot Needs Assessment Survey

Immunization Rate or other immunization related issues were not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

Indicator: Hospitalizations

POSITIVE PROGRESS

Definition: Rate of injury-related inpatient hospital discharges per 1,000 children, age birth to 19 years.

Significance: Childhood injuries requiring hospitalization are significant events, both physically and emotionally, for children and families. These hospitalizations exact a cost that can be measured in dollars and in future health outcomes for that child.

Data:

Nonfatal Injury* Hospitalization Rate among Children (0-21 yrs) per 100,000

	2006	2007	2008	2009	2010
Unintentional Injuries	289.5	288.3	268.5	258.2	226.0
Assault Injuries	59.4	55.4	53.9	46.3	42.7
Self-Inflicted Injuries	40.9	42.6	42.7	47.3	48.6

*Selected injury categories

Data Sources: MD HSCRC Inpatient Hospital Discharge Dataset, Population: MDP / Maryland Results for Child Well-Being 2011 / Maryland Governor's Office for Children. www.goc.maryland.gov

Child injury hospitalization data was not available on the county level so at this time we are unable to assess local trends.

According to the CDC, 1 child dies every hour from an injury, 1 in 5 child deaths is due to an injury and every 4 seconds a child is treated in an emergency room due to an injury.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Child Hospitalization Rate	16.39% (60)	33.61% (123)	35.25% (129)	10.11% (37)	4.64% (17)	366
Child ER Visit Rates	12.22% (44)	22.50% (81)	37.50% (135)	18.33% (66)	9.44% (34)	360

2013 Talbot Needs Assessment Survey

Of the 366 individuals responding to this question in the Talbot Needs Assessment Survey, only 4.64% indicated that Child Death was of major concern in Talbot County. Additionally 360 individuals responded to a question regarding the rate of Child Emergency Room Visits and 9.44% indicated that this was of concern to Talbot County.

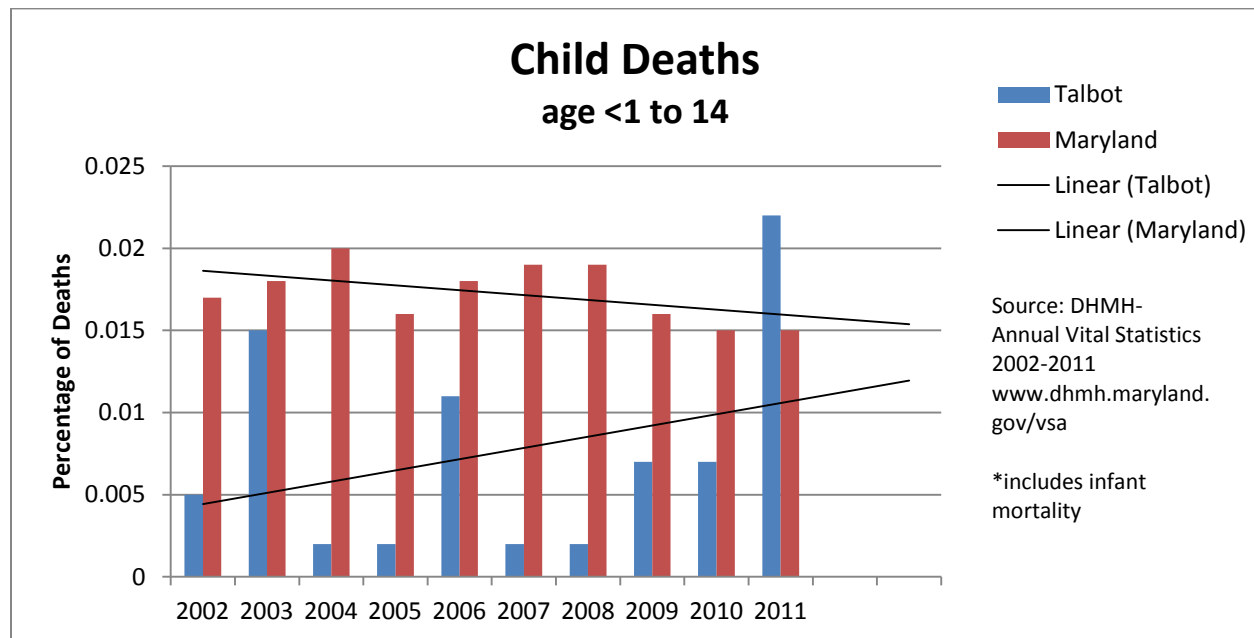
Child Hospitalization rates were not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

Indicator: Child Deaths

Definition: The death of a child between the age of 1 and 17 years.

Significance: This indicator measures the worst health outcome for children. While death may occur from various causes, most are frequently related to preventable factors such as injuries from motor vehicle accidents, drowning, falls, fires, poisoning, homicides and suicides.

Data:



Note: This includes infant mortality data. Two of the 9 deaths in 2011 are between the ages of 1-14.

Deaths age 1 -17

Jurisdiction	2005	2006	2007	2008	2009	Total
Talbot	2	0	2	1	3	8
Maryland	301	296	366	307	253	1523

Maryland Child Death Report 2011, DHMH

Statistically when working with small jurisdictions and data sizes it is beneficial to analyze data in multi-year averages. During the period of 2005-2009, the mortality rate for children, age 1-17, was the same for Talbot and Maryland at 23.7 per 100,000.

According to the Maryland Child Death Report 2011 (DHMH) the number one cause for child death, across all ages, in Maryland between 2007-2009 is Unintentional/Accidental Injury. This encompasses falls, motor vehicle accidents, poisoning, drowning, etc.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Of the 368 individuals responding to the question on the Talbot Needs Assessment Survey, only 8.15% rated Child/Teen Death as the biggest problem in Talbot County.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Child/Teen Death	19.57% (72)	28.26% (104)	28.53% (105)	15.49% (57)	8.15% (30)	368

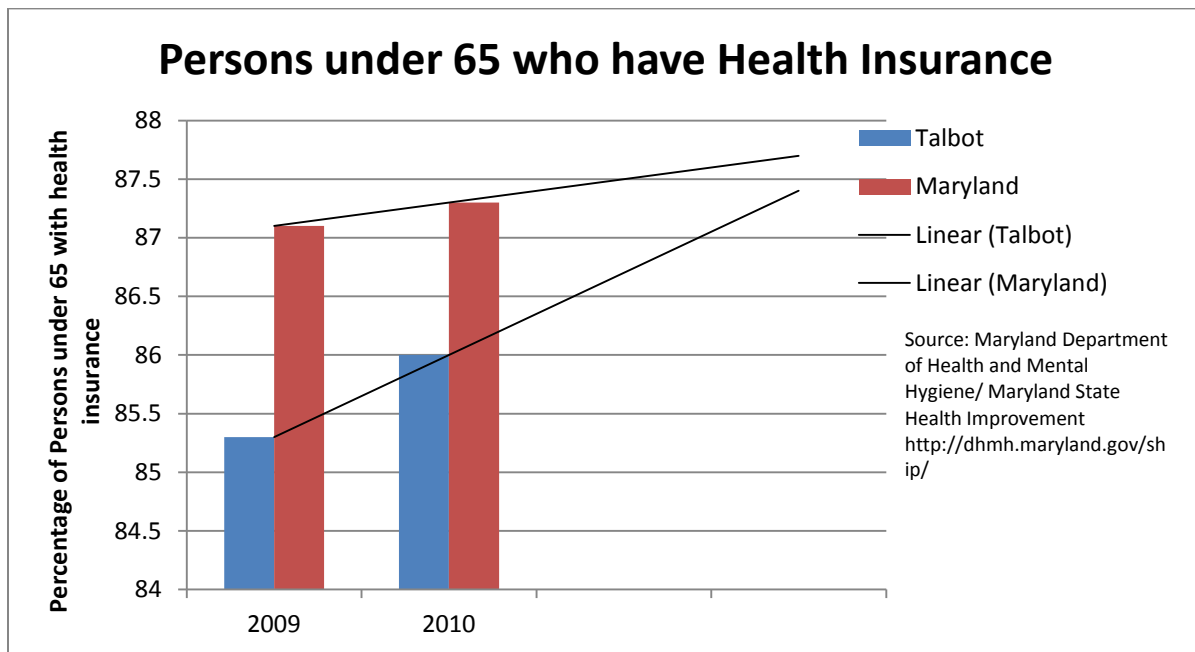
2013 Talbot Needs Assessment Survey

The Child Death rate was not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews.

New Perspectives

Health Insurance Coverage

POSITIVE PROGRESS



The Nation is on the cusp of great change in the area of Health Insurance Coverage, with many of Health Care Reform measures set to begin on January 2014. Many more Marylanders will be eligible for Medical Assistance; more services will be offered to pregnant women and children. Here are a few of the changes either already implemented or ready for implementation in 2014.

FAMILIES

***No kids can be denied coverage because of a pre-existing condition.** Children under age 19 cannot be denied health insurance because of a pre-existing condition like diabetes or asthma. In 2014, no one will be denied because of a pre-existing condition.

***Young adults can stay on their parents' plan.** Young adults (ages 18-26) can now stay on their parents' health insurance plan if they don't have insurance through their job.

***More health care services for moms and kids will be covered.** In 2014, pregnancy and newborn care, vision care, and dental care for kids will be covered in all new health plans sold through the Maryland Health Benefit Exchange.

***More Marylanders will be eligible for Medical Assistance.** In 2014, Medical Assistance will cover individuals making up to about \$15,000 a year or a family of four making up to about \$30,500 a year. (To see if you are eligible for Medical Assistance today, visit: <http://dhr.maryland.gov/fiaprograms/medical.php/>)

YOUNG ADULTS

***Young adults can stay on their parents’ plan.** Young adults (ages 18-26) can stay on their parents’ health insurance plan if they don’t have insurance through their job.

***Young adults under age 19 cannot be denied coverage because of a pre-existing condition.** If you’re under age 19, you cannot be denied insurance because of a pre-existing condition like diabetes or asthma. If you’re 19 years or older and have been denied coverage, you may be eligible for the [Maryland Health Insurance Plan](#).

***51,868 young adults** in Maryland have gained insurance since June 2011

Percentage of Children with Medical Insurance Coverage

	2007	2008	2009
Maryland	90.5%	94.5%	94.7%
United States	88.8%	90.3%	90.9%

Definition: The percentage of children in Maryland ages 0 – 18, compared to federal rates of health insurance coverage.
Data Source: US Census Bureau, Small Area Health Insurance Estimates (SAHIE)

Health Insurance Coverage – Talbot County

(2009 – 2011 American Community Survey 3 Year Estimates)

Civilian non-institutionalized population:	37,317
With health insurance coverage:	32,669 – 87.5%
With private health insurance coverage:	27,819
With public health insurance coverage:	12,779
No health insurance coverage:	4678 – 12.5%

Civilian non-institutionalized population under age 18:	7323
No health insurance coverage:	427 – 5.8%

Source: U.S. Census Bureau (2009 – 2011 American Community Survey 3 Year Estimates)

According to US Census Bureau estimates, in 2011, 94.2% of Talbot County Children, ages 0 -18, had health insurance.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

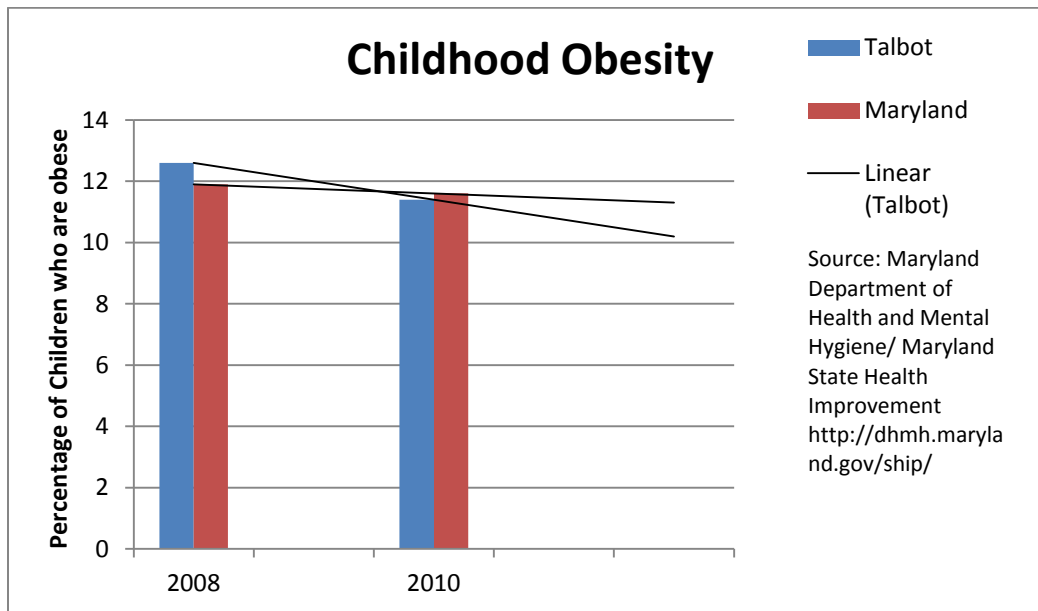
Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
No Health Insurance	7.22% (28)	11.08% (43)	19.3% (75)	31.70% (123)	30.67% (119)	388

2013 Talbot Needs Assessment Survey

Of the 388 individuals responding to this question, 30.67% indicated that the lack of health insurance was a concern in Talbot County. This issue rated of larger concern amongst minority populations. Of the 41 respondents that are Hispanic 48% rated this issue their primary concern and of the 68 African Americans respondents 40% also rated this issue as a primary concern.

Obesity, in both children and adults, has taken the national stage over the past 10 years. Children are developing “adult” chronic health diseases such as Type 2 Diabetes and Hypertension. Adults are experiencing the onset of these conditions younger and in combination which leads to more complicated medical needs and high health care costs.

In Maryland, on a policy level, much is being done to turn the curve and the effects are being seen. During the 2011 and 2012 legislative session a total of 39 policy topics were introduced in areas concerning obesity and 10 were enacted.



Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Obesity in Adults was rated as a significant health concern by adults responding to the Talbot County Needs Assessment Community Survey. Of the 381 adults responding, 40.68% listed this area as the biggest problem in the Health related section of the survey. Obesity was not expressed as a concern by focus groups or key informants.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Obesity in Children/Teens	4.13% (16)	7.24% (28)	20.41% (79)	42.12% (163)	26.10% (101)	387
Obesity in Adults	4.99% (20)	4.46% (17)	17.06% (65)	32.81% (125)	40.68% (155)	381

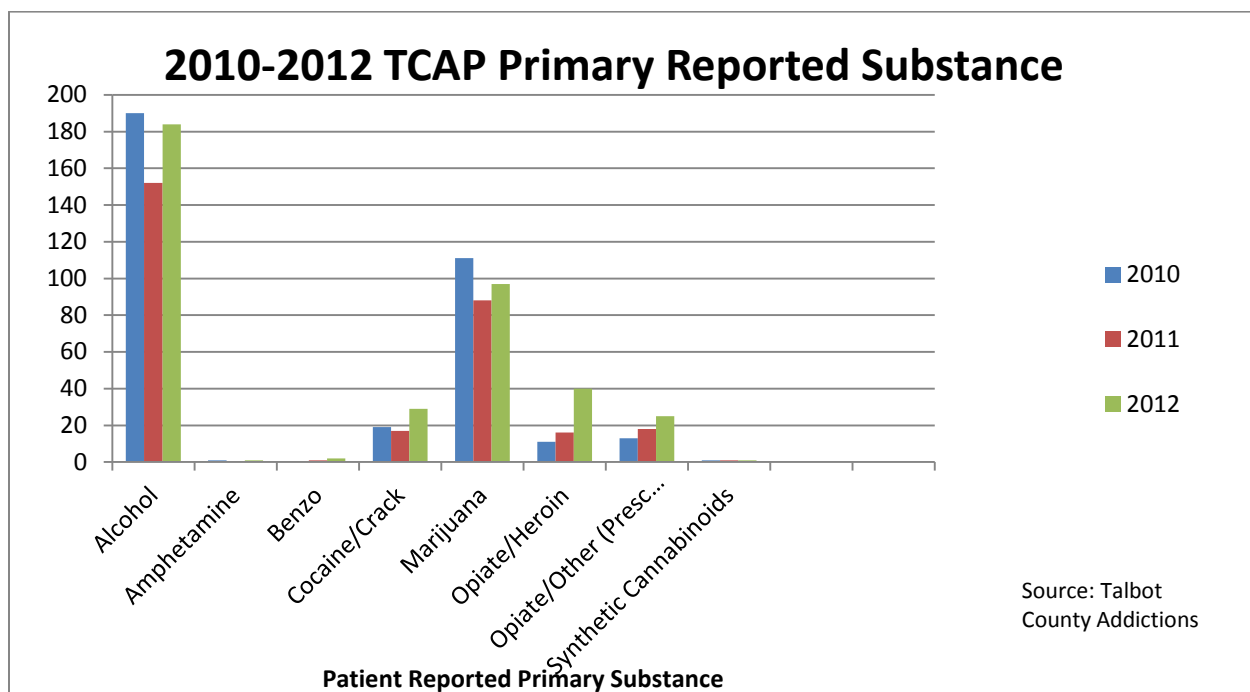
2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Obesity in Children/Teens	29.41% (5)	52.94% (9)	17.65% (3)	17

2013 Youth Talbot Needs Assessment Survey

Per the Maryland Alcohol and Drug Abuse Administration’s Outlook and Outcomes Report for 2012 the most significant increases over the four year period of 2008-2012 involved:

- Oxycodone (190 percent);
- Other Opioids (105 percent);
- Benzodiazepines (130 percent);
- PCP (38 percent); and,
- Hallucinogens (34 percent).



This trend is echoed in Talbot County. The Talbot County Addictions Program (TCAP), a Talbot County Health Department program, shared de-identified enrollment data for the last three years. This data includes numbers enrolled for adolescents and adults and the primary drug of use reported at intake. TCAP has experienced a 264% increase, from 2010 to 2012, in the clients reporting Heroin as their primary drug, a 92% increase in Prescription Opiates, 200% increase in Benzodiazepines and a 53% increase in Cocaine/Crack.

Talbot County Addictions Program, Primary Drug Reported upon program entry

Primary Drug Reported	2010			2011			2012		
	Number of Clients			Number of Clients			Number of Clients		
	Adults	Adolescents	Total	Adults	Adolescents	Total	Adults	Adolescents	Total
Alcohol	172	18	190	148	14	162	172	12	184
Amphetamine	1	0	1	0	0	0	0	1	1
Benzo	0	0	0	1	0	1	2	0	2
Cocaine/Crack	16	3	19	16	1	17	29	0	29
Marijuana	87	24	111	71	17	88	80	17	97
Opiate/Heroin	10	1	11	15	1	16	39	1	40
Opiate/Other (Presc Meds)	11	2	13	17	1	18	24	1	25
Synthetic Cannabinoids (K2+)	1	0	1	1	0	1	0	1	1
TOTAL	298	48	346	269	34	303	346	33	379
Co-Occurring Clients	84	25	109	77	28	105	82	21	103

Percent Change from 2010 to 2012 in TCAP Client's Primary Drug Report				
Primary Drug	Total Clients 2010	Total Clients 2012	Difference	Change
Alcohol	190	184	-6	-3%
Amphetamine	1	1	0	0%
Benzo	0	2	2	200%
Cocaine/Crack	19	29	10	53%
Marijuana	111	97	-14	-13%
Opiate/Heroin	11	40	29	264%
Opiate/Other (Presc Meds)	13	25	12	92%
Synthetic Cannabinoids (K2+)	1	1	0	0%
TOTAL	346	379	33	10%
Co-Occurring Clients	109	103	-3	-6%

As a result of these increases, Talbot County has experienced a growing number of Intoxication Deaths. The Talbot County Addiction Program is working with the state to aid in the development of Maryland Opioid Overdose Prevention Plan which will be final in July 2013.

Death Rate for Total Intoxication Deaths – Talbot County

2007 – 2011: 9.8/100,000 population or an average of 3.8 per year. These deaths result from either opioid-related substances or cocaine intoxication.

Total Intoxication Deaths

	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>
Talbot	5	4	3	3	1
Maryland	777	658	709	643	663

Source: Maryland Department of Health and Mental Hygiene / Alcohol and Drug Abuse Administration / Drug and Alcohol Intoxication Deaths in Maryland, 2007 – 2011

While Maryland admission to State-Supported Treatment Programs has increased Talbot County’s rate of admissions has decreased since a high of 526 in 2010. ADAA grant funds to Talbot County also decreased by \$143,154. Talbot County, by population percentage, in 2011 had a higher rate of admission to State-Supported Treatment Programs with a rate of 1.3% compared with a rate of .8% for Maryland. It is unclear whether this denotes high need or better access.

Patient Residence for Admissions to State-Supported Alcohol and Drug Abuse Treatment Programs

	<u>FY2008</u>	<u>FY2009</u>	<u>FY2010</u>	<u>FY2011</u>	<u>FY2012</u>
Talbot	452	493	526	496	410
Maryland	40,119	41,513	43,751	45,089	45,132

Source: Maryland Department of Health and Mental Hygiene / Alcohol and Drug Abuse Administration / Outlook and Outcomes FY2012

Residence of Adolescents Admitted to State-Supported Alcohol and Drug Abuse Treatment Programs

	<u>FY2008</u>	<u>FY2009</u>	<u>FY2010</u>
Talbot	106	86	62
Maryland	3747	3819	3792

Source: Maryland Department of Health and Mental Hygiene / Alcohol and Drug Abuse Administration / Adolescent Outlook and Outcomes FY2010

Projected FY2012 Expenditures of Substance Abuse Treatment Services

(Medicaid expenditures do not include pharmacy expenditures)

Jurisdiction	Medicaid FY12 Projected Expenditures on Substance Abuse Services			AADA FY12 Budgeted Grant Funds	Total Projected Expenditures including Expansion
	Expenditures on Services Covered prior to 2010 Coverage Expansion	Increase on Expenditures as a result of 2010 Coverage Expansion	Total Expenditures		
Talbot	\$54,981	(\$6129)	\$48,852	\$622,812	\$671,664
Maryland	\$35,091,565	\$30,421,454	\$65,513,019	\$77,340,880	\$142,853,899

Substance Abuse Treatment Expenditures - FY2009 and FY 2012

	Medicaid			ADAA			Total Difference
	FY09	FY12	Difference	FY09	FY12	Difference	
Talbot	\$33,772	\$48,852	\$15,080	\$765,966	\$622,812	-\$143,154	-\$128,074
MD	\$24,153,756	\$65,513,019	\$41,359,263	\$92,660,613	\$77,340,880	-\$15,319,733	\$26,039,530

Source: Source: Maryland Department of Health and Mental Hygiene / Alcohol and Drug Abuse Administration / Joint Chairman Report – substance Abuse Treatment Services Executive Summary

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Substance Abuse in Teens	5.91% (23)	7.20% (28)	19.28% (75)	36.76% (143)	30.85% (120)	389
Substance abuse by parents	9.25% (36)	6.94% (27)	25.96% (101)	33.68% (131)	24.16% (94)	389

2013 Talbot Needs Assessment Survey

Substance Abuse by Parents, in the Family and Community section of the Talbot County Needs Assessment Community Survey, and Substance Abuse by Teens, in the Health section of the survey, were rated 1st and 3rd respectively, as the biggest problem facing Talbot County children and families. Caucasian individuals overwhelming rated, 74%, Substance abuse by Teens as either a 4 or 5 on the 5 point likert scale, with 5 labeled the Biggest Problem.

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Substance/Alcohol Use in Teens	23.53% (4)	29.41% (5)	47.06% (8)	17
Substance abuse by Parents	50% (8)	37.50% (6)	12.50% (2)	16

2013 Youth Talbot Needs Assessment Survey

Just under 50% of the Teens taking the Youth version of the Needs Assessment Survey rated Substance/Alcohol Use by Teens as a Big Problem. This question received the highest percentage of 3s or Big Problem, across all questions, in all themes on the Youth Needs Assessment Survey.

Key Informant Interview

Paula Lowry, Talbot County Health Department Prevention Coordinator, reports that Talbot County has historically had some of the highest levels of teen substance use on the Eastern Shore. She indicates that rural areas are seeing the highest growth in substance use/abuse trends and a report out of US Health and Human Services echoes this stating that rural states across the country are listing substance use as a major rural health concern.

Ms. Lowry indicated that unfortunately since the Maryland Adolescent Survey (MAS) was discontinued in 2007 there has not been a really good window into the substance use/abuse trends occurring amongst Talbot's Adolescent population. The Youth Risk Behavior Survey, which is now in place on the state level, only

surveys a very small percentage of Talbot students and does not give county level data. Ms. Lowry indicated that she believes some trends are continuing – a spike in substance usage in 10th grade when many students get their license and then a leveling off in 12th grade. Even with this the 2007 MAS revealed that 60% of 12th graders were reporting that they had drunk alcohol within the last 30 days.

Ms. Lowry said she believes two mindsets are at work in Talbot County – the more affluent cocktail set and the work hard/play hard set. She states that drinking is cultural in both of these groups and that this is generationally transmitted to their children. In essence she states, “We have a youth problem because we have an adult problem.”

Asthma Prevalence

POSITIVE PROGRESS

Asthma, Current prevalence, 2009

National	Maryland	Talbot
8%	9.1%	6.2%
	<u>Talbot County</u>	<u>Maryland</u>
Adult asthma lifetime prevalence	13.1% (2007 – 2009)	13.7% (2007 – 2009)
Adult asthma current prevalence	6.2% (2007 – 2009)	9.1% (2007 – 2009)
Asthma emergency department visit rates	60.9 per 10,000 (2009)	72.3 per 10,000 (2009)
Asthma hospitalization rates	21.9 per 10,000 (2009)	19.8 per 10,000 (2009)
Total number of adults with lifetime asthma:	3500 (2007 – 2009)	594,609 (2007 – 2009)
Total number of adults with current asthma:	1658 (2007 – 2009)	389,000 (2007 – 2009)
Total number of emergency department visits:	173 (2009)	39,834
Under 18 years:	52 (rate – 72.7 per 10,000)	(rate - 136.1 per 10,000)
18 years and older:	121 (rate – 57 per 10,000)	(rate – 50.3 per 10,000)
Total number of hospitalizations:	86 (2009)	11,474
Under 18 years:	Not reported	(rate – 25.4 per 10,000)
18 years and older:	68 (rate – 19.7 per 10,000)	(rate – 13.2 per 10,000)

The ED visit rate for asthma among children (< 18 years) in Talbot County was 1.9 times lower than the ED visit rate for Maryland children (72.7 vs. 136.1 per 10,000).

The asthma ED visit rate was approximately 3.7 times higher in Black residents compared to White residents (151.3 vs. 41.4 per 10,000). The asthma hospitalization rate was 3.9 times higher in Black residents compared to White residents (59.4 vs. 15.3 per 10,000).

Source: Asthma in Maryland 2011, Maryland Asthma Control Program, Department of Health and Mental Hygiene / phpa.dhmh.maryland.gov & Asthma in Maryland's Children & Youth, August 2011, Asthma in Talbot County, Department of Health and Mental Hygiene, & CDC, Vital Signs, May 2011.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Asthma Rates	8.58% (32)	20.38% (76)	35.92% (134)	25.20% (94)	9.92% (37)	373

2013 Talbot Needs Assessment Survey

Tobacco Use/ Smoking

Percentage of Adolescents Who Used Any Tobacco Products in the Last 30 Days

	<u>Talbot</u>	<u>Maryland</u>
2010	31.5%	24.8%

Not moving toward the Maryland 2014 Target of 22.3%

Source: Maryland Department of Health and Mental Hygiene / Maryland State Health Improvement Process (SHIP) / <http://dhmh.maryland.gov/ship/>

In both the Adult and Youth Talbot County Needs Assessment Community Survey there was recognition that smoking continues to be prevalent within our community.

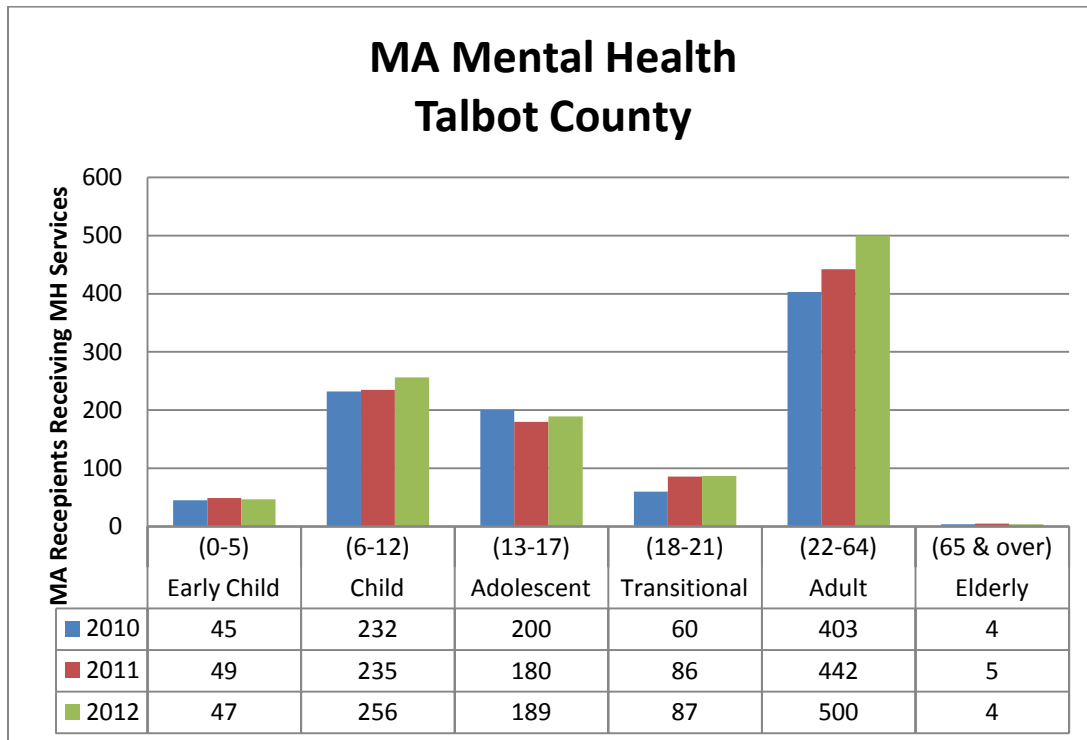
Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Teen Smoking	5.25% (20)	9.19% (35)	27.30% (104)	31.23% (119)	27.03% (103)	381
Smoking	5% (19)	7.63% (29)	24.47% (93)	34.47% (131)	28.42% (108)	380

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Teen Smoking	31.25% (5)	37.50% (6)	31.25% (5)	16

2013 Youth Talbot Needs Assessment Survey

We call it by various names - Mental Health, Emotional Health or Wellness – but in essence it boils down to a child and family being not just physically healthy and having their somatic health care needs met, but also being mentally healthy, stable and resilient. The Talbot Family Network Board, recognizing the need for Holistic Health, has elected to begin collecting data on emotional health concerns within Talbot County.



DHMH, Medical Assistance Penetration Data

Mental Health services are delivered in various settings and funded through various means. The graph above only depicts individuals on Medical Assistance (MA) receiving mental health treatment. We are unable to collect data on individuals with private insurance receiving mental health services. The fastest growing segment of the MA population seeking mental health services in Talbot County are Adults, with a 24% increase over the past 3 years. Statewide 15.6% of individuals with medical assistance are receiving mental health services. In Talbot County this rate, called the Public Mental health System Medical Assistance Penetration Rate, is 19.6%.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

The results of the Talbot County Needs Assessment Community Survey indicate that Mental Health is a concern amongst adults and emotional trauma a concern amongst adolescents. On the Health portion of the adult survey, mental health received the 2nd highest percentage of 5s or Biggest Problem.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Mental Health	7.81% (30)	6.77% (26)	21.09% (81)	30.47% (117)	33.85% (130)	384
Suicide	14.71% (53)	22.19% (83)	31.28% (117)	21.66% (81)	10.70% (40)	374
Emotional Trauma	9.47% (72)	15% (57)	26.05% (99)	30.26 (115)	19.21% (73)	380

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Mental Health	58.82% (10)	23.53% (4)	17.65% (3)	17
Suicide	58.82% (10)	23.53% (4)	17.65% (3)	17
Emotional Trauma	37.50% (6)	31.25% (5)	31.25% (5)	16

2013 Youth Talbot Needs Assessment Survey

These two additional questions, regarding reproductive health, were asked of the Youth on the Needs Assessment Survey. Almost a third of the respondents indicated that Sexually Transmitted Diseases are of concern and 70% indicate that birth control is at least somewhat of a problem.

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Birth Control	29.41% (5)	52.94% (9)	17.65% (3)	17
Sexually Transmitted Diseases	35.29% (6)	35.29% (6)	29.41% (5)	17

2013 Youth Talbot Needs Assessment Survey

Education

Result 3: School Readiness

Indicator

Kindergarten Assessment

Positive Progress

Result 4: School Success

Indicators

Academic Performance – HSA

Positive Progress

Academic Performance – MSA

Positive Progress

Truancy

Positive Progress

Result 5: School Completion

Indicators

High School Dropout Rate

Positive Progress

High School Program Completion

Positive Progress

Graduation of Students with Disabilities

Positive Progress

Result 6: School Transition

Indicators

Educational Attainment

Positive Progress

Youth Employment

Monitor

New Perspectives

BULLYING AND HARASSMENT

CONCERN

Indicator: Kindergarten Assessment

POSITIVE PROGRESS

Definition: The Maryland State Department of Education conducts an annual Kindergarten Assessment known as the Maryland Model for School Readiness (MMSR). This assessment reports scores on language and literacy, mathematical thinking, social studies, the arts, and physical development. Scores reflect the percentage of students in each of the following levels: Full readiness – consistently demonstrating skills, behaviors and abilities needed to meet Kindergarten expectations successfully

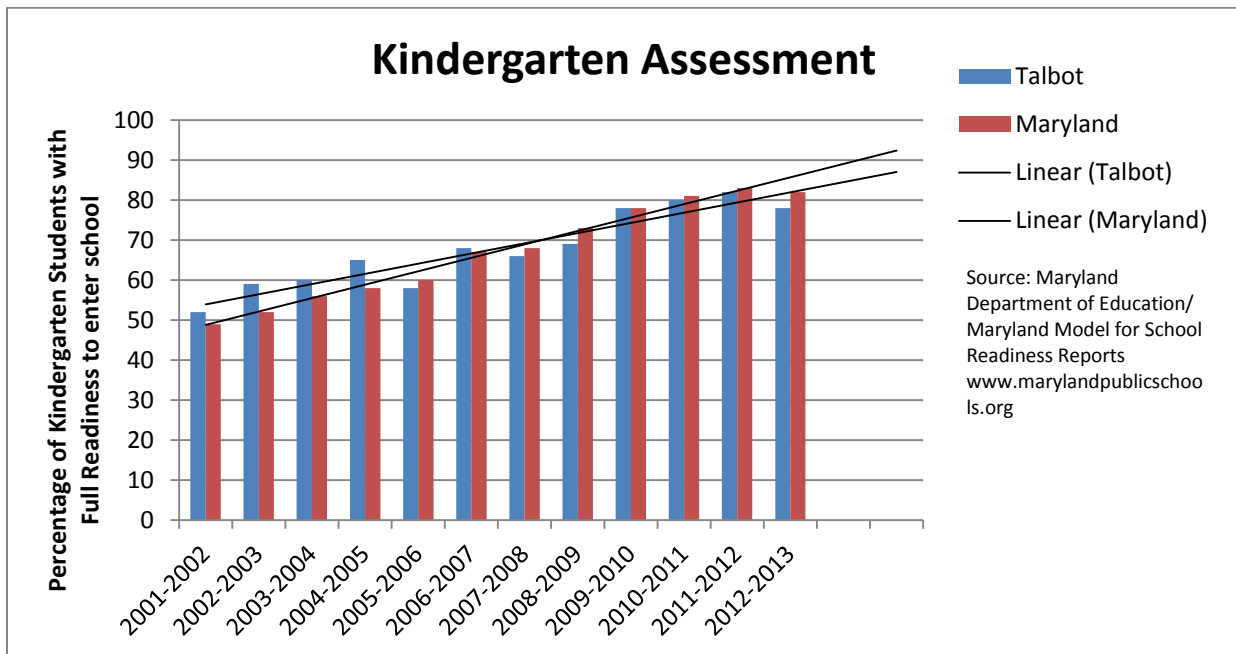
Approaching Readiness – inconsistently demonstrating skills, behaviors and abilities needed to meet Kindergarten expectations successfully and require targeted instructional support.

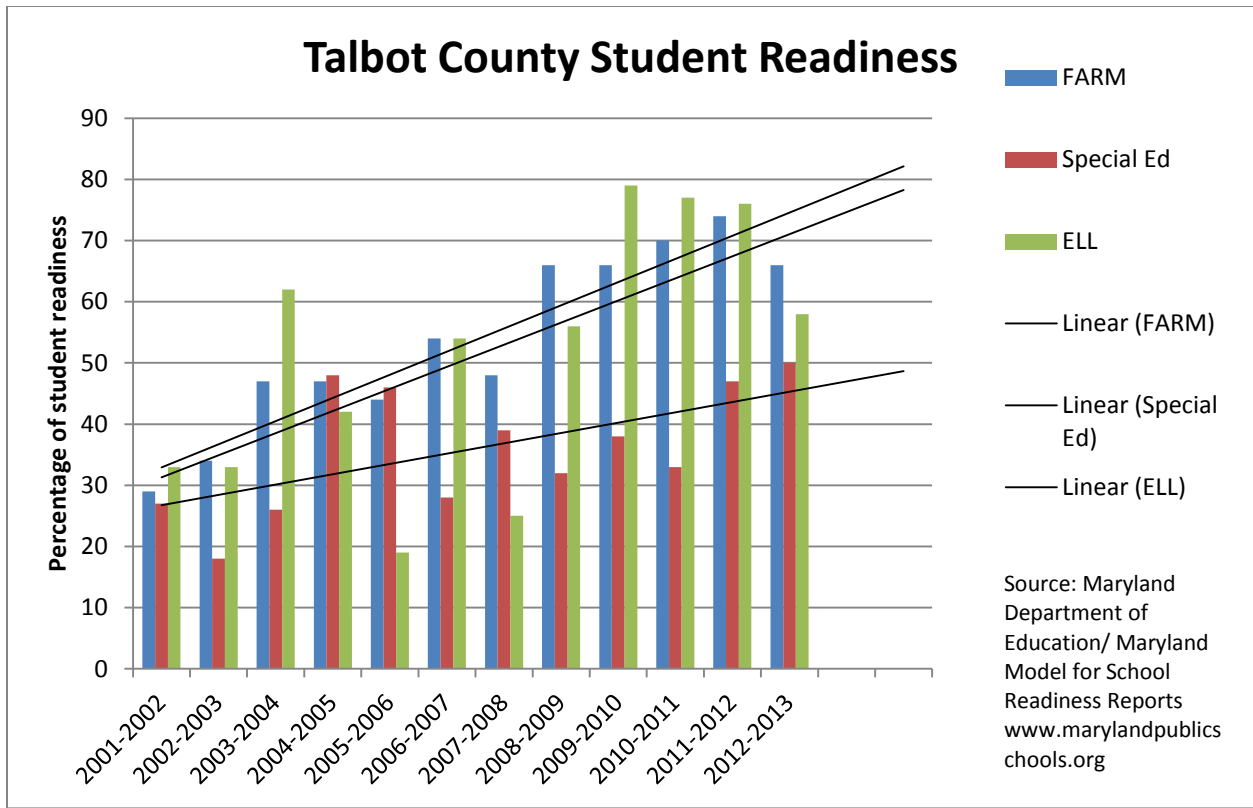
Developing Readiness – not demonstrating skills, behaviors and abilities needed to meet Kindergarten expectations successfully and require considerable instructional support in several domains.

Significance: Research indicates that children that are successful in early education, with access to high quality early learning experiences, are more likely to complete high schools, go onto higher education or be gainfully employed. For each \$1 invested in early childhood national studies show society saves \$16 in remedial services.

Data: MMSR, Kindergarten Assessment, 2012-13

	Maryland	Talbot
Full Readiness	82%	78%





Talbot County has made substantial gains in Kindergarten Readiness with a 50% improvement since 2001-02. Some of the largest gains have been made assisting minority students with Kindergarten Readiness – African American children rose from 29% in 2001-02 to 61% in 2012-13 and Hispanic children rose from 33% in 2001-02 to 67% in 2012-13. Students from low-income households (as indicated by Free and Reduced Price Meal (FARM) status) scores have risen from 29% in 2001-02 to 66% in 2012-13. Seventy-nine percent of kindergarteners that attended a Public PreK program in the year prior to entering Kindergarten were fully ready in 2012-13 compared with 54% in 2001-02. All indicators point to Talbot’s movement in the right direction to attain Maryland’s goal of 85% fully ready by 2014 as measured by the MMSR.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Children ready to start Kindergarten	19.89% (74)	35.48% (132)	25.54% (95)	11.29% (42)	7.80% (29)	372
Children Successful in Kindergarten	19.89% (74)	38.17% (142)	26.34% (98)	9.68% (36)	5.91% (22)	372
Quality Early Childcare/Daycare Programs	16.45% (62)	24.14% (91)	24.67% (93)	21.22% (80)	13.53% (51)	377

2013 Talbot Needs Assessment Survey

While Kindergarten Readiness or Success were not voiced as a central theme of concern in any of the Focus Groups or Key Informant Interviews and did not rate a high percentage in the areas of concern on the Talbot County Needs Assessment Survey, the issue of Quality Early Childcare/Daycare programs was voiced as a concern in the survey. The survey results indicate that 34.75% of the 377 respondents rate this issue as a 4 or 5.

Indicator: Academic Performance – High School Assessments

POSITIVE PROGRESS

Definition: The percent of public school students in grades 9 through 12 performing at the passing level on the four High School Assessments (HSA) – Algebra, Biology, English 2 and Government.

Significance: Obtaining a passing score on the HSA is required for graduation and ensures a level of academic preparedness for the future.

Percent Achieving Proficient or Advanced Standard:

HSA	2008		2009		2010		2011		2012	
	Talbot	MD	Talbot	MD	Talbot	MD	Talbot	MD	Talbot	MD
English	85.9%	83.1%	82.6%	83.5%	79%	80.2%	82.6%	82.5%	84%	83.6%
Algebra	92.7%	85.9%	88.4%	85.1%	89.5%	83.6%	89%	86%	90%	86.6%
Biology	86.5%	83.1%	85.4%	82.6%	84%	80.9%	87.2%	83.6%	89.7%	85.1%

Source: Maryland Department of Education / Maryland State Report Card 2012 / www.mdreportcard.org

High school performance is measured by the English, Algebra/Data Analysis and Biology High School Assessment (HSA). Performance is reported as the percent of students in each grade who achieved the Basic, Proficient, or Advanced standard. All students should be achieving at the Proficient or Advanced standard. Source: Maryland Department of Education / Maryland State Report Card 2012 /

www.mdreportcard.org

One hundred percent of the class of 2012 fulfilled the High School Assessment (HSA) requirement; this is the result that counts in the end. Talbot County students consistently perform at or above the statewide average.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Academic Performance was not viewed as a significant concern by individuals who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Academic Performance	10.46% (39)	21.98% (82)	34.32% (128)	23.06% (86)	10.19% (38)	373

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Academic Performance	47.06% (8)	29.41% (5)	23.53% (4)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Academic Performance – Maryland School Assessment (MSA) POSITIVE PROGRESS

Definition: The percent of public school students in 3rd, 5th and 8th grades performing at or above proficient levels in reading and mathematics on the MSA.

Significance: The MSA gives students in 3rd through 8th grades an opportunity to demonstrate the knowledge they have gained. The test produces a score that describes how well a student has mastered the Maryland Content Standards in various subject areas. Student scores are categorized as basic, proficient or advanced. These scores provide parents, teachers and school administrator with objective data on a student’s progress.

Maryland School Assessment

Talbot	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	Maryland 2012
<u>Grade 3</u>											
Reading	47.9	68.3	77.7	80.5	79.0	82.6	88.7	80.3	84.8	86.3	85
Math	65.7	71.5	79.4	84.1	79.6	83.4	84.3	83.1	85.9	88.1	87.7
<u>Grade 5</u>											
Reading	59.1	76.9	78.9	81.8	80.9	88.9	86.2	92.1	91.7	90.2	90
Math	53.4	75.3	77.3	80.8	77.6	83.8	76.5	91.0	82.7	82.3	85.3
Science-	-	-	-	-	-	69.5	67.8	85.9	76.2	78.1	68.6
<u>Grade 8</u>											
Reading	59.7	58.8	67.3	69.3	75.7	80.6	81.3	77.8	82.3	81.0	80.8
Math	27.9	44.7	39.9	51.1	57.1	66.0	71.0	69.1	73.4	70.0	69.3
Science-	-	-	-	-	-	72.4	68.2	68.8	67.7	72.9	70.7

Source: Maryland Department of Education/ Maryland State Report Card 2012/ www.mdreportcard.org

Talbot’s MSA scores are consistently at or above the Maryland State average. There was one area in which Talbot’s score dipped below the state’s average by 3 percentage points, 5th grade math.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Academic Performance was not viewed as a significant concern by individuals who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Academic Performance	10.46% (39)	21.98% (82)	34.32% (128)	23.06% (86)	10.19% (38)	373

2013 Talbot Needs Assessment Survey

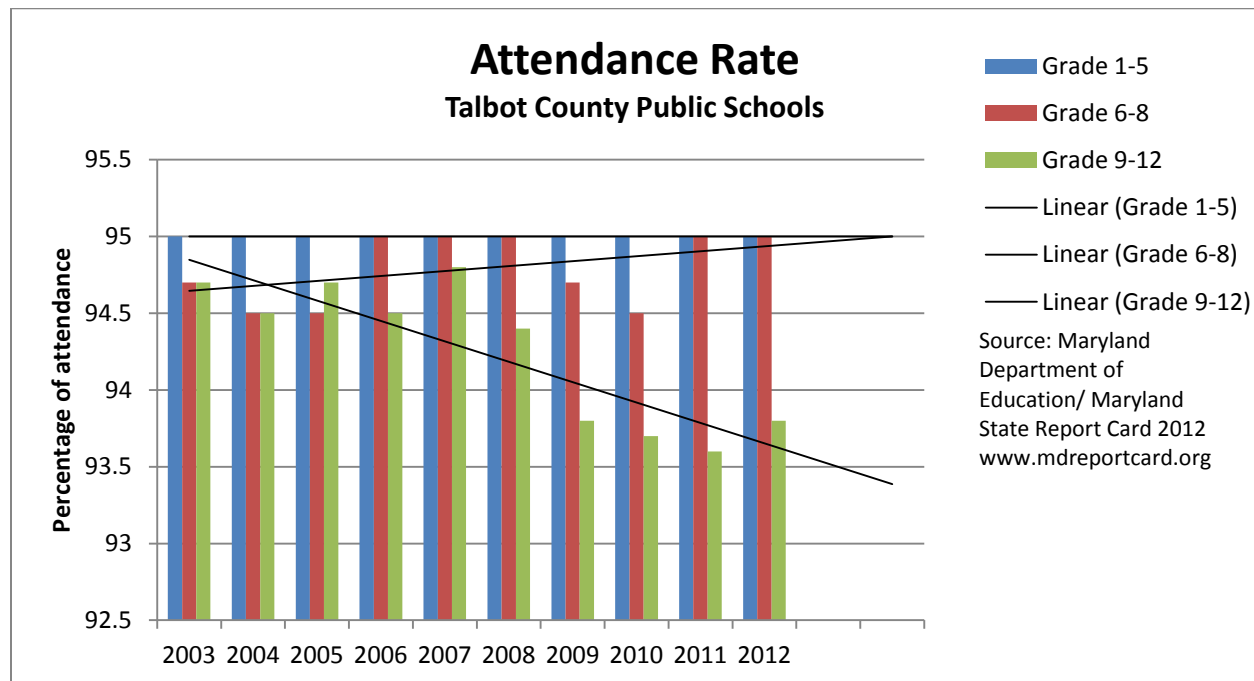
Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Academic Performance	47.06% (8)	29.41% (5)	23.53% (4)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Truancy

Definition: Percent of public school students in all grades absent more than 20 days in a school year. This standard is below the MSDE goal that students will attend 94% of school days and gives a clear picture of the percentage of students with clear attendance issues.

Significance: High levels of school absence are linked in research to higher risk of school failure, high school dropout, delinquent behavior, and other high risk behavior. For a student to learn, intellectually, socially and emotionally they need to be present in school.



During school year 2010-11 7.3% Talbot County students, on average across schools, missed 20 or more days of school. The state average is 11.3%. <http://goc.maryland.gov/ResultsIndicators.html>

During the 2010 -2011 School year there were .52% of students that meet the definition of Habitual Truants.

A student is considered a habitual truant if he or she meets ALL of the following criteria:

- the student was age 5 through 20 during the school year;
- the student was in membership in a school for 91 or more days; and
- the student was unlawfully absent for 20% or more of the days in membership.

Of those Habitual Truants over 75% were in High School.

Source: Habitual Truants – Maryland Public Schools 2010 – 2011 / MD State Department of Education / www.marylandpubicschools.org

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

School Truancy or Skipping School was not rated a significant problem in either the Adult or Youth Talbot County Needs Assessment Surveys and was not the topic of concern in focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
School Truancy	11.50% (43)	23.26% (87)	37.17% (139)	17.91% (67)	10.16% (38)	374

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Skipping School	29.41% (5)	41.18% (7)	23.525 (4)	17

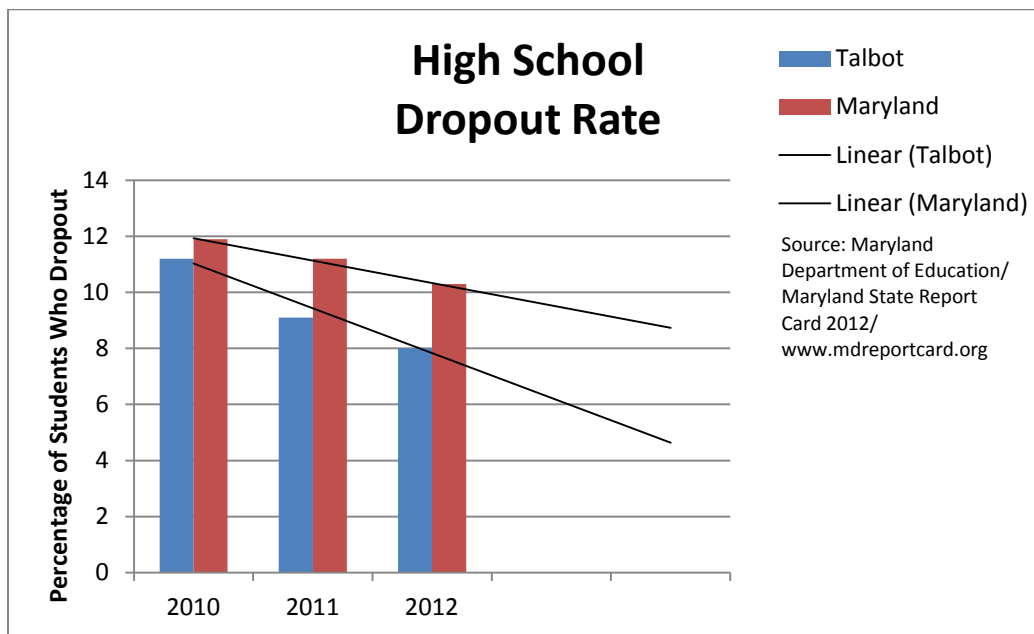
2013 Youth Talbot Needs Assessment Survey

Indicator: High School Dropout Rate

POSITIVE PROGRESS

Definition: The percent of public school students, grades 9-12, who withdrew from school before graduation, not enrolling in another high school during the academic year. This data includes students who drop out of all programs: summer, evening or alternative.

Significance: High School Dropout is linked in research to fewer employment opportunities, low pay and increased risk of anti-social behavior.



Talbot County’s High School Dropout Rate has been on a steady decline dropping 3.2% in the last 3 years. This mirrors the decline in Dropout Rate Maryland is experiencing as a whole but Talbot’s decline is occurring at twice the rate of Maryland’s. According to the American Community Survey conducted by the US Census Bureau, in 2009 16.4 % of 18 – 24 year olds in the US were not enrolled in school, did not have a high school diploma or a General Education Development (GED).

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

The High School Dropout Rate was not viewed as a significant concern by individuals who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
High School Drop Out Rates	9.33% (35)	26.93% (101)	37.87% (142)	13.60% (51)	12.27% (46)	375

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
High School Drop Out Rates	35.29% (6)	47.06% (8)	17.65% (3)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: High School Program Completion

POSITIVE PROGRESS

Definition: The percentage of high school graduates who successfully completed the minimum course requirements to enter the University System of Maryland, to complete an approved Career and Technology Education program or both.

Significance: Program completion indicates a student is prepared for either post-secondary education or employment.

Data

High School Program Completion Comparison, 2012

Category	Talbot, 2012	Maryland, 2012
U of MD Course Requirements	39.7%	57.9%
Career & Tech Education Program Requirements	31.4%	9.4%
Combined	71.1%	67.3%
Completed Both Requirements	18.3%	11.6%

High School Program Completion – Talbot County

Completion Category:	2009		2010		2011		2012	
	%	#	%	#	%	#	%	#
University System of MD Course Requirements	49.7%	176	51.6%	194	39.4%	138	39.7%	139
Career & Technology Education Program Requirements	26%	92	26.3%	99	26.3%	92	31.4%	110
Both University & Career / Technology Requirements	10.5%	37	10.6%	40	24.6%	86	18.3%	64

Source: 2009 - 2012 Maryland Report Card / <http://msp.msde.state.md.us/>

High School Program Completion is a key indicator on how well a school system is preparing students for either higher education or immediate workforce employment. Students that graduate from high school and can either confidentially enter college or step into a career are assets to our community.

Talbot County consistently out performs the state average in the Career and Technology Education Program requirement completions. Talbot County Public Schools also out performs the state in the combination of completions in University and Career & Tech course requirements. Talbot County Public Schools are currently focusing attention in this area - making sure high school graduates leave prepared for the rigors of college.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

High School Graduates Ready for College was not viewed as a significant concern by adults or youth who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
High School Graduates Ready for College	10.26% (39)	23.68% (90)	30% (114)	24.47% (93)	11.58% (44)	380

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
High School Graduates Ready for College	58.82% (10)	29.41% (5)	11.76% (2)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Graduation of Students with Disabilities

POSITIVE PROGRESS

Definition: Percent of Children with disabilities who exit special education by graduating or completing school.

Significance: Students with disabilities are at higher risk of dropping out of high school. Remaining in school decreases at-risk behaviors and improves quality of life.

Data:

High School Program Completion by Special Education Students Comparison, 2011

Category	Talbot, 2012	Maryland, 2012
MD High School Certificate	30.8%	16%
MD High School Diploma	69.2%	84%

High School Program Completion by Special Education Students – Talbot County

Completion Category:	2012	
	%	#
MD High School Certificate	30.8%	8
MD High School Diploma	69.2%	18
a. University System of MD Course Requirements	7.7%%	2
b. Career & Technology Education Program Requirements	57.7%	15
c. Both University & Career / Technology Requirements	≤5%	*
d. Rigorous High School Program Indicators	≤5%	*
e. One or More of Categories a, b, c, or d	65.4%	17
Total Completers		26

* indicates no students or fewer than 10 students in category, or * indicates the percentage for the category is either ≤5 or ≥95 and the corresponding counts have been suppressed.

Source: 2012 Maryland Report Card / <http://msp.msde.state.md.us/>

100% of Talbot County High School Students with disabilities are completing an individualized educational program that meets their needs and abilities. A significant portion of these students, 57.7%, compared to 25% statewide, are completing school having fulfilled the Career & Technology Education Program requirements and are ready to enter the workforce.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Students with Disabilities Completing School was not viewed as a significant concern by individuals who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Students with Disabilities Completing School	14.71% (55)	29.14% (109)	33.69% (126)	15.24% (57)	7.22% (27)	374

2013 Talbot Needs Assessment Survey

Indicator: Educational Attainment

POSITIVE PROGRESS

Define: All 12th Grade public high school students are asked to complete the MSDE Pre-Graduate Questionnaire 45 days prior to graduation. This questionnaire documents a student's plans at that time in the categories of higher education, employment or military service.

Significance: Planning is a key to success in any environment. Post high school planning is critical for a high school graduate to have a successful transition into higher education or employment.

Data: **Grade 12 Documented Decisions Comparison, 2012**

Decision Category:	Talbot, 2012		Maryland, 2012	
	%	#	%	#
Attend a Four Year College	36.4%	122	50%	51,981
Attend a Two Year College	40.3%	135	33.2%	17,272
Attend a Specialized School or Training	≤ 5%	*	≤ 5%	*
Enter Employment (related to high school)	8.4%	28	≤ 5%	*
Enter Employment (unrelated to high school)	≤ 5%	*	≤ 5%	*
Enter Military	≤ 5%	*	≤ 5%	*
Enter Full Time Employment and/or School	8.1%	27	12%	6,211
Enter Part Time Employment and/or School	41.8%	140	50.2%	26,106
Other or No Response	≤ 5%	*	≤ 5%	*
Completed Questionnaires		335		51,981

Grade 12 Documented Decisions – Talbot County

Decision Category:	2009		2010		2011		2012	
	%	#	%	#	%	#	%	#
Attend a Four Year College	41.7%	65	51.3%	122	47.2%	150	36.4%	122
Attend a Two Year College	17.9%	28	30.3%	72	31.5%	100	40.3%	135
Attend a Specialized School or Training	≤ 5%	*	≤ 5%	*	≤ 5%	*	≤ 5%	*
Enter Employment (related to high school)	≤ 5%	*	≤ 5%	*	≤ 5%	*	8.4%	28
Enter Employment (unrelated to high school)	≤ 5%	*	≤ 5%	*	6.3%	20	≤ 5%	*
Enter Military	8.3%	13	≤ 5%	*	≤ 5%	*	≤ 5%	*
Enter Full Time Employment and/or School	7.1%	11	6.7%	16	10.4%	33	8.1%	27
Enter Part Time Employment and/or School	10.3%	16	18.1%	43	30.2%	96	41.8%	140
Other or No Response	6.4%	10	6.3%	15	5.7%	18	≤ 5%	*
Completed Questionnaires		156		238		318		335

' indicates no students or fewer than 10 students in category, or '' indicates the percentage for the category is either ≤5 or ≥95 and the corresponding counts have been suppressed.

More than 75% of graduating Talbot County public school students are going on to attend college and another 8% are joining the full time workforce. While this is slightly behind the statewide average Talbot's curve is headed upward with an increase in college bound students from 59.6% in 2009 to 76.7 in 2012. Another trend that has been identified is the increasing number of students choosing to attend a two year college immediately out of high school rather than a four year college. This trend may be related to economic factors.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Rate of High School Graduates Achieving Higher Education was not viewed as a significant concern by adults or youth who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Rate of HS Graduates achieving Higher Education	10.44% (40)	23.76% (91)	31.85% (122)	25.85% (99)	8.09% (31)	383

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
HS Graduates going to College	47.06% (8)	23.53% (4)	29.41% (5)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Youth Employment

MONITOR

Definition: Percentage of youth adults who are employed by age groups 16 -19 and 20 – 24.

Significance: Youth employment rates give an assessment of how youth are performing in the “real world”, are they attaining employment and remaining successfully employed.

Youth Unemployment was not viewed as a significant concern by adults or youth who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Data: Maryland Employed Youth and Young Adults, 2011

Age	# Employed	Employment Rate
Age 16-19	87,000	29%
Age 20-24	261,000	68%

Youth & Work Policy Report Kids Count, The Annie E. Casey Foundation, www.kidscount.org/datacenter

Data on the county level was unobtainable for just this age segment of the population. Talbot County has an average unemployment rate of 7.4% of the population in 2012 which is above the statewide average of 6.8%.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Youth Unemployment was not viewed as a significant concern by adults or youth who took the Talbot County Needs Assessment Community Survey and not voiced as a concern during focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Youth (16-24) Employment	10% (39)	14.36% (56)	31.03% (121)	28.97% (113)	15.64% (61)	390

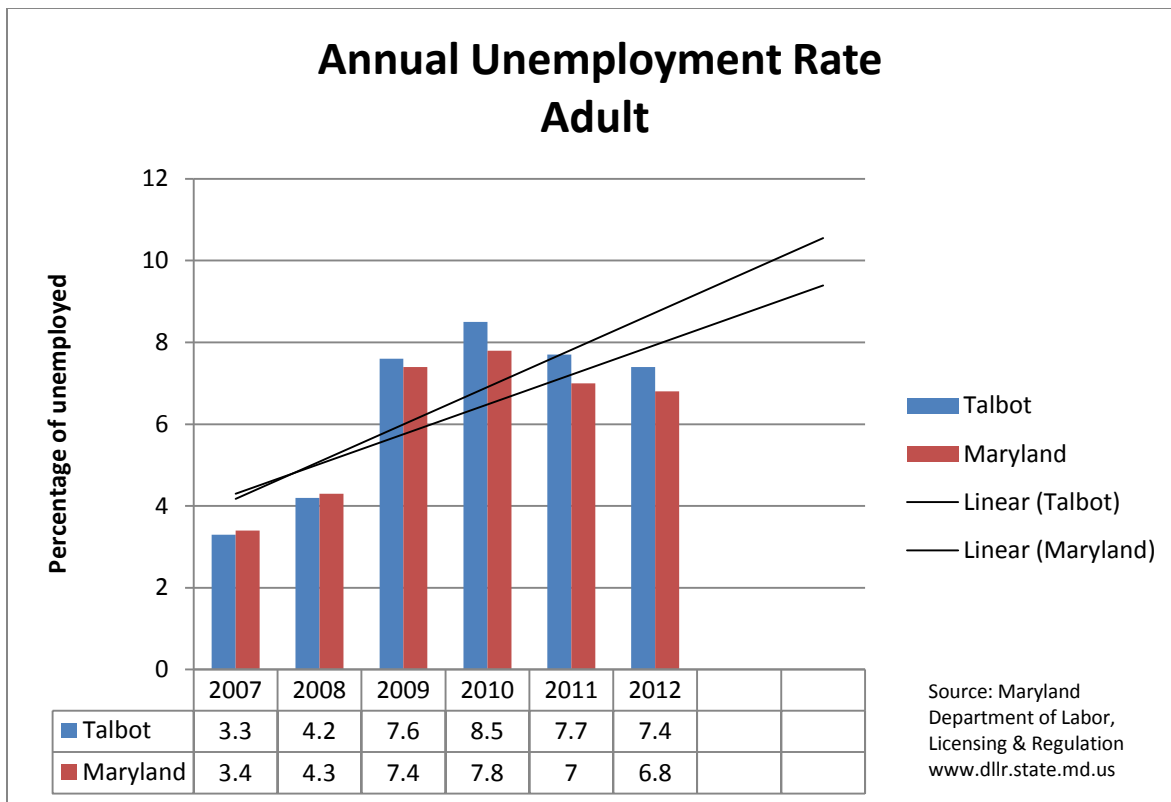
2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Youth (16-24) Employment	41.18% (7)	41.18% (7)	17.65% (3)	17

2013 Youth Talbot Needs Assessment Survey

Adult Unemployment

Adult unemployment data was used to supplement due to the lack of age specific data for youth.



Unemployment rates have decreased slightly and the curve seems to be turning in the right direction for Talbot County with a decrease from a high of 8.5% in 2010 to 7.4% in 2012.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Unemployment was the highest rated concern, in the area of Education and Employment, of the 384 individuals that answered this question. Is area of concern was not raised in any of the focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Unemployment	3.13% (12)	6.77% (26)	25.26% (97)	27.60% (106)	37.24% (143)	384

2013 Talbot Needs Assessment Survey

Indicator: Bullying and Harassment

CONCERN (encompassed in Behavioral Health)

Definition: While bullying and harassment occurs in various settings – school, community, home, social media – unfortunately our only data source to track these incidents is within the school systems. Talbot County Public Schools take bullying very seriously and define it in this manner.

Bullying, harassment, or intimidation means intentional conduct, including verbal, physical, or written conduct, or an intentional electronic communication, that: (I) creates a hostile educational environment by substantially interfering with a student’s educational benefits, opportunities, or performance, or with a student’s physical or psychological well-being and is: 1. motivated by an actual or a perceived personal characteristic including race, national origin, marital status, sex, sexual orientation, gender identity, religion, ancestry, physical attribute, socioeconomic status, familial status, or physical or mental ability or disability; or 2. threatening or seriously intimidating; and (II) 1. occurs on school property, at a school activity or event, or on a school bus; or 2. substantially disrupts the orderly operation of a school. Electronic communication means a communication transmitted by means of an electronic device, including a telephone, cellular phone, computer, or pager.

Significance: Students that are bullied are more likely to have disrupted education and therefore inconsistent educational outcomes. Bullying may also result in emotional trauma which research has linked to chronic health issues later in life.

Data:

<u>Talbot</u>	<u>Maryland</u>	<u>2009-2010 School Year</u>
10	1662	Students suspended/expelled for Bullying
9	1566	Students suspended/expelled for Harassment
<u>12</u>	<u>918</u>	Students suspended/expelled for Sexual Harassment
31 (0.7%)	4146 (0.5%)	Total (Percent of Total School Enrollment)

Source: Maryland Department of Education, Division of Accountability and Assessment / Suspensions, Expulsions & Health-Related Exclusions – Maryland Public Schools 2009 - 2010

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Bullying was the second highest rated concern, in the area of Family and Community, of the 383 individuals that answered this question. Bullying was the highest rated concern, in the area of Family and Community, for the 17 youth taking the Needs Assessment Survey. This area of concern was not raised in any of the focus groups.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Bullying	7.31% (28)	11.23% (43)	28.20% (108)	33.94% (131)	19.32% (74)	383

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Bullying	41.18% (7)	17.65% (3)	41.18% (7)	17

2013 Talbot Youth Needs Assessment Survey

Community

Result 7: Safety

Indicators

Juvenile Felony Offenses	Monitor
Recidivism	Positive Progress
Maltreatment	Monitor

Result 8: Stability

Indicators

<u>HUNGER</u>	<u>CONCERN</u>
Out-of Home Placement	Monitor
Homelessness	Monitor

New Perspectives

Crime	Monitor
Child Poverty	Monitor

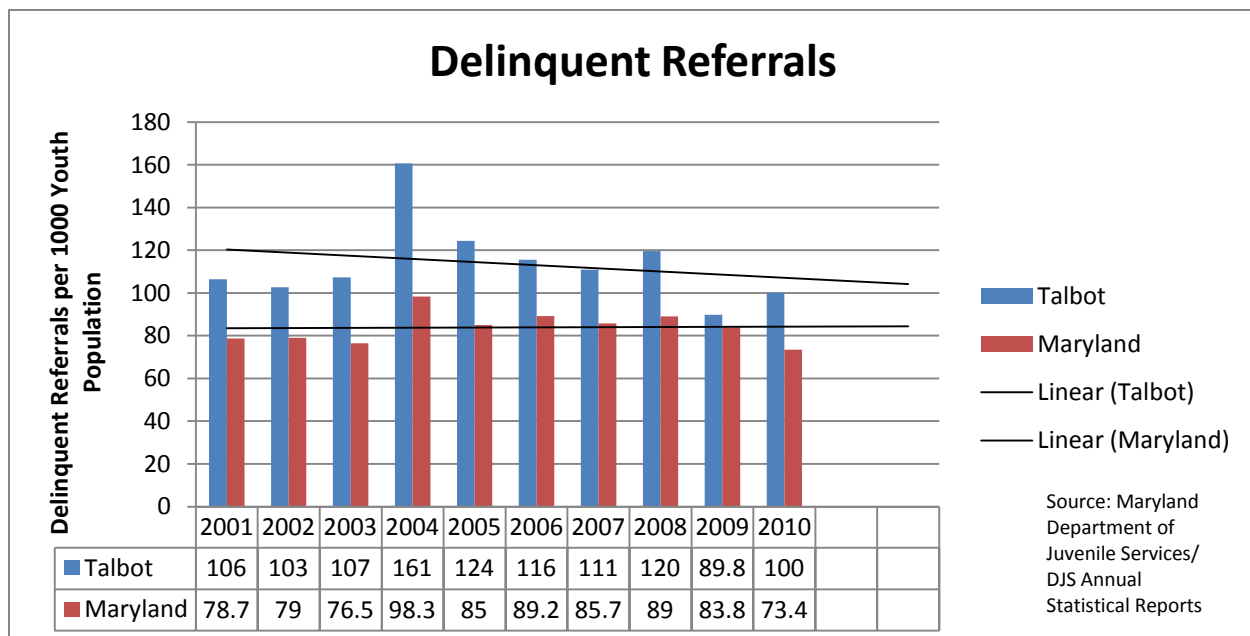
Indicator: Juvenile Felony Offenses

MONITOR

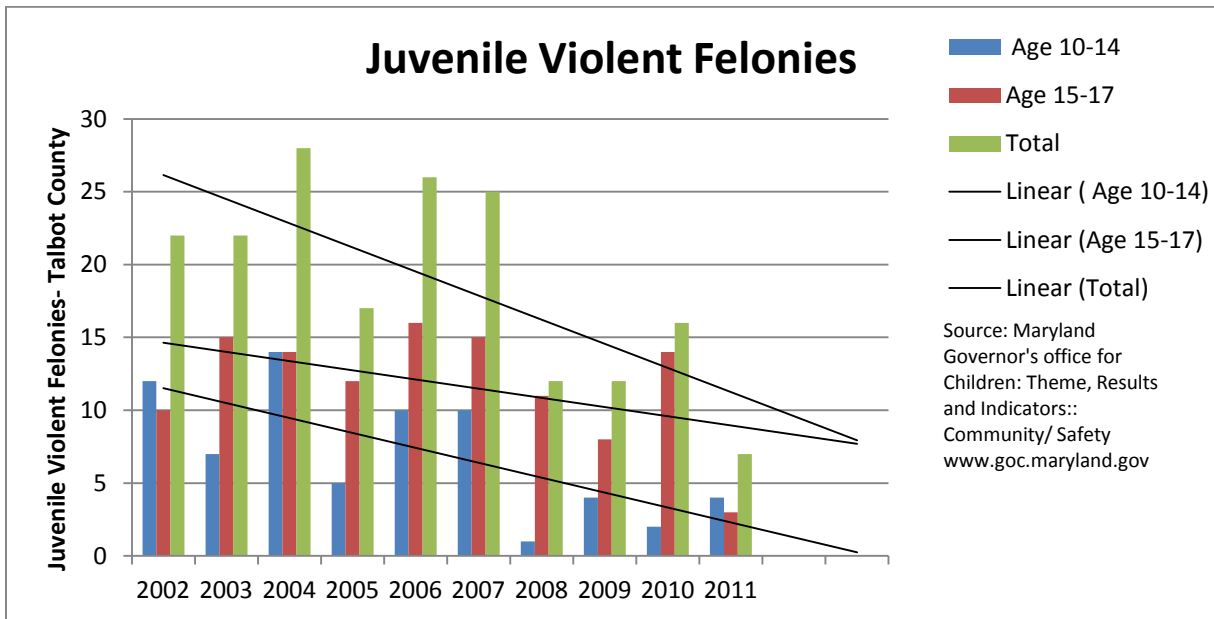
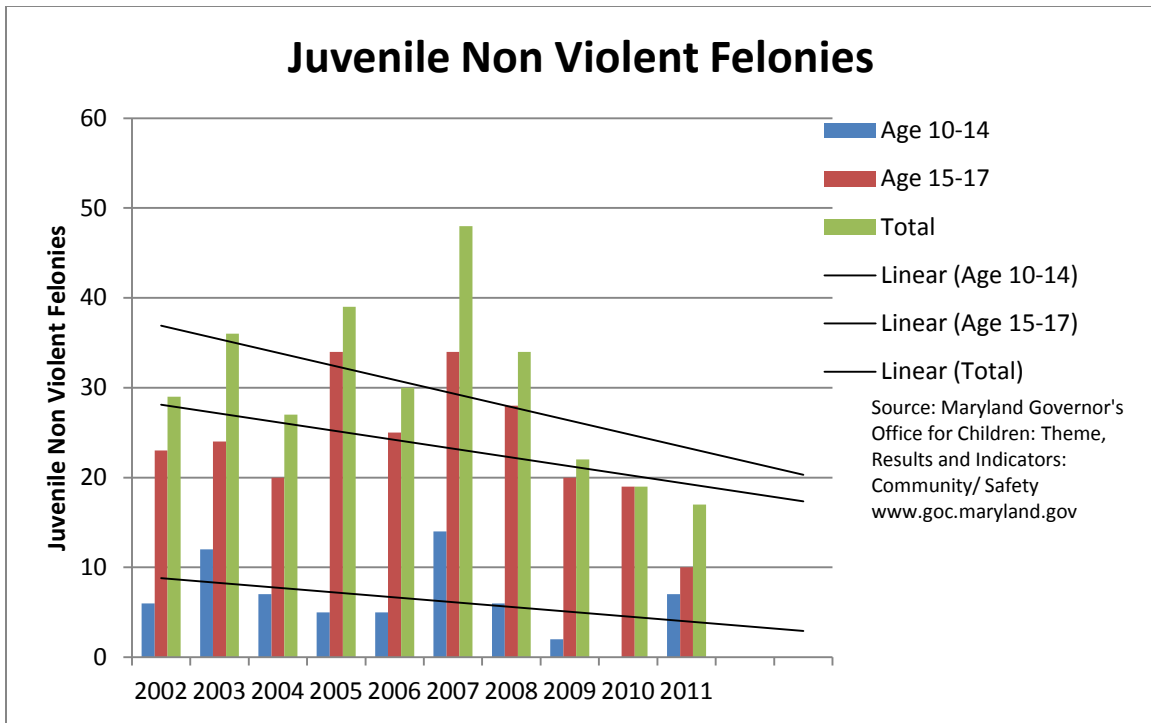
Definition: Total number of violent and non-violent felony offenses referred to the Maryland Department of Juvenile Services.

Significance: Felony offenses are the most serious types of crime. A juvenile’s involvement in a felony offense is a risk factor of continued criminal activity into adulthood. Other risk factors include: family violence, poverty, poor school performance, no job skills, truancy, no connection to positive adult role models.

Data: Maryland Department of Juvenile Services/ DJS Annual Statistical Reports



Talbot County Juvenile Delinquent referral rate continues to be higher than the Maryland referral rate but does show a slight downward trend over the past few years. The percentage of cases that move from intake to referred in Talbot has remained steady between 11-10% from 2001-2010 except for 2 years, 2006 (13%) and 2007 (17%). Juvenile Non Violent and Violent Felonies in Talbot are both on a downward trend as is the statewide rate.



Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Juvenile crime in general was not rated a significant concern for the individuals and youth taking the Talbot County Needs Assessment Survey.

Focus Group comprised of members from the Local Care Team expressed a concern not in the numbers of referrals to DJS or in the numbers of youth being adjudicated with felony offenses but rather in the complex

nature of the youth entering this system. Tim Haynes from the Department of Juvenile Services indicated that youth today are coming into the juvenile justice system with multiple areas of concern such as educational, emotional, family, substance. This opinion was echoed by the group.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Juvenile Non-violent crime	10.18% (39)	14.62% (56)	38.90% (149)	24.80% (95)	11.49% (44)	383
Juvenile violent crime	11.47% (43)	23.20% (87)	31.73% (119)	24% (90)	9.60% (36)	375

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Juvenile Crime	35.29% (6)	35.29% (6)	29.41% (5)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Recidivism

POSITIVE PROGRESS

Definition: Any re-arrest, including Violations of Probations and traffic, that occur after release from a DJS residential youth program.

Significance: Recidivism rates indicate how well our system is supporting youth in the behavior change process required after incarceration.

12-Month Juvenile and/or Criminal Justice Recidivism Rates for FY 2008 – 2010 Releases

	<u>Talbot County</u>			
	<u># of Releases</u>	<u>Re-arrest</u>	<u>Reconviction</u>	<u>Reincarceration</u>
2008	15	80%	20%	6.7%
2009	18	66.7%	11.1%	0.0%
2010	12	41.7%	0.0%	0.0%

	<u>Eastern Shore Counties + Cecil County</u>			
	<u># of Releases</u>	<u>Re-arrest</u>	<u>Reconviction</u>	<u>Reincarceration</u>
2008	200	57%	17%	13%
2009	180	48.3%	12.2%	9.4%
2010	177	57.1%	17.5%	13.6%

	<u>Maryland</u>			
	<u># of Releases</u>	<u>Re-arrest</u>	<u>Reconviction</u>	<u>Reincarceration</u>
2008	1657	56.3%	19.6%	14.4%
2009	1591	58%	20.1%	14.8%
2010	1594	57.2%	20.1%	13.9%

The majority of youth released from DJS' major residential programs are 17 years old. Therefore, it is important to track these youth in the adult system and report the recidivism rates both in the juvenile and adult systems. For purposes of recidivism studies, all offenses including VOP and traffic are included.

Criminal Justice Recidivism

- 1. Arrest refers to any individual, who after contact with juvenile services re-offends and enters the adult criminal justice system.*
- 2. Conviction refers to any individual, who is arrested, has a criminal hearing in the adult system, and is convicted or found guilty.*
- 3. Incarceration refers to any individual who is arrested, convicted, and incarcerated in the adult prison system.*

Source: Dept. of Juvenile Services Recidivism Report, January 1, 2012 / MD Department of Juvenile Services

Talbot County is leading the state with 0 recidivists in 2010. The local DJS staff are committed to understanding the needs of each youth entering their office and working to create a plan that addresses these needs.

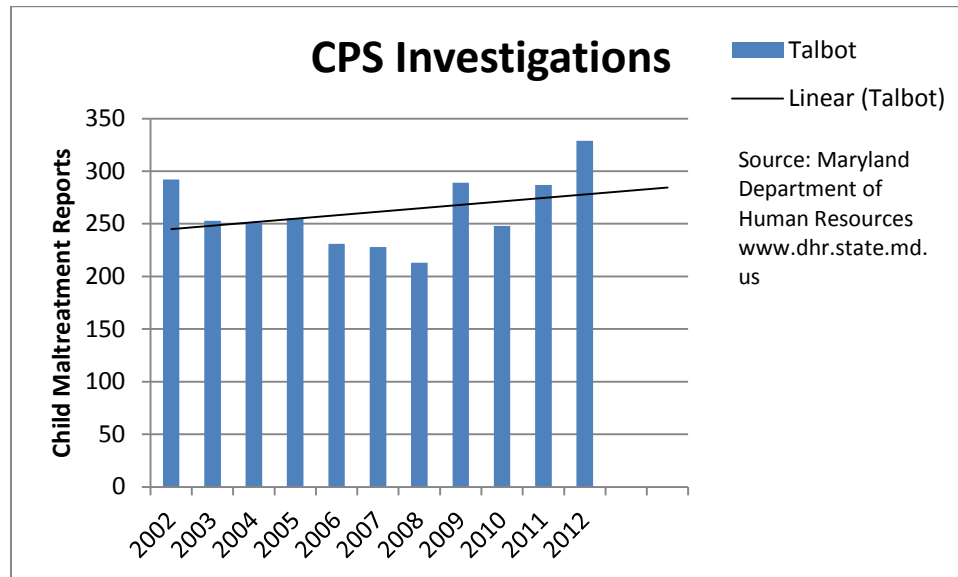
Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

While this question was not included on the Talbot Needs Assessment Survey, this topic was not expressed as a concern in any of the focus group or by key informants.

Indicator: Maltreatment

Define: The number of Child Protective Services investigations in Talbot County.

Significance: This number indicates the level of community awareness about child abuse and neglect and their willingness to make reports for investigation. The number of indicated cases or substantiated investigations is a more direct measure of actual child maltreatment.



Average 24% of the cases substantiated the last three years.

Source: Maryland Department of Human Resources
www.dhr.state.md.us (Data & Reports: SSA)

Rate of Children Who are Maltreated (per 1,000 population under the age of 18)

	<u>Talbot</u>	<u>Maryland</u>
2011	10.6	5.3
2010	6	5

Talbot County has done an excellent job educating its citizens on what steps to take if there is suspicion of child abuse or neglect and the rates of CPS Investigations indicate this by their upward trend. The better news is that even with this increase in investigations the percentage of actual indicated cases has remained constant at 24% for the last 3 years.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Child Abuse/Neglect was not rated a significant concern for the individuals and youth taking the Talbot County Needs Assessment Survey. This topic was not expressed as an area of concern in focus groups or with key informants.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Child Abuse/Neglect	13.01% (51)	12.50% (49)	36.73% (144)	28.06% (110)	9.69% (38)	392

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Child Abuse/Neglect	52.94% (9)	29.41% (5)	17.65% (3)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Hunger

CONCERN

Definition: The percentage of families who are food-insecure. Food-insecurity refers to food insufficiency or disrupted eating patterns within a household.

Significance: Food is the most basic of needs and without our basic needs met it is impossible to focus on high level needs such as education and social/emotional growth.

2010 Child Food Insecurity Rate (Percentage of Children)

<u>Talbot</u>	<u>Maryland</u>	<u>U.S.</u>
17.7% (1,310)	17.8% (236,560)	21.6%

Source: Feeding America / www.feedingamerica.org

2012-2013:

Four schools eligible for MMFA (Maryland Meals for Achievement Classroom Breakfast Program) – Easton Elementary & Tilghman Elementary participate.

2012-2013:

Free & Reduced School Lunch Program: 38.9% (1,790) of students participate.
(1558 – Free Lunch Program / 232 – Reduced Lunch Program)

Federal Nutrition Programs

Food Supplement Program (formerly the Food Stamp Program)

	<u>January 2008</u>	<u>January 2013</u>	<u>Change</u>	<u>% Change</u>
Talbot	1928	4432	+2504	129.9%
Maryland	349,177	760,830	+411,653	117.9%

WIC

	<u>January 2012</u>	<u>January 2013</u>	<u>% Change</u>
Talbot, Caroline, Dorchester	3286	3250	-1.1%
Maryland	146,169	145,124	-0.7%

Summer Food Service Program

	<u>Talbot</u>	<u>Maryland</u>
# of Summer Agencies	1	55
# of Summer Sites	2	1235
# of Participants	86	41,184
2011-2012 Free & Reduced Lunch Students	1302	257,013
Free & Reduced Lunch Students in Summer 2012 per 100 Students in School Year 2011-2012 Lunch	6.6	16.0

At Risk After School Program

Three eligible schools, zero schools participating.

Source: Maryland Hunger Solutions / www.mdhungersolutions.org

COST OF FOOD:

New data from the Bureau of Labor Statistics (BLS) shows a .1% increase in the cost of food people are consuming at home from January 2013 to February 2013. Food costs have increased by 1.6% over the last 12 months ending in February 2013.

The cost of the Thrifty Food Plan (the mix of food items on which low-income people rely) increased by \$6.60 from December 2012 to January 2013. The cost of the Thrifty Food Plan has increased by \$8.70 from January 2012 to January 2013.

(What is the Thrifty Food Plan: The Thrifty Food Plan is USDA’s estimate of what it costs to purchase a minimally adequate diet. The Thrifty Food Plan is the least expensive market basket of food the government prices – and recommends for short-term use. It serves as the government’s basis for Food Stamp allotments.)

Low-income households are particularly vulnerable to fluctuations in the cost of food. For those with budgets already stretched to their limits, higher food costs mean that people struggle to afford enough food for themselves or their families.

Based on the minimum wage of \$7.25, it would take 88 hours – more than two weeks – to earn enough to cover the current cost of the Thrifty Food Plan (\$637.80 for a family of four).

Source: FRAC (Food Research and Action Center) / www.frac.org

While Talbot County falls below both the Maryland and the National rate for Child Food Insecurity this is not a reason to dismiss this indicator. Because food builds the foundation for holistically healthy children it is necessary to investigate this indicator further.

Hunger is difficult to objectify via data. It is easy to obtain data on the number of families receiving food assistance or the number of children enrolled in Free and Reduced Meals at school but this data speaks to those receiving food assistance and not to those that may be hungry.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

While Childhood Hunger was not rated as a high concern by adults or youth responding to the Talbot County Needs Assessment Survey, this was a concern expressed repeated by community leaders, school staff and program directors.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Childhood Hunger	13.58% (52)	13.58% (52)	40.47% (155)	25.59% (98)	6.79% (26)	383

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Childhood Hunger	52.94% (9)	17.65% (3)	29.41% (5)	17

2013 Youth Talbot Needs Assessment Survey

Indicator: Out-of-Home Placement

MONITOR

Definition: Children who are placed in out-of-home care by the court or by a state agency.

Significance: Out-of-Home Placement (OOHP) is utilized as a last resort when less restrictive or disruptive interventions are not options or have not been successful. Often safety is the defining factor in this intervention. Children that experience multiple placement settings during OOHP are more at-risk of delinquency/criminal activity, low educational attainment, mental health issues, substance use, homelessness and/or school dropout.

Rate of New Placement Settings

	2009	2010	2011	2012	2010-12 Change	Avg. Yr. Change	1 Year Change
Talbot	10.9	9.8	11.3	13.7	39%	20%	21%
MD	11.4	11.6	11.0	12.3	6%	3%	12%

The rate of new placement settings shows how many children in each jurisdiction are admitted into an out-of-home placement per 1,000 children in their jurisdiction.

<u>Placement Agency</u>	<u># of Children in Placement - Talbot</u>	<u># of Children Placed in Talbot – Home Jurisdiction</u>
All	33	7
DHR	26	6
DJS	4	1
ADAA	2	0
MHA	1	0

*Two-thirds of all Maryland jurisdictions have a majority of DHR children placed within their home jurisdiction. Six of the Eastern Shore jurisdictions **do not**, including Dorchester, Queen Anne’s, Somerset, **Talbot**, Wicomico, Worcester Counties, and also St. Mary’s County. The Eastern Shore continues to struggle to support Community- and Non-Community-Based placement resources, due to the low number of children in need of such placements. These jurisdictions also have difficulty recruiting foster parents for children with special needs, including older youth.*

Source: State of Maryland Out-Of-Home Placement and Family Preservation Resource Plan FY 2012 & FY 2011 / Governor’s Office for Children / http://www.goc.maryland.gov/PDF/LegReports/OOH/FY2009Out_of_Home_Placement_and_Family_Preservation_Resource_Plan.pdf

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Children in Out-of-Home Placements were not perceived as a concern by individuals taking the Talbot County Needs Assessment Survey.

Placement location, in particular treatment settings, was expressed as a concern by members of the LCT focus group. Because all treatment centers are located outside of Talbot County and all but 1 is located on the Western Shore, care coordination, discharge planning and family involvement is often compromised by the distance.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Children Removed from their Homes	16.22% (61)	26.60% (100)	37.77% (142)	14.10% (53)	5.32% (20)	376

2013 Talbot Needs Assessment Survey

Indicator: Homelessness

MONITOR

Definition: Individuals seeking shelter at a homeless shelter.

Significance: Housing is a basic need that must be met to provide a foundation for developmental, educational and emotional growth. Children that experience homelessness are more likely to experience adverse childhood events which impact them far beyond childhood.

FY 2011 – Homeless Clients in Shelters – Talbot County

Emergency Shelters:	38
Transitional Shelters:	0
Other:	0
TOTAL REPORTED:	38

Sheltering Demographics by Adult vs. Children, Gender, Age, & Ethnicity – FY 2011

Adults:	38	Male: 25 / Female: 13
Child:	0	
Age 18-24:	2	
Age 25-34:	8	
Age 35-44:	8	
Age 45-61:	18	
Age 62+:	2	
Black:	16	
White:	18	
Non-Hispanic:	29	
Other Multi:	1	
Refused:	3	

Talbot County has a small homeless population. Frequently homelessness in rural counties looks very different than in urban centers. In rural areas individuals and families that are homeless are frequently sheltered by friend and family members so the sight of individuals sleeping without shelter is less frequent.

The Talbot Interfaith Shelter (TIS), in collaboration with the Housing Commission of Talbot, just received a \$50,000 technical assistance grant from the Maryland Department of Housing and Community Development. The grant is for a needs assessment, feasibility study and the preliminary site and building design for a year-round homeless shelter in Talbot County.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

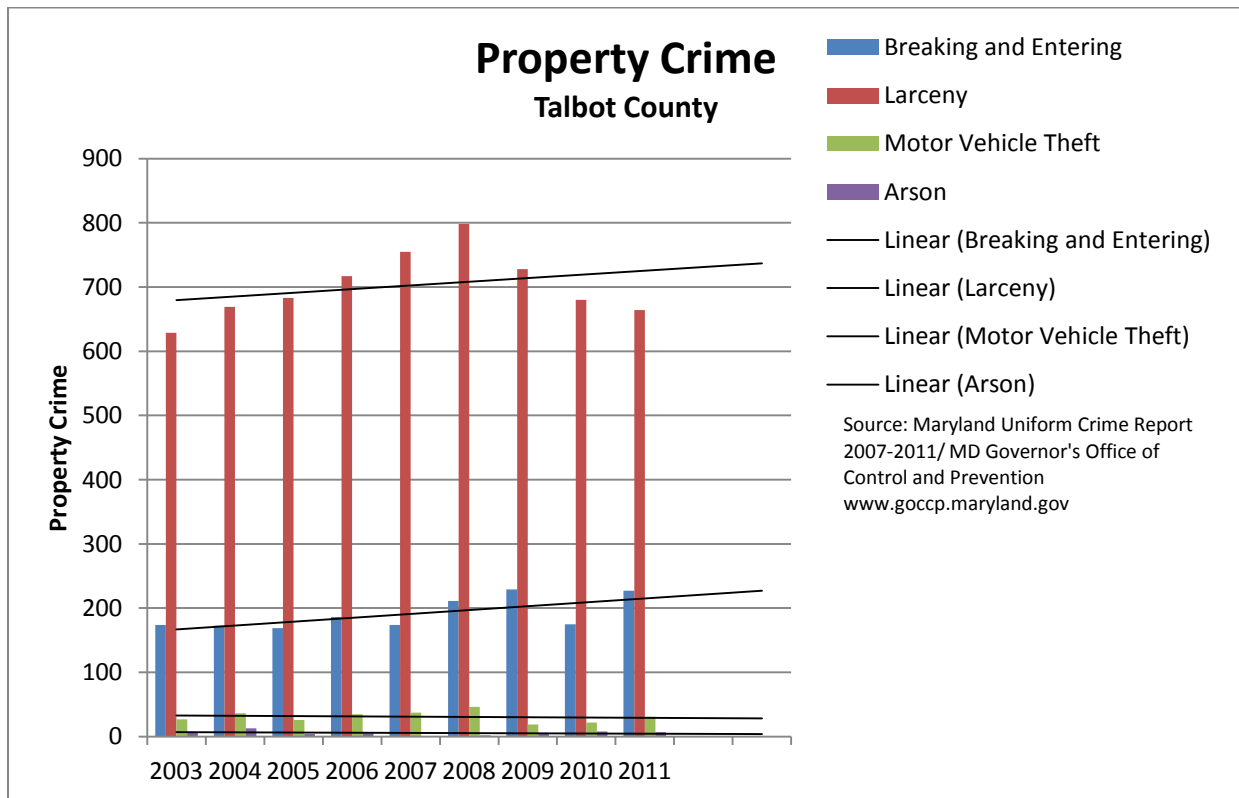
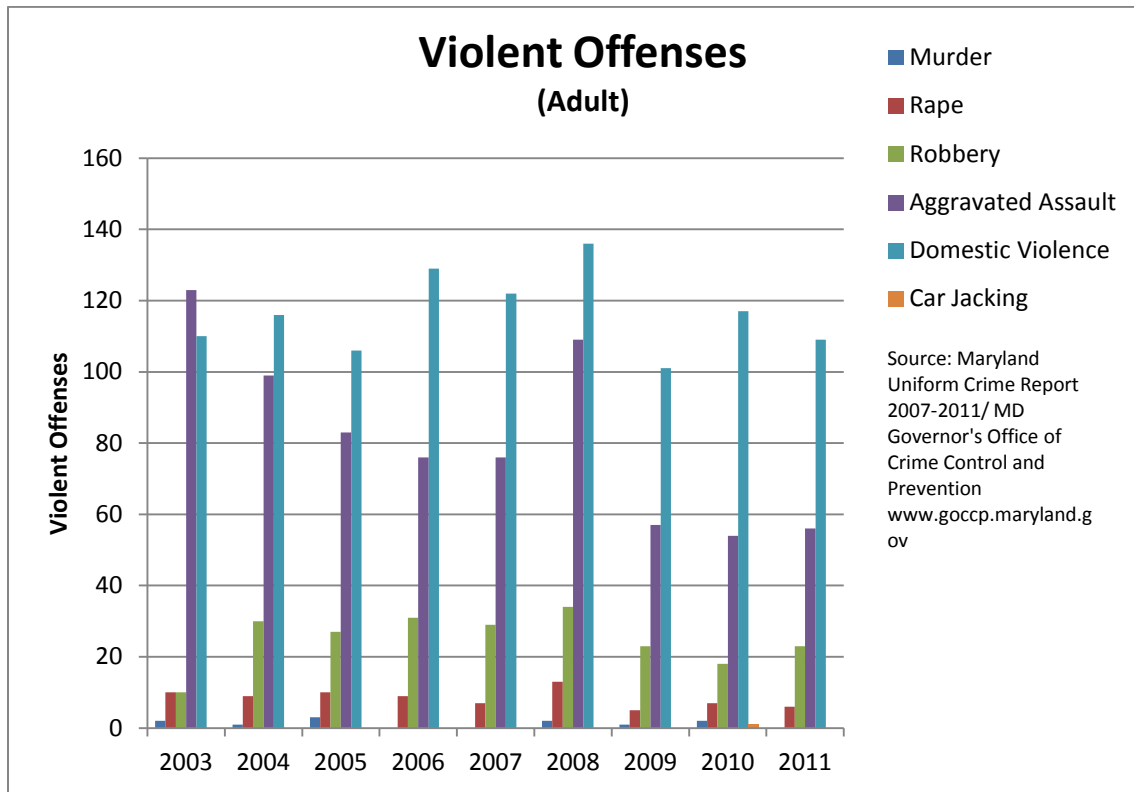
Homelessness was not perceived as a concern by adults or youth taking the Talbot County Needs Assessment Survey and not expressed as a concern by focus groups or key informants.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Homelessness	12.40% (48)	23.77% (92)	36.69% (142)	19.12% (74)	8.01% (31)	387

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Homelessness	52.94% (9)	11.76% (2)	35.29% (6)	17

2013 Youth Talbot Needs Assessment Survey



Crime in Talbot County reached a high point during the initial phase of the economic crisis starting in 2008. Since this time most criminal indicators have been slowly declining. Another story behind this data is the substance abuse rise that Talbot County has been experiencing in recent years. Crimes such as Larceny, Breaking and Entering, Robbery, Aggravated Assault and domestic violence frequently have elements of either addiction or substance use.

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Crime was not perceived as a concern by adults or youth taking the Talbot County Needs Assessment Survey and not expressed as a concern by focus groups or key informants.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Crime Rate	9.69% (37)	17.54% (67)	36.65% (140)	24.61% (94)	11.52% (44)	382
Violence in the Home	10.16% (39)	13.80% (53)	31.51% (121)	30.99% (119)	13.54% (52)	384
Sexual Violence/Rape	13.12% (50)	21.26% (81)	34.12% (130)	22.57% (86)	8.92% (34)	381

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Crime Rate	43.75% (7)	31.25% (5)	25% (4)	16
Violence in the Home	62.50% (10)	25% (4)	12.50% (2)	16
Sexual Violence/Rape	52.94% (9)	23.53% (4)	23.53% (4)	17

2013 Youth Talbot Needs Assessment Survey

Percentage of Families & People Who's Income in the Past 12 Months is Below the Poverty Level
2009 – 2011 American Community Survey 3 Year Estimates

Talbot Poverty Rate (all persons): 8.2%
 Talbot Childhood Poverty Rate (under age 18): 12.9%

All families below the poverty level: 5.8%
 Families with related children under age 18 below the poverty level: 10%
 Families with related children under age 5 only below the poverty level: 22.4%
 Families with female householder, no husband present, below the poverty level: 23%
 Families with female householder, no husband present, with related children under age 18 below the poverty level: 22.8%
 Families with female householder, no husband present, with related children under age 5 only below the poverty level: 64.6%

Source: U.S. Census Bureau (2009 – 2011 American Community Survey 3 Year Estimates)

	Talbot					Maryland				
	2011	2010	2009	2008	2007	2011	2010	2009	2008	2007
All Ages in Poverty:	4058 10.8%	3621 9.7%	3150 8.8%	2970 8.3%	2953 8.3%	581,244 10.2%	559,937 9.9%	509,141 9.2%	448,788 8.2%	455,601 8.3%
Under Age 18 in Poverty:	1221 17.1%	1083 14.9%	997 14.1%	875 12.5%	866 12.2%	184,238 13.9%	174,469 13.1%	157,164 11.8%	157,831 10.4%	141,532 10.6%
Ages 5 – 17 in Families in Poverty:	817 15.4%	715 13.2%	635 12.3%	562 11.1%	551 10.7%	122,071 12.7%	113,786 11.8%	97,754 10.3%	86,793 9.1%	92,601 9.7%

Source: U.S. Census Bureau, Small Area & Income Poverty Estimates (SAIPE)

Community Input: 2013 Talbot Needs Assessment Survey, Focus Group and Key Informant Interview summaries.

Poverty was the third highest rated concern, in the area of Family and Community, of the 388 individuals that answered this question. The youth taking the survey did not express a significant concern in the area of poverty. Poverty was viewed as a significant factor by two of the focus groups. The consensus in the groups was that poverty influences many of the other indicators of well being because when a family is not financially secure it affects their range of choices. Parents may be working more than one job, resulting in less time at

home with their children, more unsupervised time for their children, less ability to assist with school work or to attend school meetings, less time to attend to their child's health care, etc.

Talbot County Needs Assessment Community Survey 2013						
Issue	1 Not a Problem	2	3 Somewhat of a problem	4	5 Biggest Problem	Total
Poverty	7.99% (31)	11.08% (43)	31.70% (123)	31.44% (122)	17.78% (69)	388

2013 Talbot Needs Assessment Survey

Talbot County Youth Needs Assessment Community Survey 2013				
Issue	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Total
Poverty	47.06% (8)	41.18% (7)	11.76% (2)	17

2013 Youth Talbot Needs Assessment Survey

Community Resource Mapping

Services available across the full continuum of care including all child-serving public and private agencies

PUBLIC SERVICES

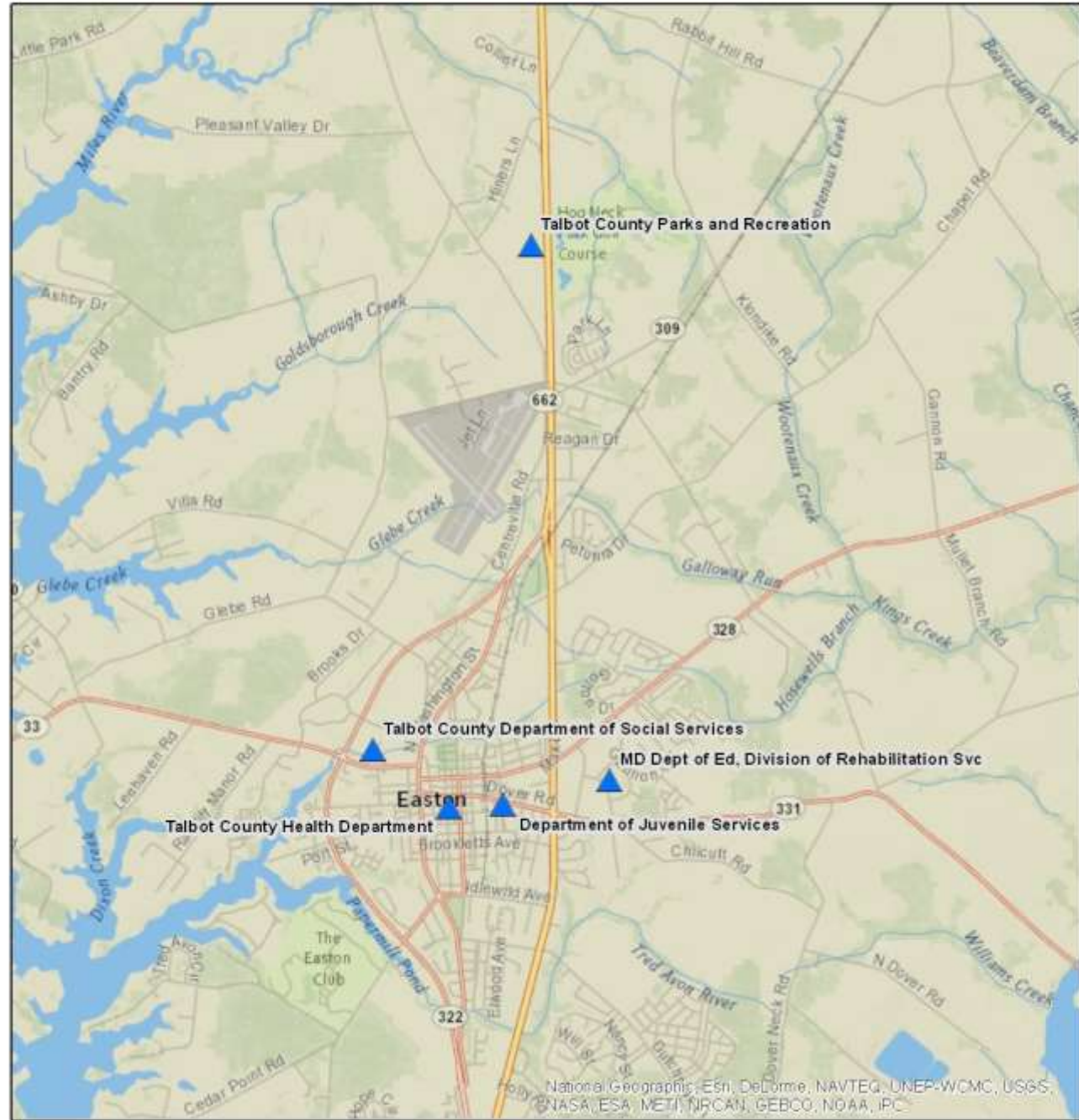
AGENCY	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Department of Juvenile Services, Easton Office	600 Dover Road, Suite 104	Easton	MD	21601	410-822-5010
Maryland Dept. of Education, Division of Rehabilitation Services	8221 Teal Drive, Unit 429	Easton	MD	21601	410-822-1831
Maryland Developmental Disabilities Administration	100 S. Hanson Street	Easton	MD	21601	410-819-5600
Talbot County Department of Social Services	301 Bay Street, #5	Easton	MD	21601	410-770-4848
Talbot County Health Department	100 S. Hanson Street	Easton	MD	21601	410-819-5600
Talbot County Parks and Recreation	10028 Ocean Gateway	Easton	MD	21601	410-770-8050

LEGAL ASSISTANCE	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Mid Shore Pro-Bono	8 S. West Street	Easton	MD	21601	410-690-8128
Legal Aid Bureau	210 Marlboro Avenue	Easton	MD	21601	410-763-9676

PUBLIC TRANSPORTATION	TELEPHONE	SPECIAL SERVICES
Delmarva Community Transit (DCT)	410-822-4673	Seniors (60 & older), persons with disabilities & Medicare card holders pay \$1.50 transportation to medical appointments, senior center.

EMERGENCY SHELTERS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Neighborhood Service Center	126 Port Street	Easton	MD	21601	410-822-5105
Mid Shore Council Family Violence	300 Talbot Street	Easton	MD	21601	800-927-4673
Talbot Interfaith Shelter	www.talbotinterfaithshelter.org	Easton	MD	21601	410-253-5414

FOOD PANTRIES	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Asbury United Methodist Church	18 S. Higgins Street	Easton	MD	21601	410-822-3476
Christ Church	100 Willow Street	St. Michaels	MD	21663	410-745-9076
Neighborhood Service Center	126 Port Street	Easton	MD	21601	410-822-7013
Presbyterian Church	617 N. Washington Street	Easton	MD	21601	410-822-3324
St. Vincent de Paul	29533 Canvasback Lane	Easton	MD	21601	410-770-4505
Scott's United Methodist Church	3478 Main Street	Trappe	MD	21673	410-476-3980
Talbot County Senior Center	400 Brookletts Avenue	Easton	MD	21601	410-822-2869
Talbot Evangelistic Church	6099 Ocean Gateway	Trappe	MD	21673	410-822-8401



Talbot Family Network
Needs Assessment

Community Resources

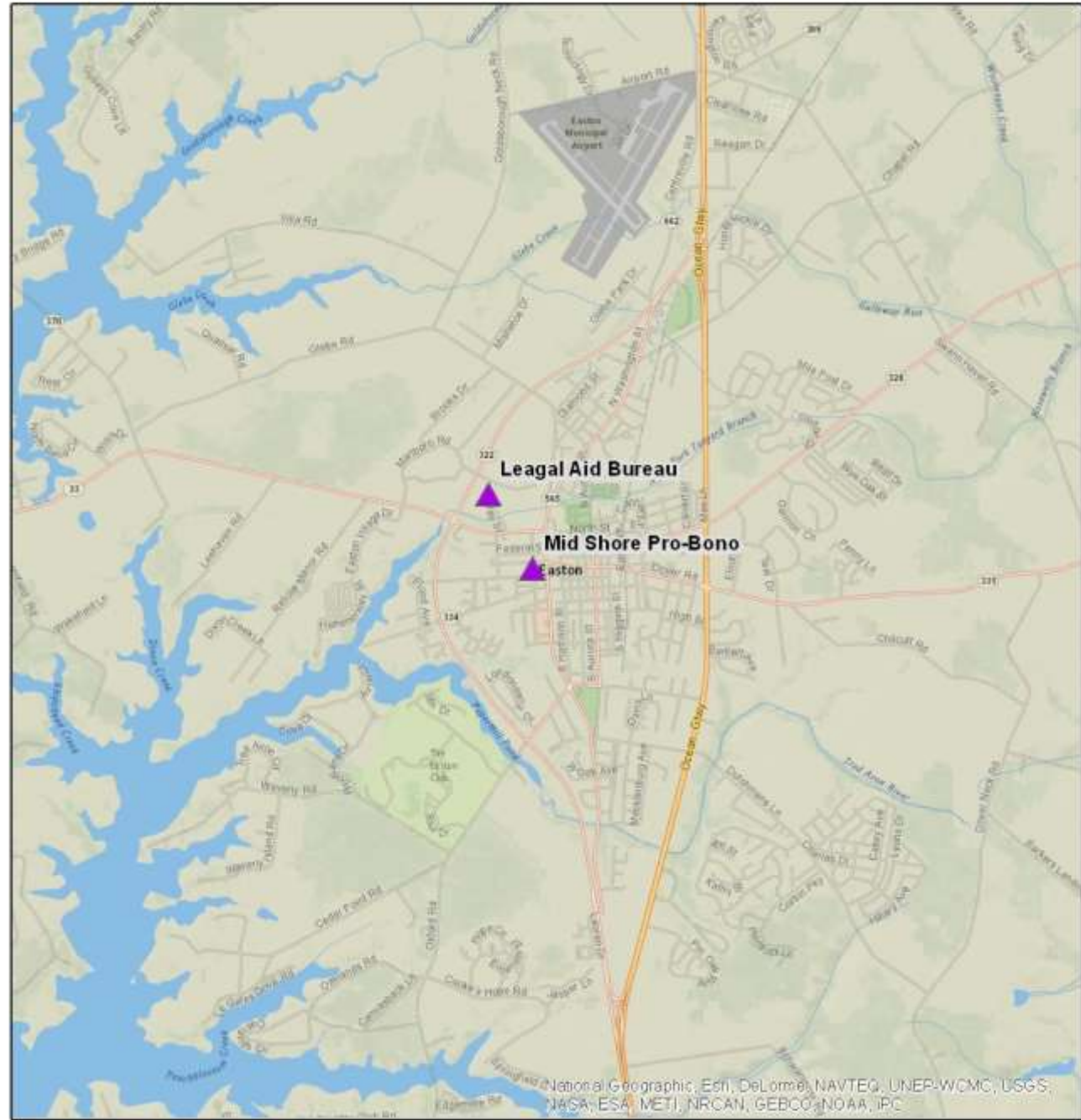
Community Services

▲ Government Services



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Talbot Family Network
Needs Assessment

Community Resources

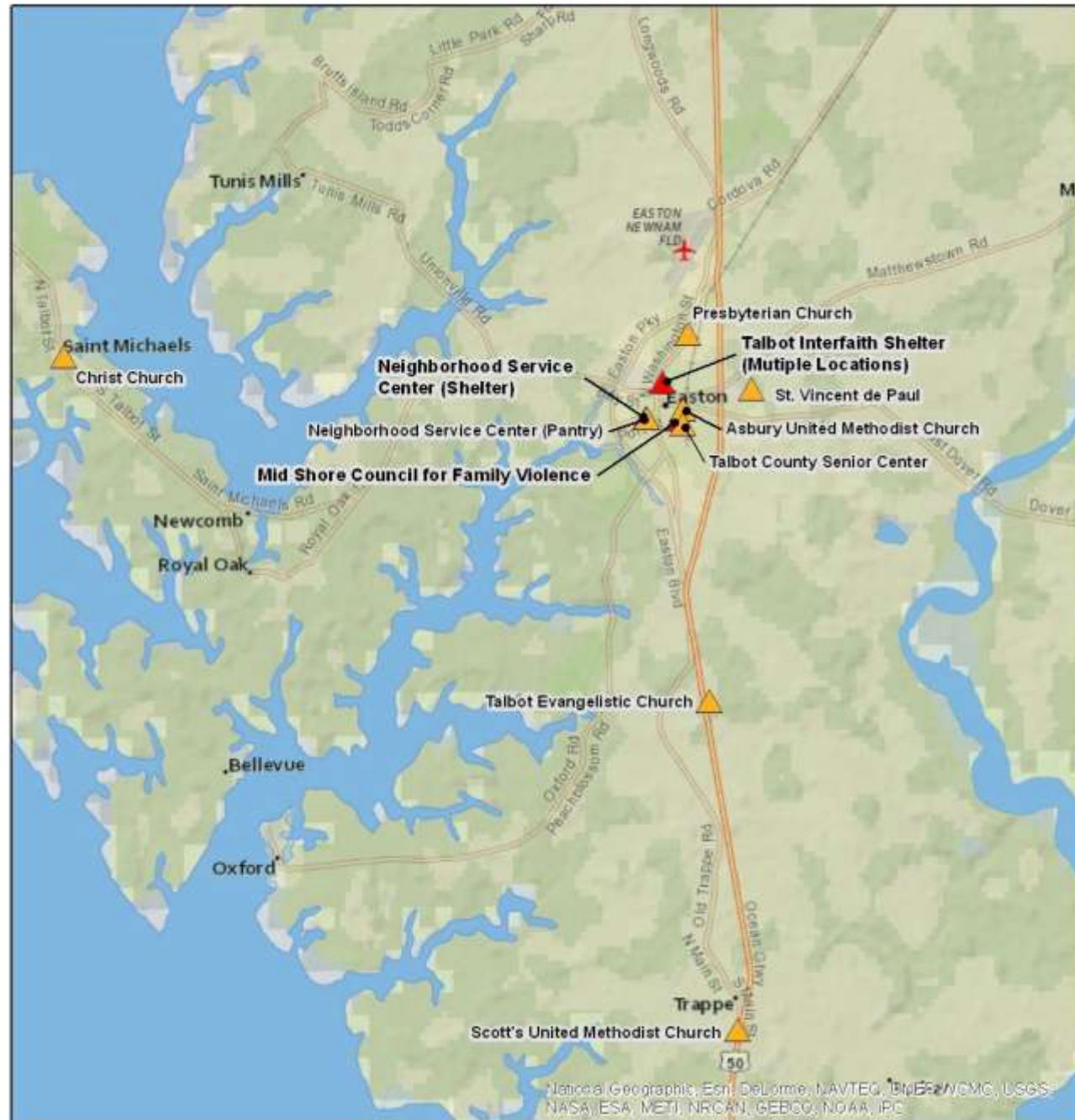
Community Services

▲ Legal Assistance



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Talbot Family Network Needs Assessment

Community Resources

Community Services

▲ Food Pantries

▲ Homeless Shelters



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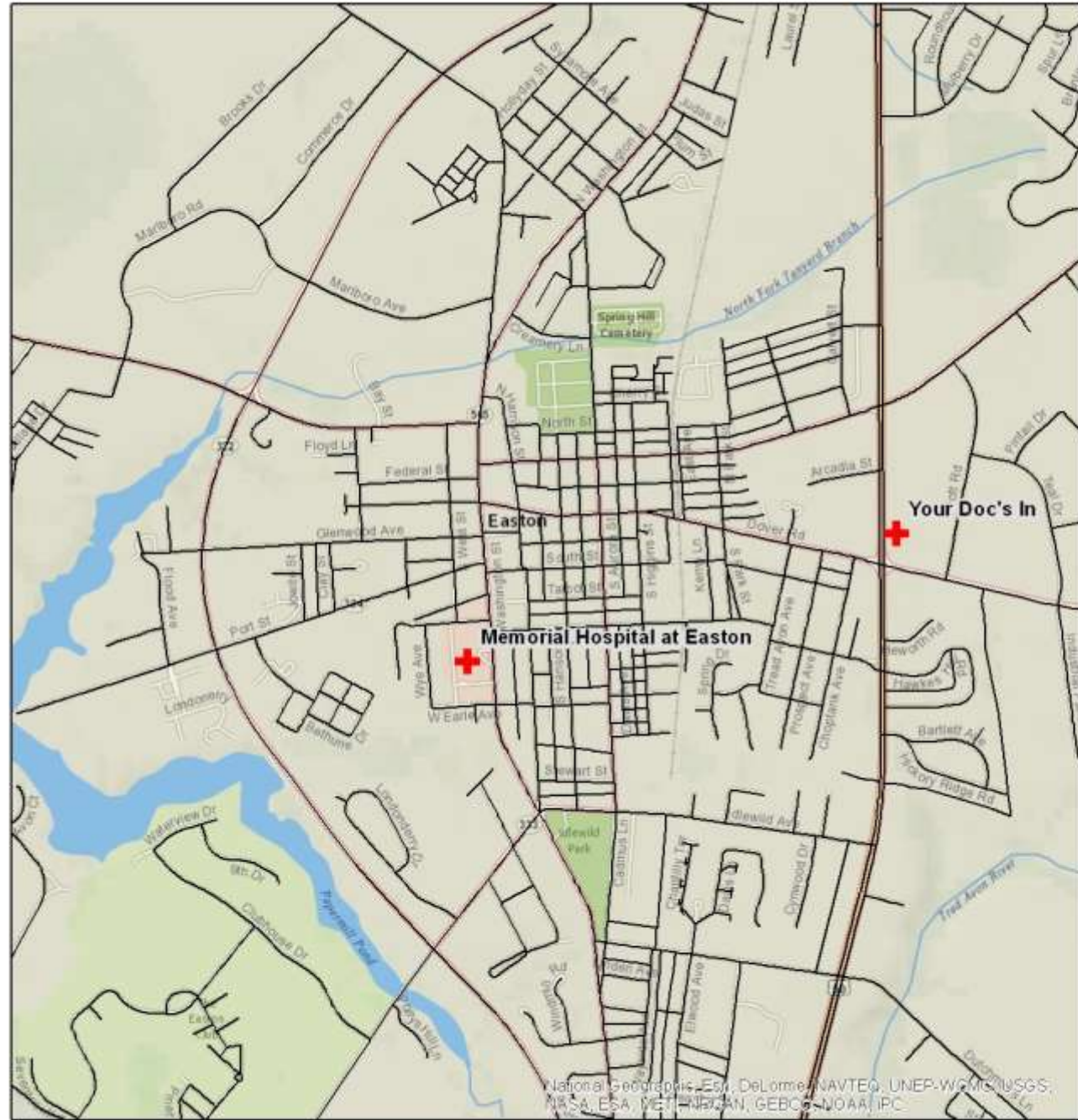
HEALTH CARE

MEDICAL FACILITIES	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	ADDITIONAL INFO
Memorial Hospital at Easton	219 S. Washington St	Easton	MD	21601	410-822-1000	140 Inpatient Beds / Emergency Department
Your Doc's In	8163 Ocean Gateway	Easton	MD	21601	410-822-0200	Walk-In Urgent Care Facility

PEDIATRICIAN - NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	# OF PEDIATRICIANS AT LOCATION
The Bay Pediatric Center	606 Dutchmans Lane	Easton	MD	21601	410-763-8272	5
Amy Davison, MD	8626 Brooks Drive	Easton	MD	21601	410-253-1111	1
Malek Derakshani	603 Dutchmans Lane	Easton	MD	21601	410-822-7909	1
Shore Pediatrics	8579 Commerce Drive	Easton	MD	21601	410-822-8550	2
Tidewater Medical Group	605 Dutchmans Lane	Easton	MD	21601	410-822-6712	2

FAMILY PRACTICE - NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	# OF PROVIDERS AT LOCATION
Bayside Family Practice	538 Cynwood Drive	Easton	MD	21601	410-763-8999	1
Robert Carrillo, MD	505 Dutchmans Lane	Easton	MD	21601	410-822-4553	1
Easton Family Physicians	508 Idlewild Avenue	Easton	MD	21601	410-822-9133	2
Family Care of Easton	8579 Commerce Drive	Easton	MD	21601	410-819-0404	1
Family Medicine Primary Care	8221 Teal Drive	Easton	MD	21601	410-820-6870	1
James Palumbo, MD	510 Idlewild Avenue	Easton	MD	21601	410-820-8226	1
River Family Physicians	555 Cynwood Drive	Easton	MD	21601	410-820-7270	4
Bay Hundred Health Center	933 S. Talbot Street	StMich	MD	21663	410-745-0200	1

OBSTETRICIANS - NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	# OF OBSTETRICIANS AT LOCATION
Chesapeake Women's Health	401 Purdy Street	Easton	MD	21601	410-820-0038	4
Eastern Shore Gynecology	598 Cynwood Drive	Easton	MD	21601	410-822-1221	3
Mid-Shore Women's Health	401 Purdy Street	Easton	MD	21601	410-822-3246	2
Ronald Sweet, MD	505 Dutchmans Lane	Easton	MD	21601	410-822-3246	1



Talbot Family Network
Needs Assessment

Community Resources

Health Care

+ Medical Facilities



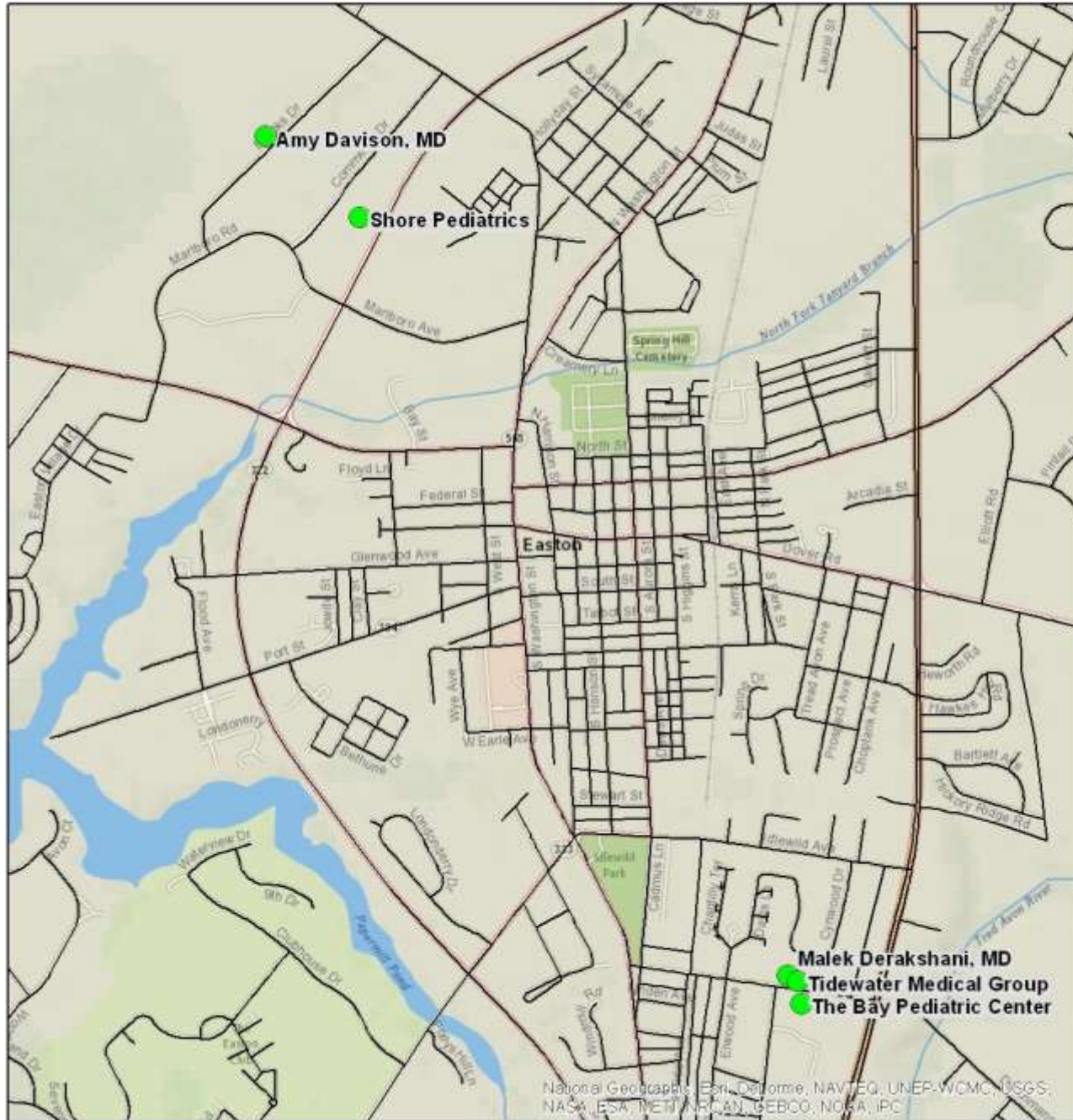
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Talbot Family Network Needs Assessment

Community Resources

Health Care

● Pediatricians



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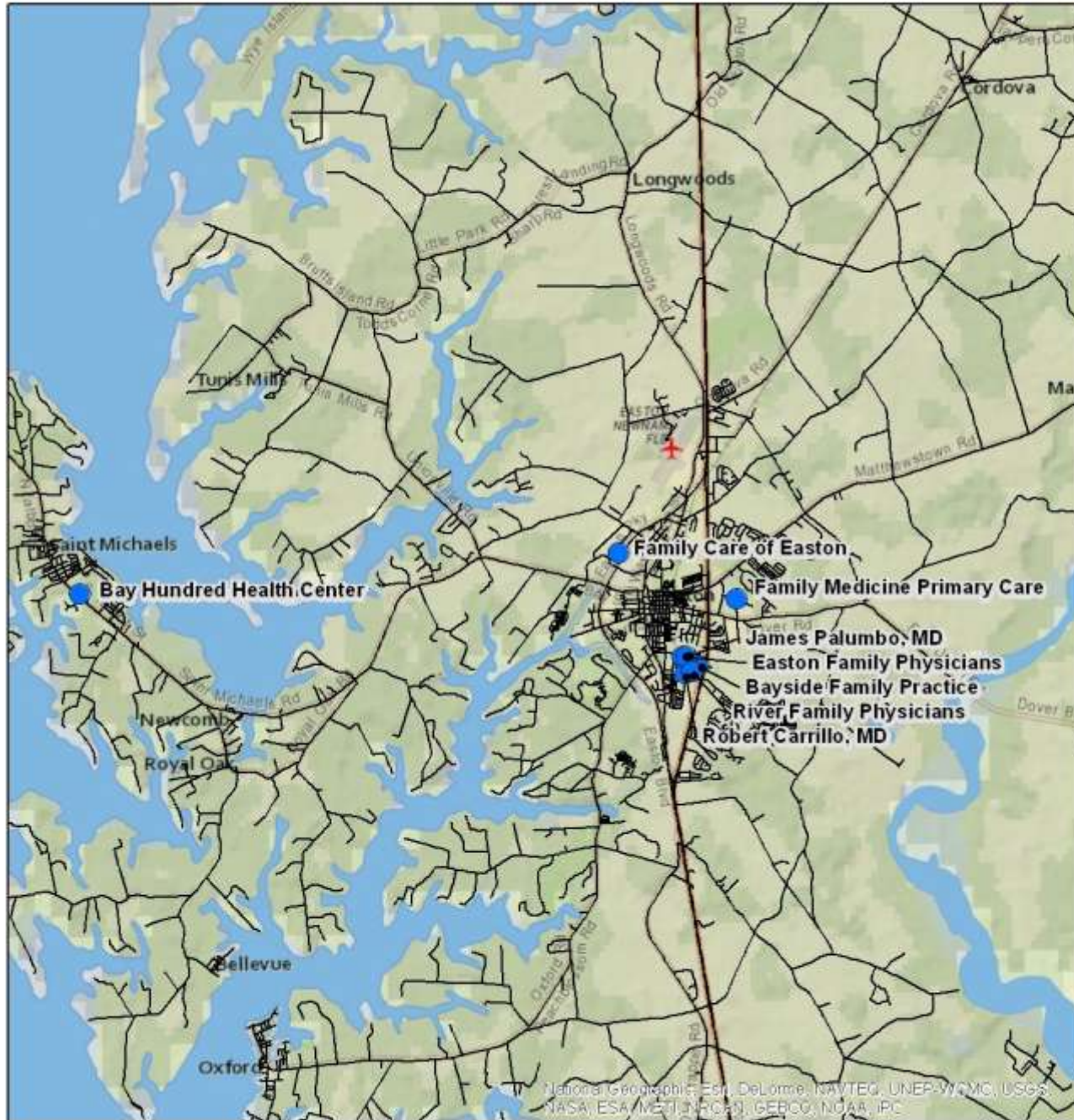
Map data sources: National Geographic, Esri, DeLorme, NAVTEQ, UNEP-WCMC, USGS, NASA, ESA, METI, NRCAN, GEBCO, NOAA, IPC

Talbot Family Network Needs Assessment

Community Resources

Health Care

● Family Practice



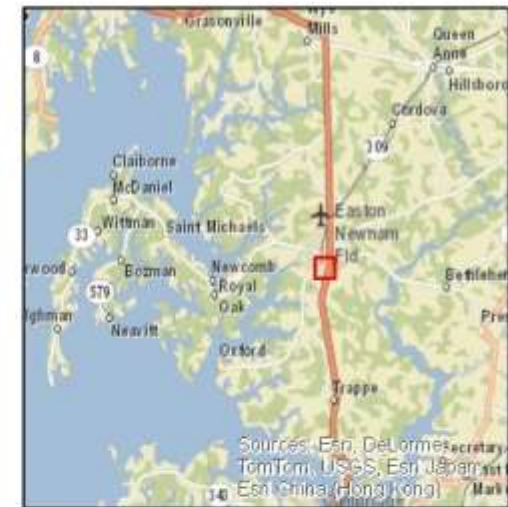
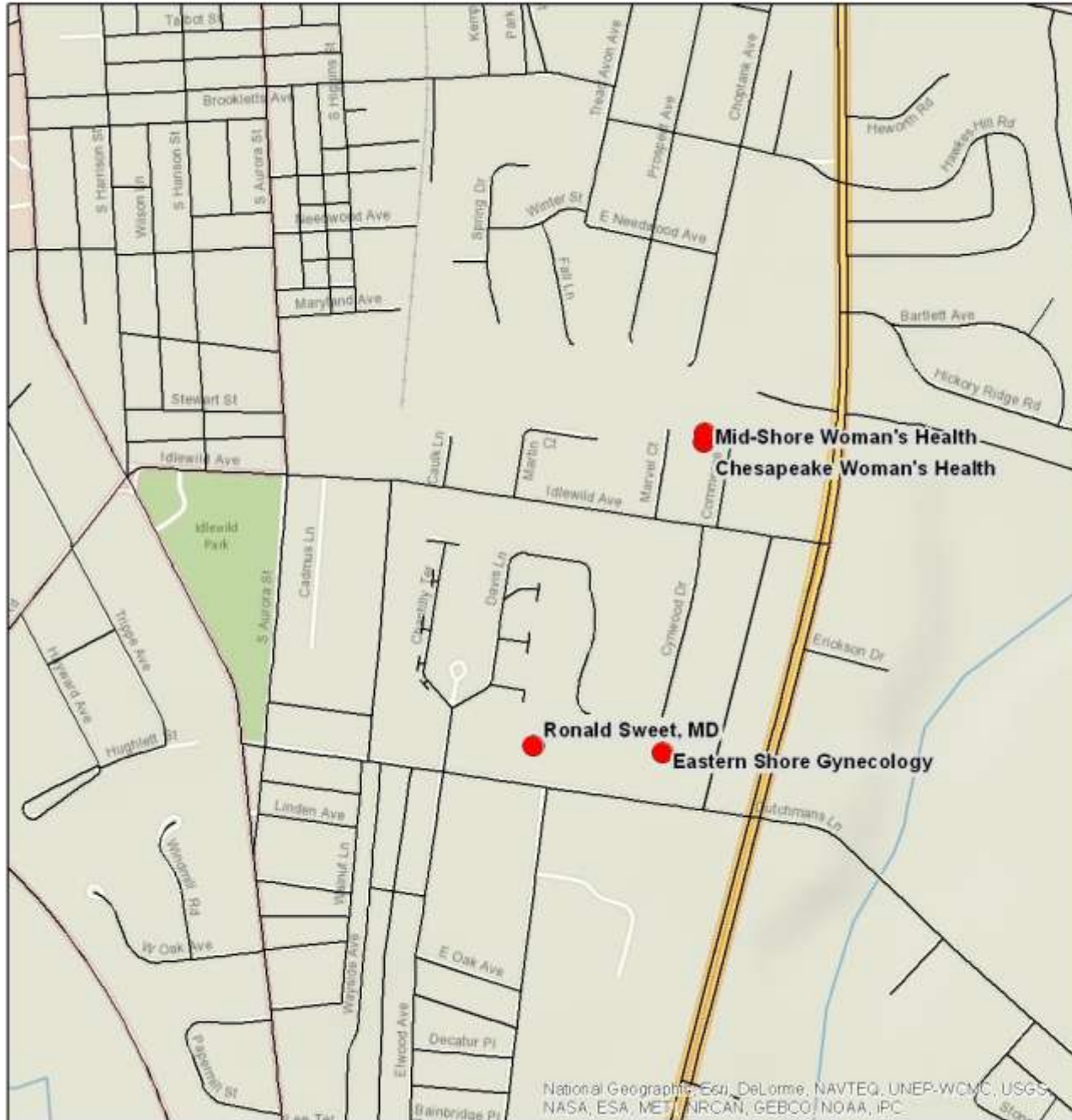
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Talbot Family Network
Needs Assessment

Community Resources

Health Care

● Obstetricians



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BEHAVIORAL HEALTH

OUTPATIENT MH CLINICS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	SERVICES PROVIDED
Corsica River Mental Health	993 Talbot St, Ste 4	St. Michaels	MD	21663	410-745-8028	Outpatient mental health services
Eastern Shore Psychological Center	429520 Canvasback Drive	Easton	MD	21601	410-822-5017	Outpatient mental health services
For All Seasons	300 Talbot Street	Easton	MD	21601	410-822-1018	Outpatient mental health services
PSYCHIATRIST	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	
Anthony Drobnick, MD	411 S. Talbot Street	St. Michaels	MD	21663	410-745-0375	
James Kelly, MD	29466-5 Pintail Drive	Easton	MD	21601	410-820-8535	
Stephen Slatkin, MD	20 Bay Street	Easton	MD	21601	410-819-6766	
Camille Woodberry, MD	5586 Leeward Lane	Tilghman	MD	21671	410-886-9860	
PSYCHOLOGISTS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	
Robert Blatchley, PhD	18 N. Hanson Street	Easton	MD	21601	410-822-3188	
Virginia Blatchley, PhD	18 N. Hanson Street	Easton	MD	21601	410-822-3188	
Richard Greenbaum, PhD	8706 Commerce Drive	Easton	MD	21601	410-820-7286	
Fran White, PhD	9199 High Banks Drive	Easton	MD	21601	410-770-8385	
CLINICAL SOCIAL WORKERS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	
Cynthia Browne, LCSW-C	8706 Commerce Drive	Easton	MD	21601	410-938-8474	
Lauren Carter, LCSW-C, LCADC	408 N. Washington Street	Easton	MD	21601	410-253-5035	
Brighton Laznovsky, MA, LGSW, LCADC	408 N. Washington Street	Easton	MD	21601	410-770-7175	
Jennifer Short, LCSW-C	408 N. Washington Street	Easton	MD	21601	410-688-2258	
Kaitlin Waldrip, MSW, LCSW-C	5 Earle Avenue	Easton	MD	21601	410-822-4577	
Nancy Whitten, LCSW-C	9660 Leeds Landing Circle	Easton	MD	21601	410-820-9191	
LICENSED PROFESSIONAL COUNSELOR	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	
Catherine Cripps, LCPC, ATR	506 Goldsborough St.	Easton	MD	21601	410-819-8832	
Elaine Masso, LCPC	5564 Heron Point Road	RoyalOak	MD	21662	410-745-2103	
Loriann Oberlin, MS, LCPC	8706 Commerce Drive	Easton	MD	21601	410-461-8528	
Vicki Rahenkamp, LCPC	3 Goldsborough Street	Easton	MD	21601	410-820-4280	
Toni Roth Sullivan, EdD, LCPC, ACS	8706 Commerce Drive	Easton	MD	21601	410-271-4840	
ADVANCED PRACTICE RN - CLINICAL	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	
Deborah Gootee, CRNP-PMH	103 E. Chestnut Street	St.Michaels	MD	21663	410-745-5595	
Linda Hallowell, CRNP-PMH	103 E. Chestnut Street	St.Michaels	MD	21663	410-745-5595	
Alexandra Hanks, MS, RNCS-P	120 S. Aurora Street	Easton	MD	21601	410-763-9550	

BEHAVIORAL HEALTH, continued

REHABILITATION PROGRAMS

Channel Marker

STREET ADDRESS

222 Port Street

CITY

Easton

STATE

MD

ZIP CODE

21601

TELEPHONE

410-822-4611

ADDICTION SERVICES

Eastern Shore Psychological Center

Talbot County Health Department

STREET ADDRESS

29520 Canvasback Dr

100 S. Harrison Street

CITY

Easton

Easton

STATE

MD

MD

ZIP

CODE

21601

21601

TELEPHONE

410-822-5017

410-819-5600

SERVICES PROVIDED

Substance Abuse Treatment

Substance Abuse Treatment

24 HOUR CRISIS HOTLINES

Eastern Shore Operations Center
(ESOC)

Suicide Hotline

Life Crisis Center Hotline

Youth Crisis Hotline

For All Seasons, Inc. Hotline

Mid-Shore Council on Family Violence

Veterans Crisis Hotline

HOTLINE PHONE NUMBER

888-407-8018

888-407-8018

800-422-0009

800-422-0009

800-310-7273

800-927-4673

800-273-8255, Press 1

SERVICES PROVIDED

Serves as the behavioral health emergent, urgent information and referral call center

Provides counseling for suicide prevention

Counseling for victims of domestic violence or sexual assault

Crisis intervention, support and referrals

Counseling, advocacy, and education to victims of rape, sexual assault and abuse



Crisis intervention, counseling, support groups, emergency shelter

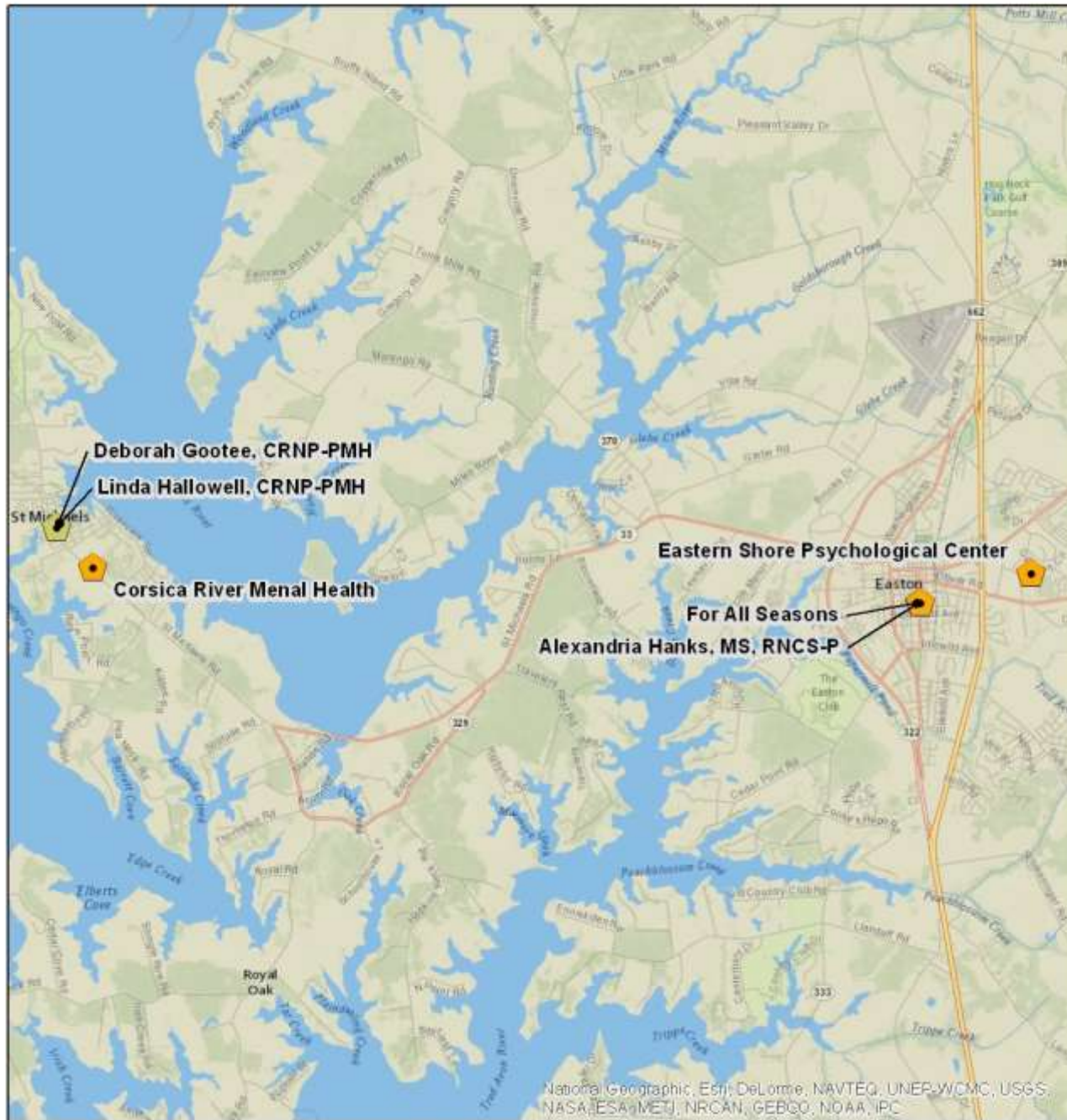
Connects Veterans in crisis and their families with Department of Veterans Affairs responders

Talbot Family Network Needs Assessment

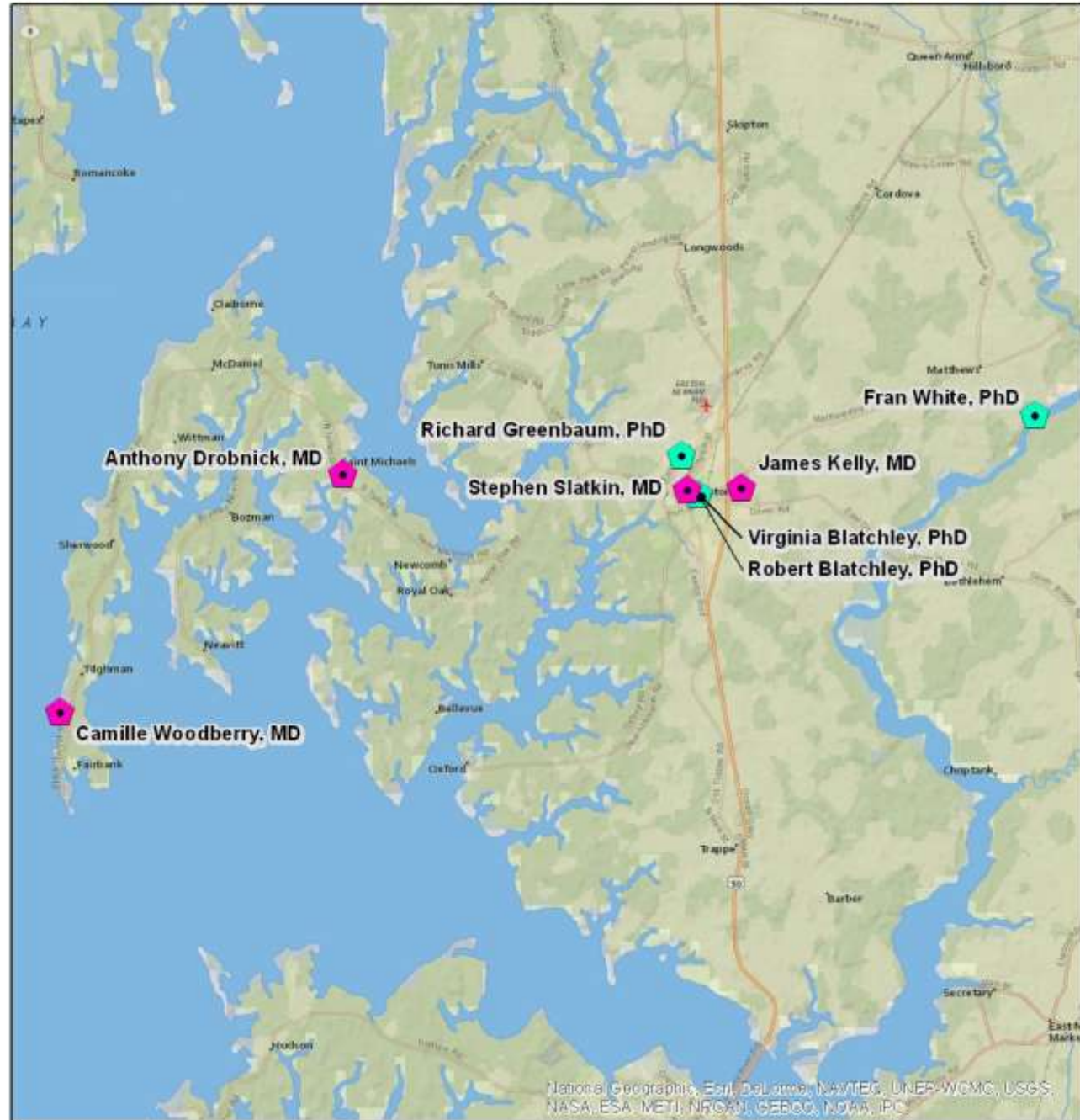
Community Resources

Behavioral Health

-  Outpatient Mental Health Centers
-  RN - Clinical



Revised: Talbot County
Dept of Public Works GIS
August 22, 2013



Talbot Family Network
Needs Assessment

Community Resources

Behavioral Health

- ◆ Psychiatrist
- ◆ Psychologists




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Dept of Public Works GIS
June 27, 2013

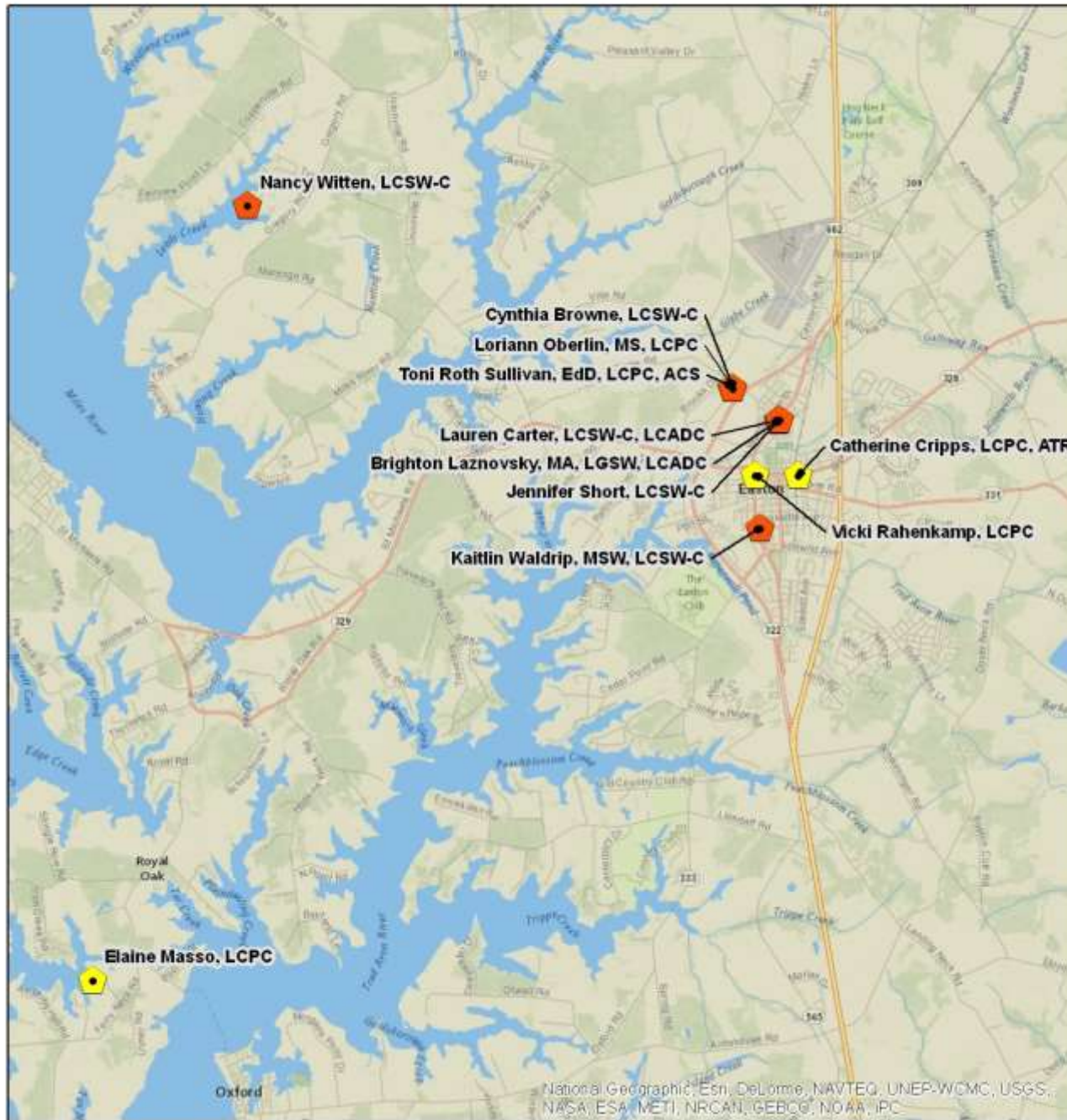
National Geographic, Esri, DeLorme, NAVTEQ, UNEP-WCMC, USGS, NASA, ESA, METI, NRCAN, GEBCO, NOAA, IPC

Talbot Family Network Needs Assessment

Community Resources

Behavioral Health

-  Clinical Social Workers
-  Licensed Professional Counselor



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June 27, 2013

SCHOOLS

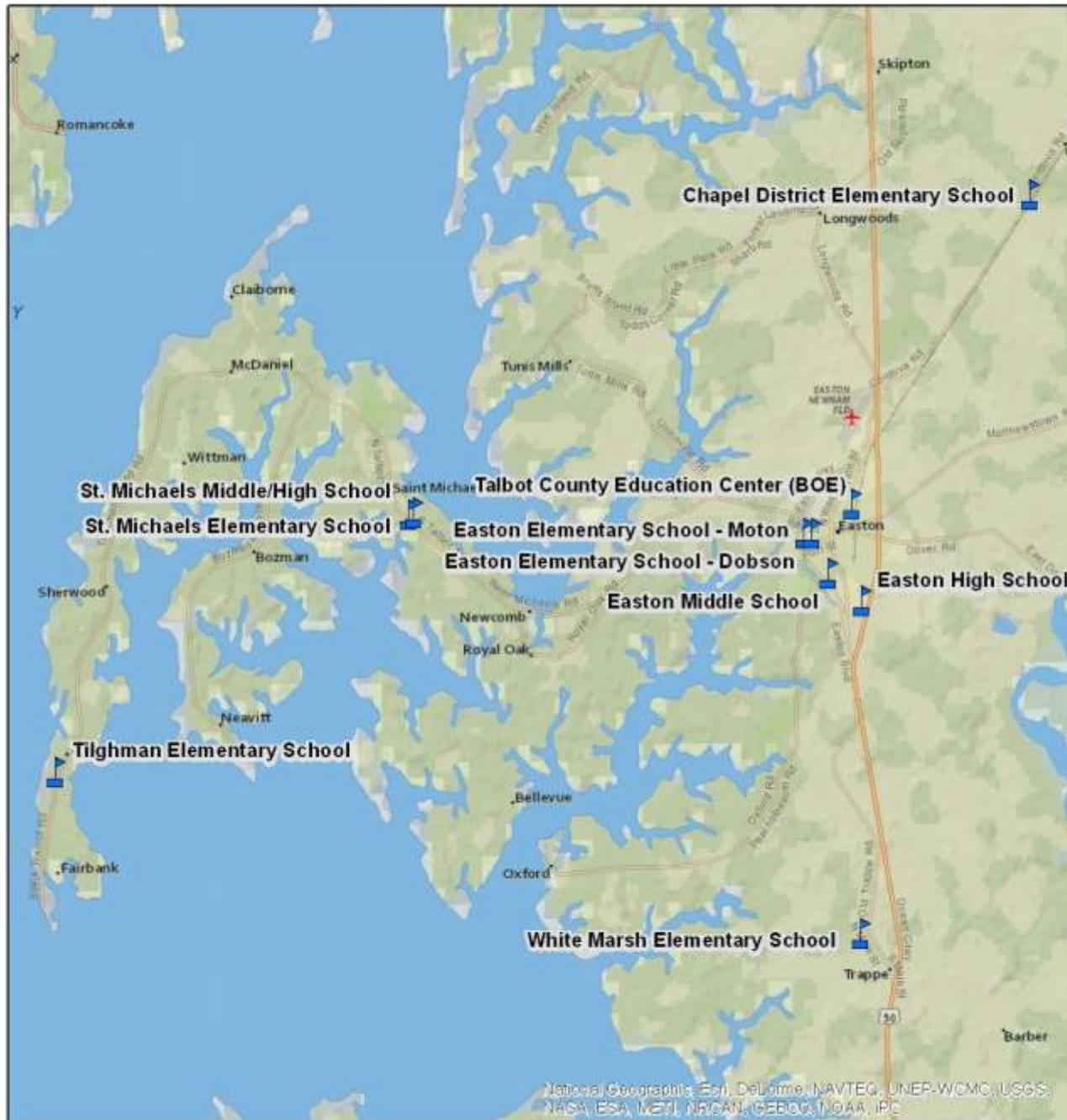
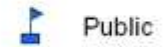
PUBLIC SCHOOLS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Chapel District Elementary	11430 Cordova Road	Cordova	MD	21625	410-822-2391
Easton Elementary Dobson	307 Glenwood Avenue	Easton	MD	21601	410-822-0550
Easton Elementary Moton	305 Glenwood Avenue	Easton	MD	21601	410-822-0686
Easton Middle	201 Peach Blossom Road	Easton	MD	21601	410-822-2910
Easton High	723 Mecklenberg Avenue	Easton	MD	21601	410-822-4180
St. Michaels Elementary	100 Seymour Avenue	St. Michaels	MD	21663	410-745-2882
St. Michaels Middle/High	200 Seymour Avenue	St. Michaels	MD	21663	410-745-2852
Talbot County Education Center (BOE)	12 Magnolia Street	Easton	MD	21601	410-822-0330
Tilghman Elementary	21374 Foster Avenue	Tilghman	MD	21671	410-886-2391
White Marsh Elementary	4322 Lovers Lane	Trappe	MD	21673	410-476-3144

PRIVATE SCHOOLS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE	POPULATION
Chesapeake Christian School	1009 N. Washington Street	Easton	MD	21601	410-822-7600	PK - 12th Grade
Christ Church Day School	111 S. Harrison Street	Easton	MD	21601	410-822-0112	Ages 2 - 4
Country School	716 Goldsborough Street	Easton	MD	21601	410-822-1935	K - 8th Grade
Immanuel Lutheran Pre-School	7215 Ocean Gateway	Easton	MD	21601	410-820-7519	Ages 2 -4
St. Peter and Paul Elementary School	900 E. High Street	Easton	MD	21601	410-822-2251	PK - 8th Grade
St. Peter and Paul High School	900 E. High Street	Easton	MD	21601	410-822-2275	9 - 12th Grade

Talbot Family Network Needs Assessment

Community Resources

Schools



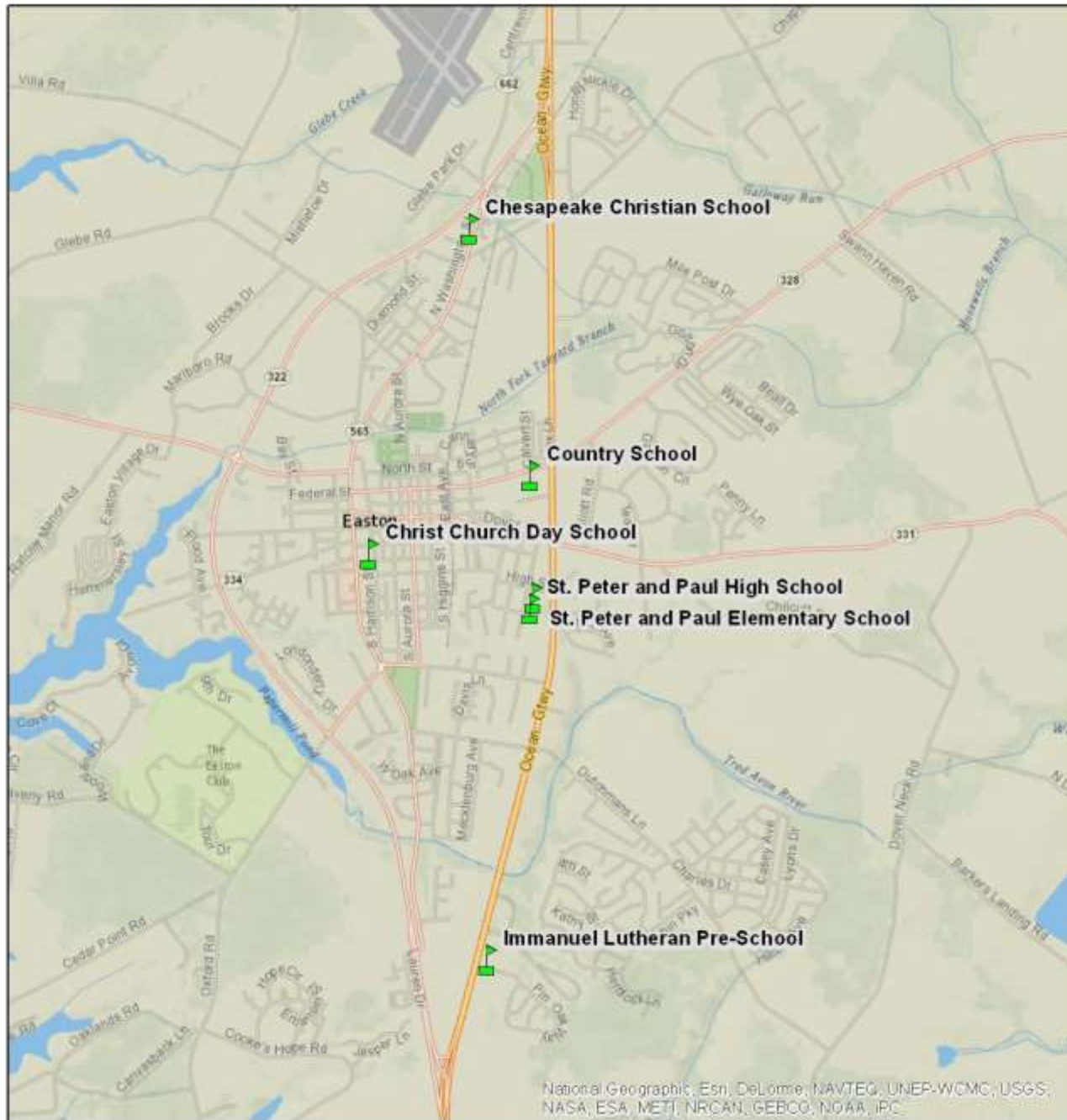
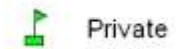
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June 13, 2013

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Talbot Family Network Needs Assessment

Community Resources

Schools



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June 12, 2013

CHILDCARE CENTER/PROVIDERS

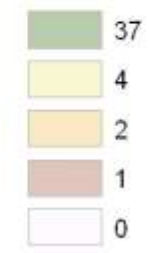
STATE LICENSED CHILDCARE PROVIDERS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Family Child Care Provider	Councell Road	Cordova	MD	21625	410-820-9766
Family Child Care Provider	Chapel Road	Cordova	MD	21625	410-822-6156
Family Child Care Provider	Three Bridge Branch Road	Cordova	MD	21625	410-822-3584
Critchlow Adkins Child Care, Chapel District	11430 Cordova Road	Cordova	MD	21625	410-822-6293
Family Child Care Provider	Fourth Street	Easton	MD	21601	410-770-5518
Family Child Care Provider	Burgess Court	Easton	MD	21601	410-822-6184
Family Child Care Provider	Tullulah Lane	Easton	MD	21601	410-820-7194
Family Child Care Provider	Standish Street	Easton	MD	21601	410-819-3745
Family Child Care Provider	Wye Oak Street	Easton	MD	21601	410-819-6612
Family Child Care Provider	Corbin Parkway	Easton	MD	21601	410-770-4410
Family Child Care Provider	Corbin Parkway	Easton	MD	21601	410-385-0551
Family Child Care Provider	Corbin Parkway	Easton	MD	21601	410-820-7121
Family Child Care Provider	Honeysuckle Drive	Easton	MD	21601	410-8200010
Family Child Care Provider	Honeysuckle Drive	Easton	MD	21601	410-763-9578
Family Child Care Provider	Longwards Road	Easton	MD	21601	410-822-5317
Family Child Care Provider	Blackdog Alley	Easton	MD	21601	410-822-7382
Family Child Care Provider	Blackdog Alley	Easton	MD	21601	410-822-7132
Family Child Care Provider	Blackdog Alley	Easton	MD	21601	410-822-6557
Family Child Care Provider	Manadier Road	Easton	MD	21601	410-763-9077
Family Child Care Provider	Hopkins Neck Road	Easton	MD	21601	410-770-8406
Family Child Care Provider	Tunis Mills Road	Easton	MD	21601	410-819-0049
Family Child Care Provider	S. Washington Street	Easton	MD	21601	410-463-1121
Family Child Care Provider	Aldan Street	Easton	MD	21601	410-822-8624
Family Child Care Provider	Dutchmans Lane	Easton	MD	21601	410-822-8279
Family Child Care Provider	Stoney Ridge Circle	Easton	MD	21601	410-820-4252
Family Child Care Provider	Canvasback Lane	Easton	MD	21601	410-822-6450
Family Child Care Provider	Swann Haven Road	Easton	MD	21601	410-822-2931
Family Child Care Provider	Spur Lane	Easton	MD	21601	410-819-0983
Family Child Care Provider	Golton Drive	Easton	MD	21601	410-786-3477
Family Child Care Provider	Tred Avon Avenue	Easton	MD	21601	410-822-0337
Family Child Care Provider	Bodkin Street	Easton	MD	21601	443-385-0504
Family Child Care Provider	Elizabeth Street	Easton	MD	21601	443-239-9799
Creative Corner	8706 Commerce Drive	Easton	MD	21601	410-822-2123
Critchlow Adkins Child Care, Board of Education	11 Magnolia Street	Easton	MD	21601	410-822-7181
Critchlow Adkins Child Care, Country School	716 Goldsborough Street	Easton	MD	21601	410-822-1935
Critchlow Adkins Child Care, Easton Elementary	307 Glenwood Avenue	Easton	MD	21601	410-822-8906
Manor Discovery Center	702 Idlewild Avenue	Easton	MD	21601	410-822-5555

STATE LICENSED CHILDCARE PROVIDERS	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Shore Health System Child Development Center	133 Vine Street	Easton	MD	21601	410-822-1000
Talbot Cty Early Headstart	215 Bay Street	Easton	MD	21601	410-820-6940
The Kinder Garden, LLC	8701 Brooks Drive	Easton	MD	21601	410-820-8440
Family Child Care Provider	Woodside Road	Newcomb	MD	21653	410-745-2876
Family Child Care Provider	Edgeview Road	Royal Oak	MD	21662	410-820-6598
Family Child Care Provider	Bush Terrace	St.Michaels	MD	21663	410-745-5650
Critchlow Adkins Child Care, St. Michaels Elementary	100 Seymour Avenue	St.Michaels	MD	21663	410-745-5842
Family Child Care Provider	Tilghman Island Road	Sherwood	MD	21665	410-866-2041
Family Child Care Provider	Deep Harbor Farm Road	Sherwood	MD	21665	410-886-2184
Family Child Care Provider	Camper Circle	Tilghman	MD	21671	410-886-2421
Family Child Care Provider	Old Trappe Road	Trappe	MD	21673	410-476-5928
Family Child Care Provider	Baynard Road	Trappe	MD	21673	410-822-7054
Family Child Care Provider	Manadier Road	Trappe	MD	21673	410-476-4463
Critchlow Adkins Child Care, White Marsh	4322 Lovers Lane	Trappe	MD	21673	410-829-3274
Family Child Care Provider	Tilghman Island Road	Wittman	MD	21676	410-819-0392

Talbot Family Network Needs Assessment

Community Resources

State Licensed Childcare Providers



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Dept of Public Works GIS
June 12, 2013

COMMUNITY SERVICES

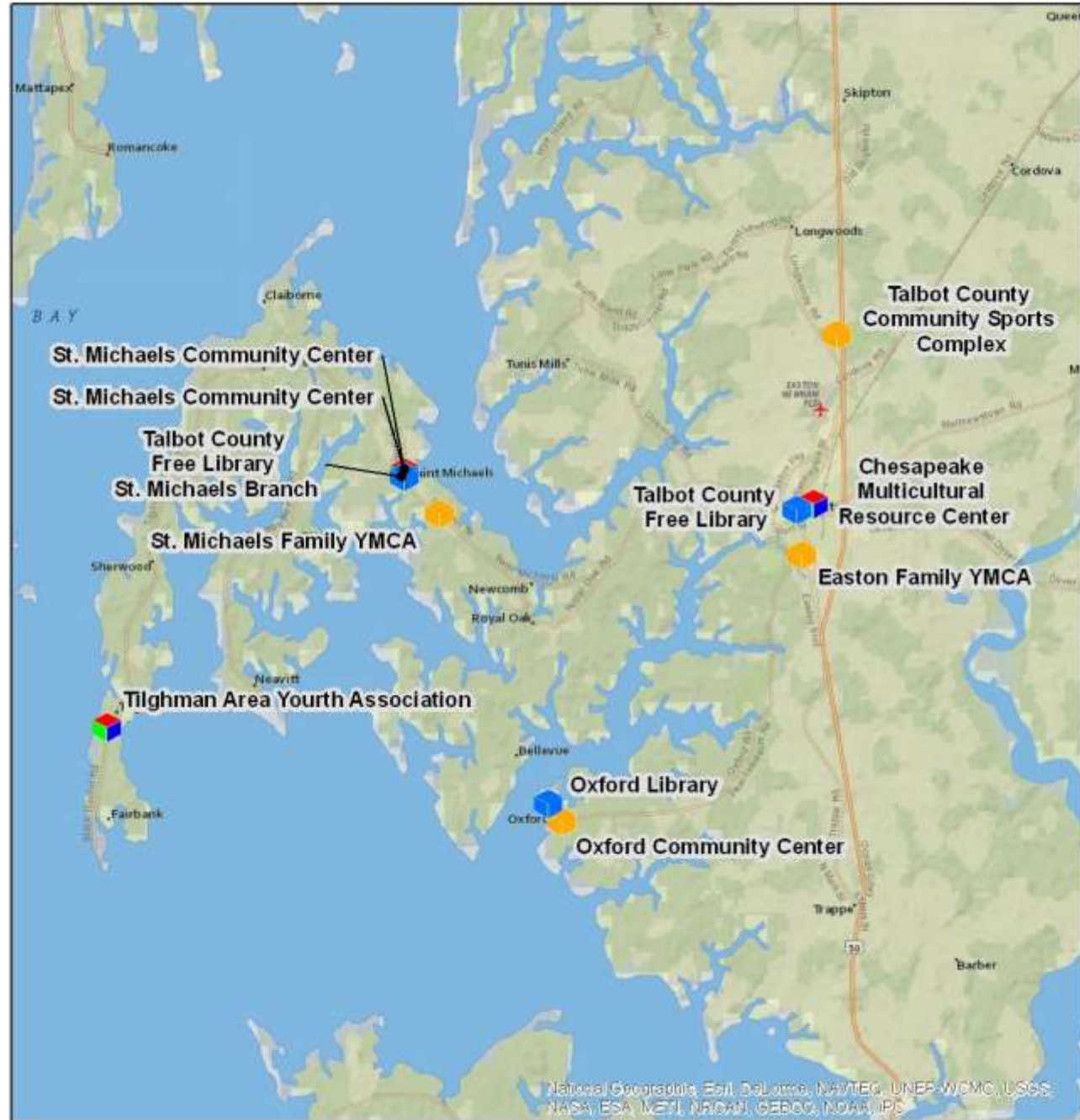
LIBRARY

	STREET ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE
Talbot County Free Library	100 W. Dover Street	Easton	MD	21601	410-822-1626
Talbot County Free Library - St. Michaels Branch	106 Fremont Street	St. Michaels	MD	21663	410-745-6937
Oxford Library	103 Market Street	Oxford	MD	21654	410-226-5727

COMMUNITY CENTERS / YMCA

	STREET ADDRESS	CITY	STATE	ZIP CODE	ADDITIONAL INFO
Easton Family YMCA	202 Peach Blossom	Easton	MD	21601	Variety of programs
Oxford Community Center	Oxford Road	Oxford	MD	21654	Gathering place
St. Michaels Community Center	103 Railroad Avenue	St. Michaels	MD	21663	Programs for all ages
St. Michaels Family YMCA	1013 S. Talbot Street	St. Michaels	MD	21663	Variety of programs
Talbot County Community Sports Complex	10028 Ocean Gateway	Easton	MD	21601	Multi Sport Complex




	STREET ADDRESS	CITY	ZIP CODE	ADDITIONAL INFO
AFTERSCHOOL PROGRAM				
Tilghman Area Youth Association	21374 Foster	Tilghman	21671	Serves approx. 100 students
St. Michaels Community Center	103 Railroad	St. Michaels	21663	Serves approx. 100 students
Ches. Multicultural Resource Center	109 N. Aurora	Easton	21601	Serves approx. 100 students



Talbot Family Network Needs Assessment

Community Resources

Community Centers / Libraries

-  Library
-  Afterschool Program
-  Community Centers / YMCA



Revised: Talbot County
Dept of Public Works GIS
June 26, 2013

Map data sources: National Geographic, Esri, DeLorme, NAVTEC, UNEP-WCMC, USGS, NASA, ESA, METI, NRCAN, GEBCO, NOAA, IPC

RECREATION

PARKS	STREET ADDRESS	CITY	STATE	ZIP CODE
Back Creek Community Park	6204 Tilghman Island Road	Tilghman	MD	21665
Bellevue Community Park	5536 Bellevue Road	Bellevue	MD	21662
Bill Burton Fishing Pier State Park	29761 Bolingbroke Point Dr	Trappe	MD	21673
Causeway Park	Oxford Road, Rt. 333	Oxford	MD	21654
Chapel District Elementary Sports Complex	11430 Cordova Road	Cordova	MD	21625
Cordova Community Park	31028 Skipton Cordova Rd	Cordova	MD	21625
Easton Elementary Dobson Fields	305 Glenwood Avenue	Easton	MD	21601
Easton Middle School Sporting Complex	201 Peachblossom Road	Easton	MD	21601
Easton Skate Park	499 Idlwild Avenue	Easton	MD	21601
Golton Park	29416 Golton Drive	Easton	MD	21601
Home Run Baker Sports Complex	4200 Main Street	Trappe	MD	21673
Ian Mac Morrell Park	29452 Zinnia Court	Easton	MD	21601
Idlewild Park	115 Idlewild Avenue	Easton	MD	21601
Lakeview Community Park	Harrison Circle	Trappe	MD	21673
Matthewstown Run Park	29650 Aldan Street	Easton	MD	21601
Moton Park	501 Port Street	Easton	MD	21601
Mt. Pleasant Practice Field	12 Magnolia Street	Easton	MD	21601
Mulberry Station Park	8764 Mulberry Drive	Easton	MD	21601
Nace's Park	S. Main Street	Trappe	MD	21673
Neavitt Community Park	6350 Bozman Neavitt Road	Neavitt	MD	21612
North Easton - A. James Clark Sports Complex	1078 N. Washington Street	Easton	MD	21601
Olde Trappe Park	3294 Main Street	Trappe	MD	21673
Perry Cabin Park & Sports Complex	710 Talbot Street, N.	St.Michaels	MD	21663
Seymour Avenue Waterfront Park	750 Seymour Avenue	St.Michaels	MD	21663
Sinclair Avenue Waterfront Park	21350 Sinclair Avenue	Tilghman	MD	21671
Stoney Ridge Park	29288 Corbin Parkway	Easton	MD	21601
Talbot County Community Sports Complex	10028 Ocean Gateway	Easton	MD	21601
Thompson Park	30 W. Dover Street	Easton	MD	21601
Tilghman Island Elementary School Sports Comp	21374 Foster Avenue	Tilghman	MD	21671
Trappe Veteran's Memorial Park	Main Street	Trappe	MD	21673
Waylands Park	29607 Penny Lane	Easton	MD	21601
Wittman Community Park	8800 Howeth Road	Wittman	MD	21676

POOLS	STREET ADDRESS	CITY	STATE	ZIP CODE	ADDITIONAL INFO
George Murphy Community Pool	501 Port Street	Easton	MD	21601	Open Memorial Day to Labor Day Weekend
Bay Hundred Community Pool	911 S. Talbot St	St. Michaels	MD	21601	Open Memorial Day to Labor Day Weekend

WATER ACCESS SITES

Bar Neck Landing
Bayshore Road

Bellevue Landing
Black Walnut Cove
Claiborne Jetty
Claiborne Landing
Covey's Landing
Cummings Creek Landing
Dogwood Harbor
Easton Point Landing
Grace Creek Landing
Kingston Landing
Leeds Creek

Lowes Wharf
Miles River Bridge
Neavitt Landing
New Bridge Landing
Oak Creek Landing
Reese's Landing
Sherwood Pier
Skipton Creek
Tilghman Creek
Tongers Basin
Trappe Landing
Villa Road Landing
Windy Hill Landing
Wye Landing

LOCATION

Tilghman - Black Walnut Cove
Wittman - Chesapeake Bay

Bellevue - Tred Avon River
Fairbanks - Tilghman Island
Claiborne - Eastern Bay
Claiborne - Eastern Bay
Cordova - Tuckahoe Creek

Wittman
Tilghman - Harris Creek
Easton - Tred Avon River
Bozman
Kingston - Choptank River
Tunis Mills
Sherwood - Ferry Cove / Chesapeake Bay
Unionville Road - Miles River
Neavitt - Broad Creek
Rt. 328 - Tuckahoe Creek
Newcomb - Miles River
Cordova - Tuckahoe Creek
Sherwood - Harris Creek
Skipton
Claiborne - Miles River
Tilghman Island
Trappe Creek
Glebe Creek
Bruceville - Choptank River
Wye Mills - Wye East River

AMENITIES

No parking, bulkhead, fishing, crabbing
Limited parking, fishing, crabbing
Boat ramp, 25 contracted boat slips, pier, ferry dock, fishing, crabbing, 3 picnic table, grill, bulkhead
Pier, fishing, crabbing, bulkhead
Undeveloped fishing, crabbing, no parking
Boat ramp, 10 contracted boat slips, bulkhead, fishing, crabbing pier
Boat ramp, fishing, crabbing

Boat ramp, 6 contracted boat slips, fishing crabbing
Boat ramp, 29 contracted boat slips, pier
Boat ramp, pier, fishing, crabbing, bulkhead, permit sales
Bulkhead, no parking
Boat ramp, fishing, crabbing
Boat ramp, no parking

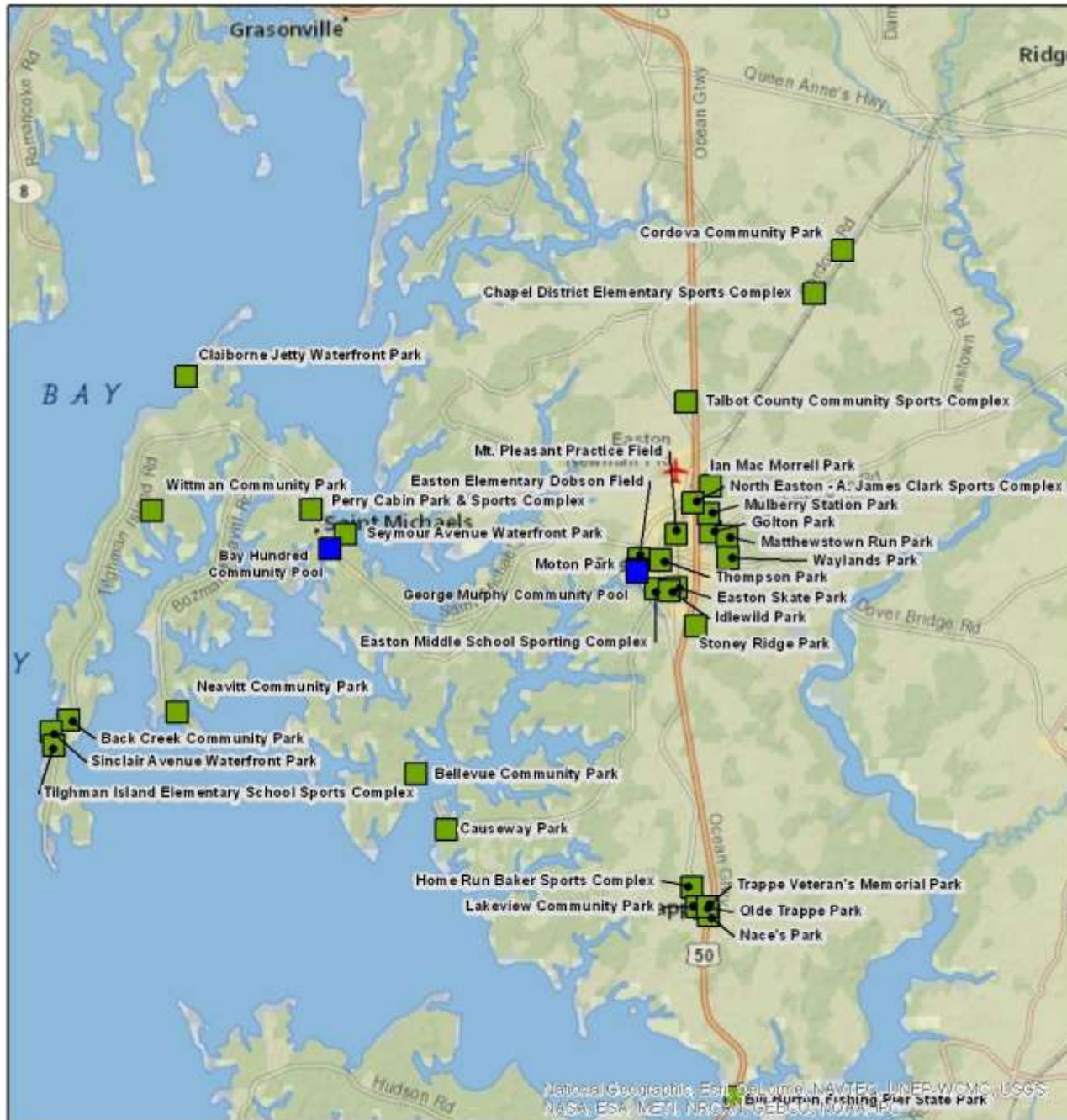
Bulkhead, fishing, crabbing
Boat ramp, fishing, crabbing, limited parking
Boat ramp, 14 contracted boat slips, fishing, crabbing, bulkhead
Boat ramp, pier, fishing, crabbing
Boat ramp, 18 contracted boat slips, pier, fishing, crabbing
Undeveloped, fishing, crabbing
Fishing, crabbing, pier
Boat ramp, pier, fishing, crabbing, limited parking
Pier, fishing, crabbing
Bulkhead, permit sales
Boat ramp, pier, 11 contracted boat slips, fishing, crabbing, marine p[ump out station
Boat ramp, fishing, crabbing, limited parking
Ramp, beach, pier, fishing, crabbing
Boat ramp, 2 piers, fishing, crabbing

Talbot Family Network Needs Assessment

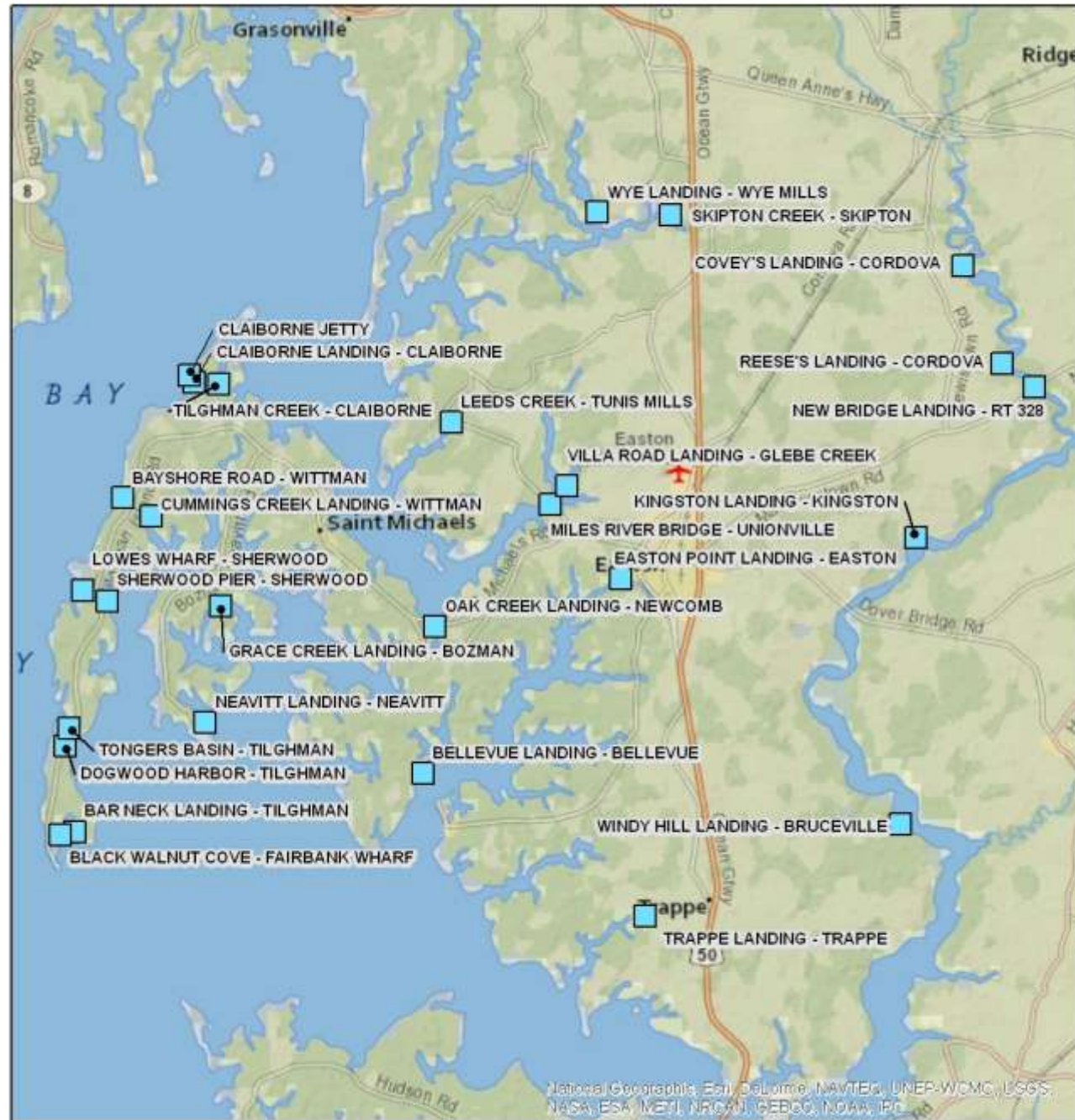
Community Resources

Recreation

- Pools
- Parks



Revised: Talbot County
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June 26, 2013



Revised: Talbot County
 Dept of Public Works GIS
 June 12, 2013

Community Resource Strengths

Talbot County has a full array of public agencies providing services to families and children. These agencies are closely linked because of the small size of the county and the staffs are very resourceful in making the best use of opportunities available. For what Talbot County lacks in the way of programmatic options, agencies make up for in maximizing creative partnerships and linkages.

Talbot County has a small but chronic population of homeless individuals that rely on cold weather shelters in the winter. The Talbot Interfaith Shelter, a coalition of churches that rotate shelter locations and duties, is conducting a feasibility study concerning the building of a year round homeless shelter for Talbot County. This would greatly bolster the one 6 bed shelter run by the Neighborhood Service Center.

There are food pantries throughout the county and this school year there is a new grassroots, community funded initiative called Carepacks that is focused on feeding elementary school children in need on the weekends. The Carepacks program is now in all of Talbot elementary schools.

This summer both free breakfast and lunch will be available from July 1 – August 8, 2013 at the Easton Elementary School.

According to a Robert Wood Johnson Foundation study, County Health Rankings – Mobilizing Action Towards Community Health, 2011, Talbot County ranks 3rd in the state for Clinic Care and with the top 7 in the state for health outcomes – how healthy the county is and health factors – health influencing factors. http://www.countyhealthrankings.org/sites/default/files/states/CHR2011_MD.pdf

Talbot County does have the services of a Mobile Crisis Team for individuals experiencing a behavioral health crisis. This team is dispatched by the Eastern Shore Operations Center which takes behavioral health resource and crisis calls and manages the availability of Mental Health Urgent Care appointments. These urgent care appointments are utilized to stabilize an individual within the community rather than in a more restrictive setting, such as a hospital.

Talbot County is rich with natural resources, open space and infrastructure. With 32 parks, 2 community pools, 1 ice rink, 1 county owned golf course and 27 water access sites Talbot County has ample recreation sites and facilities spread throughout the county.

Community Resource Gaps

Largely due to the rural nature of Talbot County, most resources – public agency, medical, etc., are located in the county seat of Easton. The area southwest of Newcomb is called the Bay Hundred region. This region is located on a peninsula that stretches into the Chesapeake Bay and includes numerous small towns and communities. The Bay Hundred region has just one doctor's office, limited childcare providers, and no addiction services.

Public transportation is limited throughout the county. For example - shuttles depart St. Michaels 3 times during the morning and return 2 times in the afternoon before 5 pm. There is no public transportation beyond St. Michaels towards Tilghman. Depending on your location in the county it can take a full day, utilizing public transportation to go to one appointment. An example of this would be if you lived in Cordova and had an appt at DSS in Easton. The earliest appointment you could make taking public transportation would be 8:50am. You would leave Cordova at 6:45am and arrive at the Easton Wal-Mart around 7:15am. The next shuttle to DSS departs at 8:15am and arrives at DSS at 8:50am. If your appointment lasts 1 hour and you leave DSS at 9:50am you would travel back to Wal-Mart and arrive at 10:15am but the next shuttle home, to Cordova, does not leave until 4:30pm.

While Talbot County has excellent health care facilities, more primary care doctors are needed. There are currently no doctors taking new patients with Medicare. And many practices are full and excepting no new patients at all. There are no pediatric specialists in Talbot County and few dentists that accept Medical Assistance patients. There is a wait time of approximately 6 weeks to see a psychiatrist.

The need for more Wellness related programs was a topic of discussion at the Needs Assessment/Strategic Planning meeting. Programs that focus on topics such as: Building strong families, Nutrition for families, Substance abuse prevention, Weight loss strategies, Healthy relationships, Positive parenting. These programs must be marketed towards busy working families and be barrier free – childcare available, food provided, transportation provided, etc. If attending a program would add an additional stressor to an already overstressed family then it will not be attended.

Community Survey, Focus Groups and Key Informant Interviews

Talbot County Needs Assessment Community Survey

New to this Needs Assessment is the use of a Community Survey to gather information directly from stakeholders in the community. This survey, which was conducted from April – June 2013, utilized both electronic and paper formats. There was both an adult and a youth survey and the adult survey was made available in Spanish.

There were 407 respondents to the adult survey which represents 1.1% of the estimated 2012 Talbot County Population. With this response rate this survey has a confidence level of 95% with a confidence interval of +/- 5%. The full survey results of the adult survey follow.

This is a brief summary of the top rated concerns in the three themes: Family and Community, Health, and Education. Full survey results follow. Survey results, focus group and key informant comments have been incorporated into the appropriate results and indicators throughout this document.

Survey participants were asked to rate a variety of items/issues from 1-Not a Problem to 5 – Biggest Problem.

Q8 – Issues within the Family and the Community

Top 3 Items Rated a 5			Top 3 Items Rated 4 or 5, combine % totals		
#	Issue	%	#	Issue	%
1	Substance Abuse by Parents	24.16%	1	Substance Abuse by Parents	57.84%
2	Bullying	19.32%	2	Bullying	53.26%
3	Poverty	17.78%	3	Poverty	49.22%

Q10 – Issues concerning Health

Top 3 Items Rated a 5			Top 3 Items Rated 4 or 5, combine % totals		
#	Issue	%	#	Issue	%
1	Obesity in Adults	40.68%	1	Obesity in Adults	73.49%
2	Mental Health	33.85%	2	Substance Abuse in Teens	67.61%
3	Substance Abuse in Teens	30.85%	3	Mental Health	64.32%

Q12 – Issues concerning Education and Employment

Top 3 Items Rated a 5			Top 3 Items Rated 4 or 5, combine % totals		
#	Issue	%	#	Issue	%
1	Unemployment	37.24%	1	Unemployment	64.84%
2	Youth employment	15.64%	2	Youth employment	44.61%
3	Quality Early Childcare	13.53%	3	HS Graduates ready for College	36.05%

Talbot County Needs Assessment Focus Groups

Three focus groups were scheduled to target parents, the Spanish speaking community and human service professional. Unfortunately no parents attended the focus group for parents so only 2 focus groups were completed.

Local Care Team Focus Group Summary

(8 members present)

Strengths

Collaboration and team problem solving was highlighted by participants as the key to many positive outcomes. Frequent collaborative partnerships to serve a shared population.

Because of limited resources partnerships are strong and there is creative problem solving.

Good medical services in Talbot.

Retirees are a good source of volunteers and generous with donations.

TCPS is very good.

Caring community. Youth have resources to develop caring relationships or surrogate families such as at the YMCA or in the schools.

Issues

Family cultures – Clients don't want outside "interference" in their families

Families are worn out by stressor – don't have any time for their kids

Lots of activities for kids but the parents have to get the kids involved. The truly stressed families do not access these activities.

Difficult to get parents to do one more thing.

Stressors facing families

Financial!! Lots of unemployment except at the entry level. Even if there is a household income it is not what it used to be. Creates food insecurity.

Grandparents raising grandchildren. 95% of grandparents raising grandchildren due to substance abuse.

Isolated single parents that are over stressed. Lack of support systems in the area.

Lack of transportation. No evening bus available. 1 appointment can take all day which deters some people from getting help they need.

All of these are barriers that keep families from being involved.

Issues facing agencies – staffing, caseloads

Addictions – shortage of staff, need more staff with advanced degrees and peer support

DJS and DSS – It's the complexity of the cases that has increased rather than the quantity of cases. Clients have multiple issues and barriers.

Key Issues

Drugs! Heroin use is increasing at a rapid rate. There is very limited inpatient detox for the uninsured and only 1 prescriber in Talbot for Suboxone.

Barriers to drug treatment – paperwork/red tape, difficult to get all the necessary documents for a person to get treatment – need ID, SS card which many people don't have.

The opiate surge is devastating families – financially, emotionally, physically.

Parents that focus on getting kids qualified for disability. Don't want kids to advance.

Chronic trauma exposure – limited experienced therapists that can treat.

TCPS is experiencing very young children with substantial mental health issues, trauma histories, drug affected, poverty. As young as pre-school.

Several cases of young psychotic breaks age 14 and 17.

Needs

Commitment to health and wellness. Focus on preventative total health. Everything is connected. Increase the number of highly trained trauma informed care and provide clinical supervision for those that have just gotten trained.

Early Head Start Spanish Speaking Focus Group

(5 Hispanic Women, aged 23-28, with total of 9 children ranging in age from 9 months to 6 years)

Strengths

Early Head Start
English classes in Easton are a lot of help.
WIC, DSS
St. Vincent de Paul for cheap clothing and shoes
Good services for children with disabilities
Events – Multicultural Fair
Schools

Issues

Kids
Education – helping them study
Scholarships in the future
Discipline – new ways

Needs

Health center in Easton, especially for pre-natal care.
Helping kids with homework

Biggest Stressors

Bills! Can't cover all the bills.
Rent is very high and it's difficult to find a place to rent. Frequent discrimination by landlords. Need to be documented to rent.
Sick children – worry about children's health issues
Multiple unrelated families or individuals living together. You don't know the others so there is a safety concern.
Overcrowding – 1 family per room in an apartment.
Work is seasonal.
Get rid of alcohol in the stores. The men drink on the weekends. Big problem in group living situations and children are seeing this.
Drug area around Locust street. Have smelled pot burning there.
Domestic violence – problems but not physical abuse. Controlling males.

Talbot County Needs Assessment Key Informant Interviews

Paula Lowry, Prevention Coordinator, Talbot County Health Department

Lack of good data because Maryland Adolescent Survey (MAS) was discontinued. Now YRBS but has small representation of Talbot youth. Talbot has some of the highest levels of substance use amongst teens on the Eastern Shore. Last MAS had 60% of 12th graders drinking within last 30 days. CDC – the more education, more \$, more binge drinking. The cocktail set. And their children do what their parents do.
Waterman culture – work hard/play hard.
Pot use is similar to alcohol use. Readily available. Maybe easier to get than alcohol.

Prescription drug access has tightened so we are seeing an increase in Heroin. Get TCAP numbers
Increase in # of overdoses but don't have data on overdoses that don't result in death
Even though we are experiencing an increase in use this is not resulting in an increase in the number of cases referred to DJS or the number of DWIs. There is a disconnect with law enforcement. Number of DUI stops have gone down from 398 in 2008 to 289 in 2011.
BRFS – Binge drinking in adults in Talbot 2011 is 19.3% and MD is 18%.

Audra Cherbonnier, Talbot Family Navigator, Rural Cares

Stressors

Schools – parents come up against frequent barriers to get the children the services they need
Lack of quality resource for mental health and trauma, complex cases
Families go from crisis to crisis – crisis oriented
Resources offered but no one attends
Finances are a big stressor
There are recreational resources but they are not available to all families because of cost
Lack mentoring for kids with needs
Transportation

Issues

Substance Abuse – Main Issue with teens
Parent acceptance of teens using substances
Need for dually certified therapist for dual diagnosed

Strengths

Volunteers, retirees

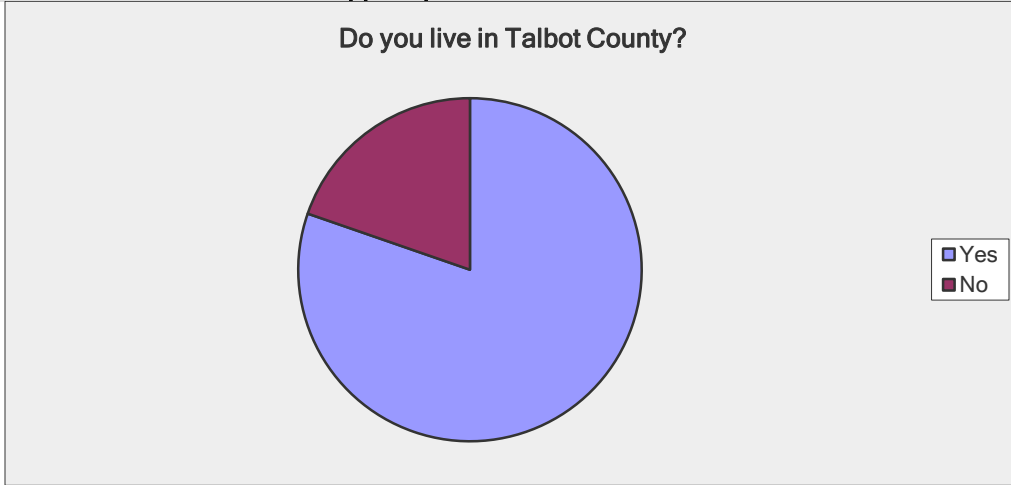
Katie Sevon, Early Head Start, Family Services Coordinator

Issues facing Spanish Speaking Families

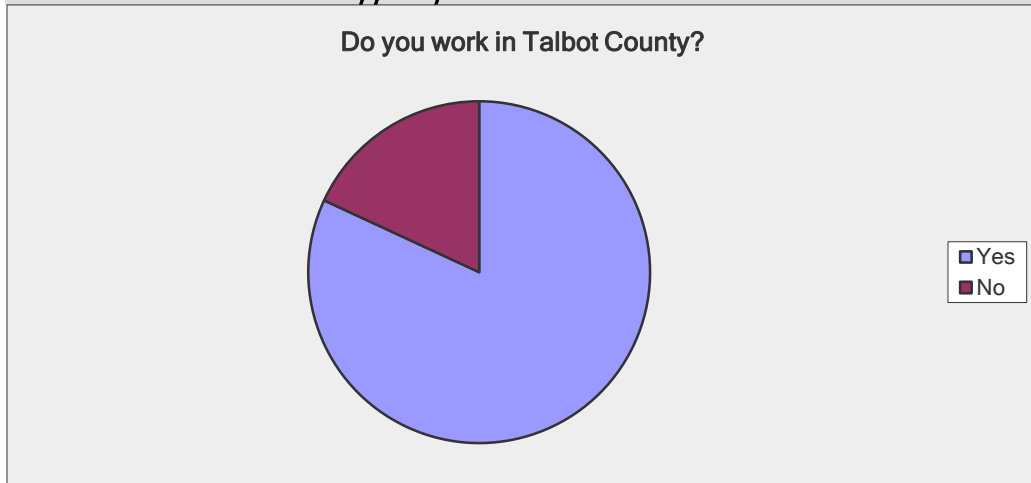
Housing – landlords discriminate against these families, many live multiple families to one apartment
Mental Health – need for bi-lingual therapist, through Mom's and Babies program at Early Head Start several women were identified and referred to mental health treatment. Lots of depression.
Ivy at For All Season has been helpful especially with domestic violence issues. Lots of domestic violence issues.
Families are experiencing friction over changing household roles. Women that are exposed to US traditions where men help out in the home and then expect their husbands to help. Men adhering to traditional ways.
No substance abuse groups for Spanish speakers.
Lack of affordable infant childcare so informal childcare used and babies sit in car seats all day.
Undocumented women do not get pre-natal care unless there is a health issue because they are paying out of pocket.

Talbot County Needs Assessment Community Survey June 2013

Do you live in Talbot County?		
Answer Options	Response Percent	Response Count
Yes	80.3%	327
No	19.7%	80
<i>answered question</i>		407
<i>skipped question</i>		0



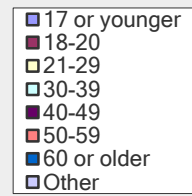
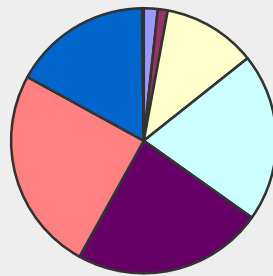
Do you work in Talbot County?		
Answer Options	Response Percent	Response Count
Yes	81.9%	330
No	18.1%	73
<i>answered question</i>		403
<i>skipped question</i>		4



Which category below includes your age?

Answer Options	Response Percent	Response Count
17 or younger	1.7%	7
18-20	1.2%	5
21-29	11.4%	46
30-39	20.5%	83
40-49	23.2%	94
50-59	24.9%	101
60 or older	16.8%	68
Other	0.2%	1
<i>answered question</i>		405
<i>skipped question</i>		2

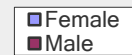
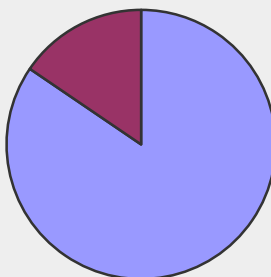
Which category below includes your age?



What is your gender?

Answer Options	Response Percent	Response Count
Female	84.5%	339
Male	15.5%	62
<i>answered question</i>		401
<i>skipped question</i>		6

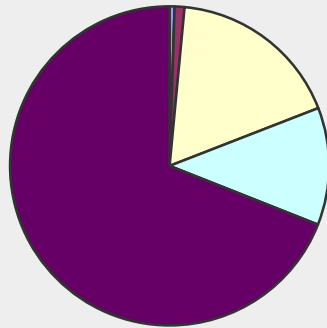
What is your gender?



Which race/ethnicity best describes you? (Please choose only one.)

Answer Options	Response Percent	Response Count
American Indian or Alaskan Native	0.5%	2
Asian / Pacific Islander	1.0%	4
Black or African American	17.6%	71
Hispanic	11.9%	48
White / Caucasian	69.0%	278
<i>answered question</i>		403
<i>skipped question</i>		4

Which race/ethnicity best describes you? (Please choose only one.)



■ American Indian or Alaskan Native
■ Asian / Pacific Islander
■ Black or African American
■ Hispanic
■ White / Caucasian

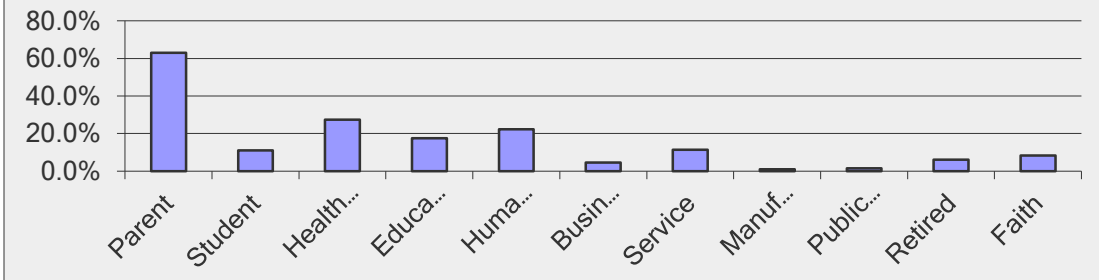
What is your zip code?

Answer Options	Response Percent	Response Count
21601	66.0%	235
21612	2.2%	8
21624	0.6%	2
21625	3.4%	12
21647	0.6%	2
21652	0.0%	0
21653	1.1%	4
21654	0.8%	3
21657	0.6%	2
21662	3.1%	11
21663	9.0%	32
21671	3.1%	11
21673	8.7%	31
21676	0.6%	2
21679	0.3%	1
<i>answered question</i>		356
<i>skipped question</i>		51

Using the list below, please select up to 2 that best describe you?

Answer Options	Response Percent	Response Count
Parent	63.0%	252
Student	11.0%	44
Health Provider	27.3%	109
Educator	17.5%	70
Human Services	22.3%	89
Business/Retail Service	4.5%	18
Manufacturing	11.3%	45
Public Safety	1.0%	4
Retired	1.5%	6
Faith	6.0%	24
Other (please specify)	8.3%	33
answered question		400
skipped question		7

Using the list below, please select up to 2 that best describe you?



Other

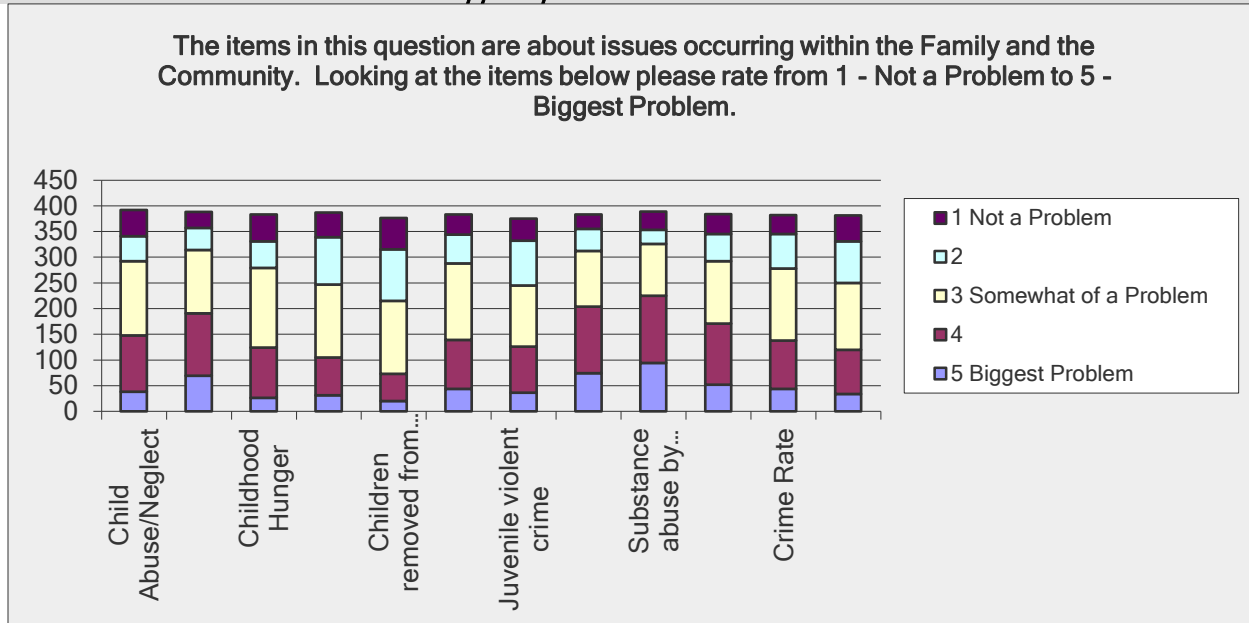
Responses:

Public

Health	3	Writer	2
Volunteer	4	Family/Spouse	5
Retired	2	Finance	1
Health	3	Farmer	1
Grandparent	1	Family Advocate	1
State/Gov.	3	Judge	1

The items in this question are about issues occurring within the Family and the Community. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2	3 Somewhat of a Problem	4	5 Biggest Problem	Response Count
Child Abuse/Neglect	51	49	144	110	38	392
Poverty	31	43	123	122	69	388
Childhood Hunger	52	52	155	98	26	383
Homelessness	48	92	142	74	31	387
Children removed from their homes	61	100	142	53	20	376
Juvenile non-violent crime	39	56	149	95	44	383
Juvenile violent crime	43	87	119	90	36	375
Bullying	28	43	108	130	74	383
Substance abuse by parents	36	27	101	131	94	389
Violence in the home	39	53	121	119	52	384
Crime Rate	37	67	140	94	44	382
Sexual Violence/Rape	50	81	130	86	34	381
<i>answered question</i>						400
<i>skipped question</i>						7



Please let us know if we missed something in the list for Families and Communities above OR if you'd like to add a comment about something above!

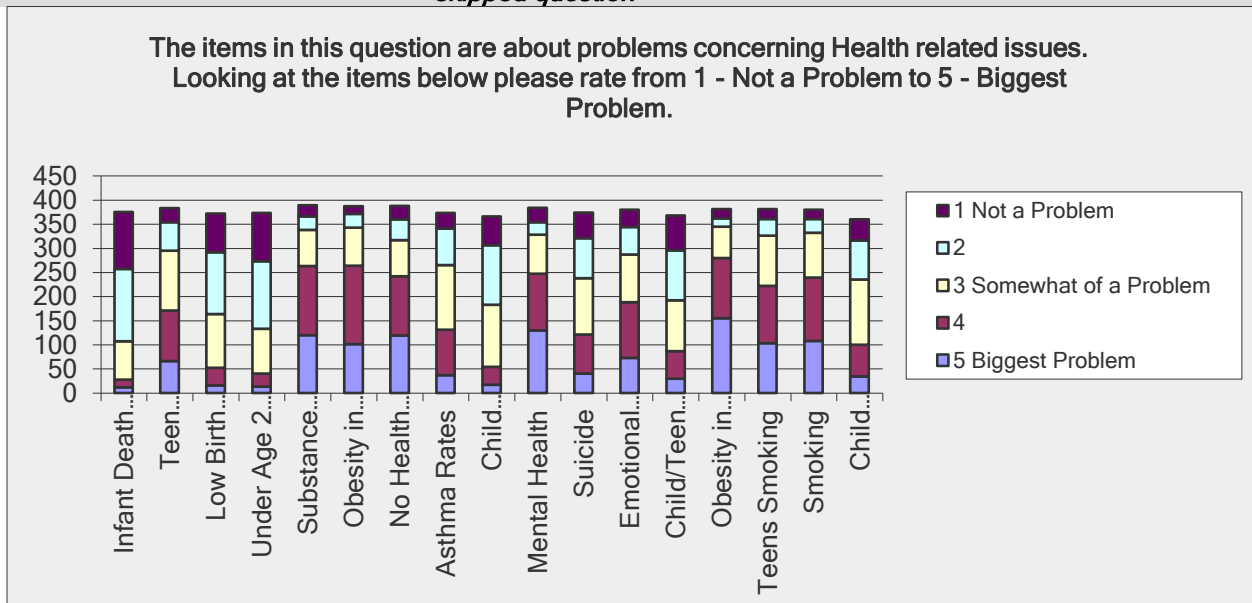
Summary of responses:

- Single Parent 3 Lack of Psych resources 2
- Substance Abuse in Family 6 More Youth jobs 2
- Sexual Violence 2 Childcare 7
- Lack of Transportation 3 Poor Parenting 5
- Need Afterschool Programs 4

1 Response: Summer activities, ignorance & prejudice, controlling husband, achievement gap, educational support, nutrition, un/under employment effecting family, poverty, substance abuse youth, nothing for AA children to do, child hunger, bullying, uninsured, affordable housing

The items in this question are about problems concerning Health related issues. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2	3 Somewhat of a Problem	4	5 Biggest Problem	Response Count
Infant Death Rate	118	150	79	16	12	375
Teen Pregnancy Rate	29	59	124	105	66	383
Low Birth Weight Babies	80	128	112	36	16	372
Under Age 2 Immunization Rate	100	140	93	27	13	373
Substance Abuse in Teens	23	28	75	143	120	389
Obesity in Children/Teens	16	28	79	163	101	387
No Health Insurance	28	43	75	123	119	388
Asthma Rates	32	76	134	94	37	373
Child Hospitalization Rates	60	123	129	37	17	366
Mental Health	30	26	81	117	130	384
Suicide	53	83	117	81	40	374
Emotional Trauma	36	57	99	115	73	380
Child/Teen Death Rate	72	104	105	57	30	368
Obesity in Adults	19	17	65	125	155	381
Teens Smoking	20	35	104	119	103	381
Smoking	19	29	93	131	108	380
Child Emergency Room Visit Rates	44	81	135	66	34	360
<i>answered question</i>						399
<i>skipped question</i>						8



Please let us know if we missed something in the list for Health above OR if you'd like to add a comment about something above!

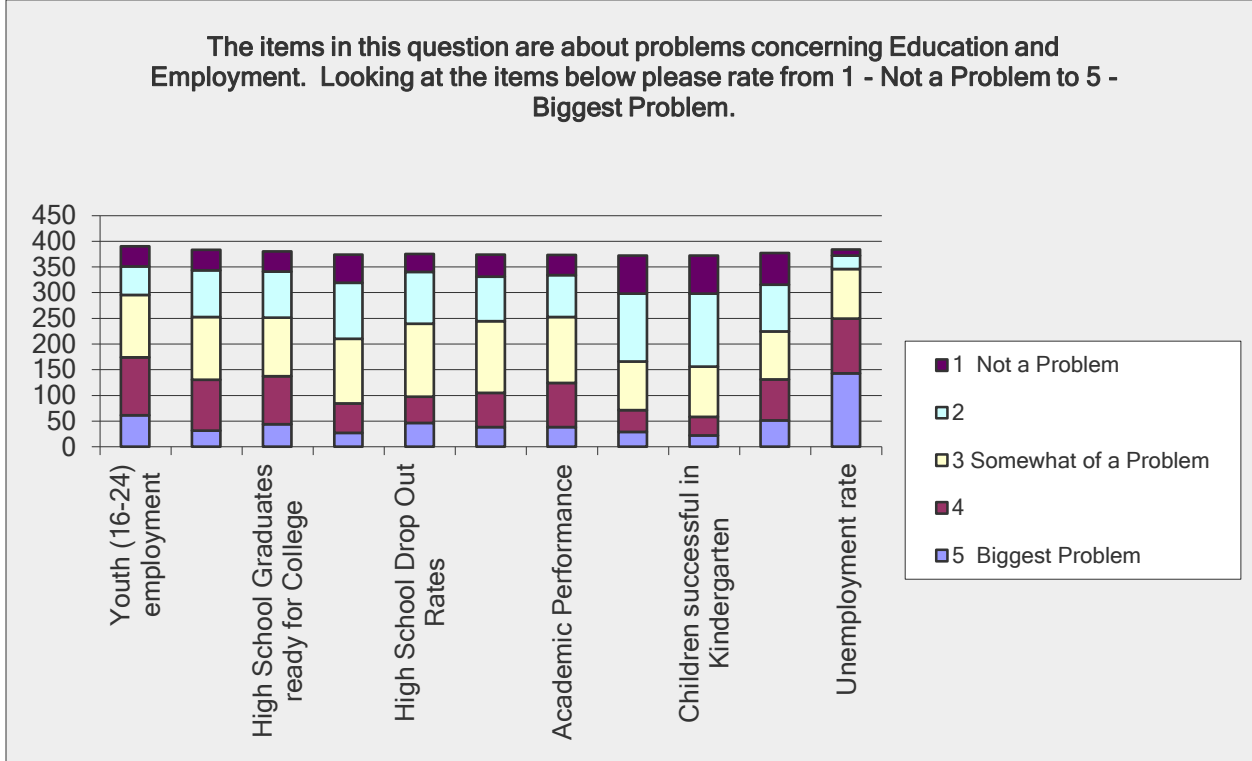
Summary of Responses:

Hospital wait time long 2 Affordable Healthcare 4
 Access to MH care 5 Access to Addiction Svs 3

1 Response: Affordable dental care, help for obesity, alcohol, overuse of ER, communicable diseases in schools, healthcare for undocumented, mental health care for Spanish speakers, substance abuse problem in Bay Hundred Area, MCHP does a good job, Limited # of providers, Limited access to specialty care

The items in this question are about problems concerning Education and Employment. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2	3 Somewhat of a Problem	4	5 Biggest Problem	Response Count
Youth (16-24) employment	39	56	121	113	61	390
Rate of High School Graduates achieving Higher Education	40	91	122	99	31	383
High School Graduates ready for College	39	90	114	93	44	380
Students with disabilities completing school	55	109	126	57	27	374
High School Drop Out Rates	35	101	142	51	46	375
School truancy	43	87	139	67	38	374
Academic Performance	39	82	128	86	38	373
Children ready to start Kindergarten	74	132	95	42	29	372
Children successful in Kindergarten	74	142	98	36	22	372
Quality Early Childcare/Daycare Programs	62	91	93	80	51	377
Unemployment rate	12	26	97	106	143	384
<i>answered question</i>						397
<i>skipped question</i>						10



Please let us know if we missed something in the list for Education and Employment above OR if you'd like to add a comment about something above!

Summary of Responses:

Non-living wage	2	Lack of Parents taking responsibility	2
Lack of HS job training/Votech	4	Low HS Graduation Standards	5

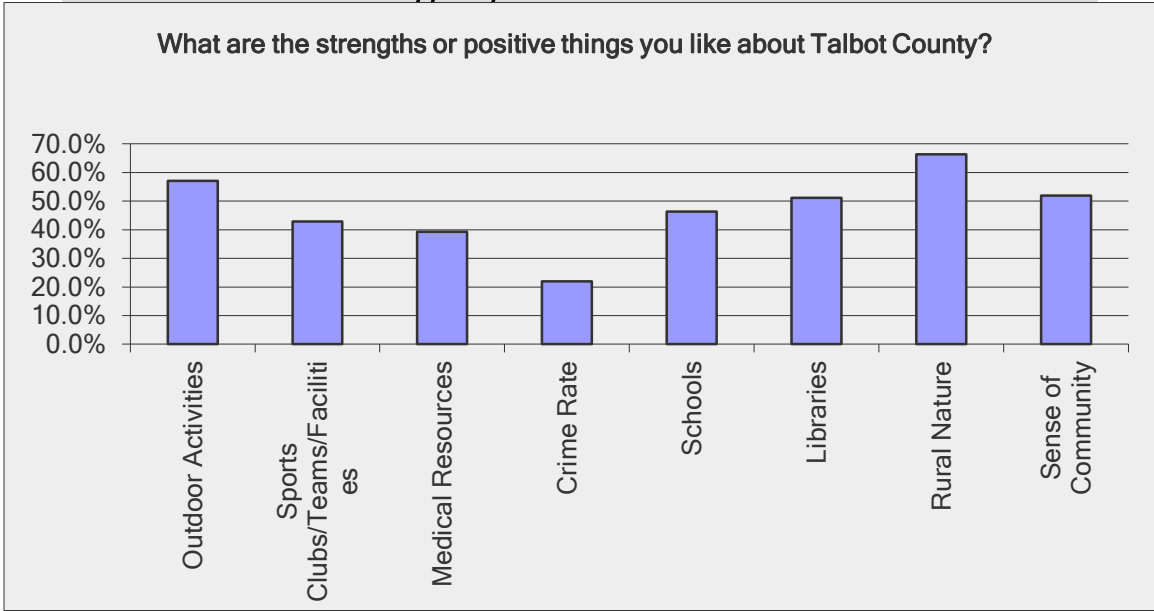
1 Response: Special needs, need teacher aides, low cost childcare, computer for each child, summer programs, children home alone, funding for Early Head Start, tutoring, enrichment activities, programs for gifted students, internet crime

Please list all of the places you know about where families with children can go to get help for any of the problems mentioned above.

DSS	80	Dr. Office	12
Schools	57	Ches. Multicultural RC	8
NSC	34	Head Start	12
MSCFV	7	Early Head Start	11
FAS	21	Ches. Helps	4
Hospital	16	Childcare Assoc.	3
TCHD	69	MH Clinics	11
Career Center	11	MSMHS	5
ESPS	11	Rural Cares/CME	4
St. Vincent de Paul	4	TFN	2
Judy Center	20	Talbot Interfaith Shelter	2
Church	23	WIC	6
YMCA	12	Infants and Toddlers	6
Police	8	Healthy Families	7
Family/Friends	4	CASA	7
Talbot Mentors	6	FQHC	8
Ches. College	4	Critchlow Adkins	4
Talbot Partnership	4	Channel Marker	4
Parks and Rec	2	DORS	3
St. Michaels Comm. Center	3	Food Bank	3
Family Support Center	15	Housing Authority	2
DJS	6	Afterschool Program	2
Library	2	Senior Center	2

1 response: Hogneck, Little League, 4-H, Court, Mental Health Assoc., St. Peter & Paul, Whitsitt, Child Find, Planned Parenthood, TASK, WIB, Salvation Army, Ches. Center, Crossroads, MHATC, Choices, TCCCF, Children's Choice, Project Right Steps, Oral Health program, Academy of the Arts, Ches College Childcare Resource Center

What are the strengths or positive things you like about Talbot County?		
Answer Options	Response Percent	Response Count
Outdoor Activities	57.1%	221
Sports Clubs/Teams/Facilities	42.9%	166
Medical Resources	39.3%	152
Crime Rate	22.0%	85
Schools	46.3%	179
Libraries	51.2%	198
Rural Nature	66.4%	257
Sense of Community	51.9%	201
Other (please specify)		37
answered question		387
skipped question		20



Other:

Summary of Responses:

Sense of Community	2	Church	3
Need more affordable activities	3	Focus on rich, not kids	2
Haves/Have Nots	2	Y too expensive for single parents	3
Security	2	More activities for Middle and HS age	2
Free Cultural Activities	5	Arts	2
YMCA	2	Volunteers	2

1 Response: Schools, agency collaboration, historical preservation, small businesses, Tilghman is underserved, lack of minority inclusion, poverty limits youth participation in activities, ice rink open all year, need math club afterschool, wonderful animal shelter, lessening sense of community, wealth, need transportation, technology available, community college with Higher Ed Center, lack of minority programs, keep city culture out

Youth Talbot County Needs Assessment Community Survey June 2013

What county do you live in?		
Answer Options	Response Percent	Response Count
Talbot	100.0%	17
<i>answered question</i>		17
<i>skipped question</i>		0

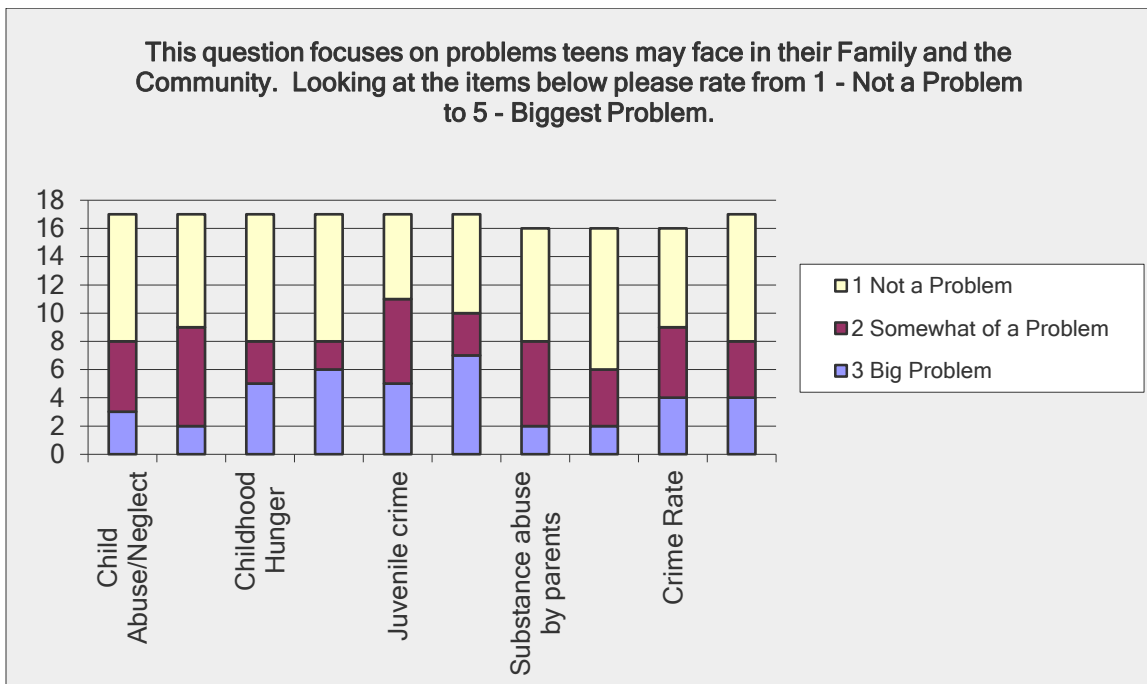
Which category below includes your age?		
Answer Options	Response Percent	Response Count
14 or younger	11.8%	2
15-16	64.7%	11
17 or older	23.5%	4
Other	0.0%	0
<i>answered question</i>		17
<i>skipped question</i>		0

What is your gender?		
Answer Options	Response Percent	Response Count
Female	52.9%	9
Male	47.1%	8
<i>answered question</i>		17
<i>skipped question</i>		0

Which race/ethnicity best describes you? (Please choose only one.)		
Answer Options	Response Percent	Response Count
American Indian or Alaskan Native	0.0%	0
Asian / Pacific Islander	0.0%	0
Black or African American	68.8%	11
Hispanic	12.5%	2
White / Caucasian	18.8%	3
<i>answered question</i>		16
<i>skipped question</i>		1

This question focuses on problems teens may face in their Family and the Community. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Response Count
Child Abuse/Neglect	9	5	3	17
Poverty	8	7	2	17
Childhood Hunger	9	3	5	17
Homelessness	9	2	6	17
Juvenile crime	6	6	5	17
Bullying	7	3	7	17
Substance abuse by parents	8	6	2	16
Violence in the home	10	4	2	16
Crime Rate	7	5	4	16
Sexual Violence/Rape	9	4	4	17
<i>answered question</i>				17
<i>skipped question</i>				0



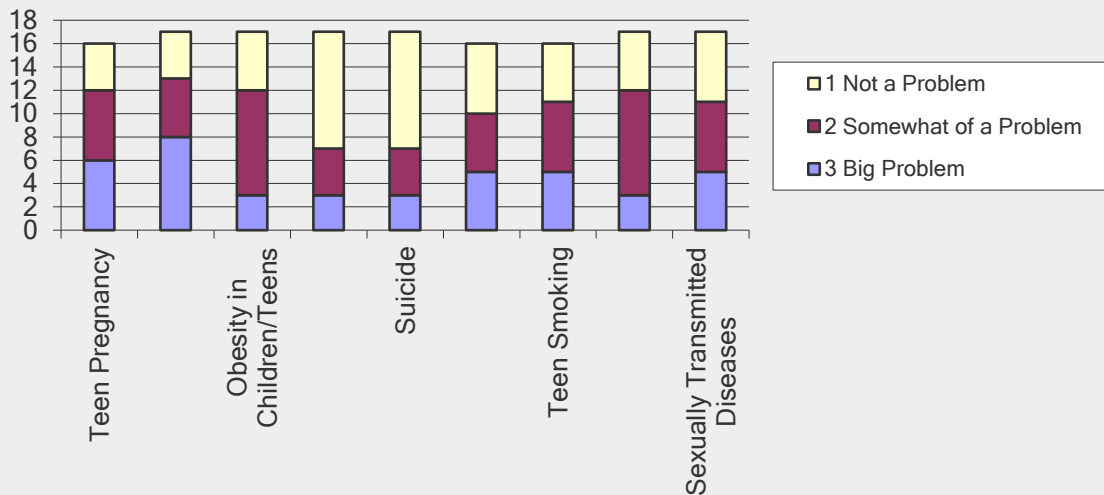
Did we miss anything in the list above? Tell us what other problems are out there for teens in their family and community!
No responses.

This question looks at Health related problems teens many face. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Response Count
Teen Pregnancy	4	6	6	16
Substance/Alcohol Use in Teens	4	5	8	17
Obesity in Children/Teens	5	9	3	17
Mental Health	10	4	3	17
Suicide	10	4	3	17
Emotional Trauma	6	5	5	16
Teen Smoking	5	6	5	16
Birth Control	5	9	3	17
Sexually Transmitted Diseases	6	6	5	17

answered question 17
skipped question 0

This question looks at Health related problems teens many face. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

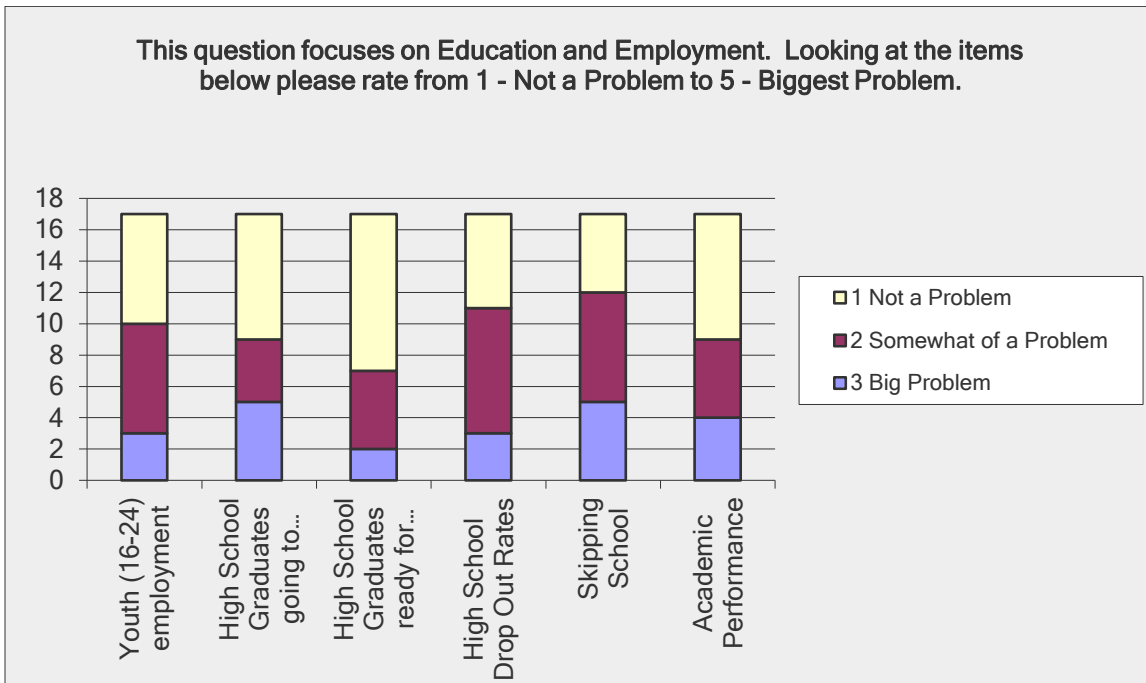


Did we miss anything in the list above? Tell us what other health issues concern teens!

No Response

This question focuses on Education and Employment. Looking at the items below please rate from 1 - Not a Problem to 5 - Biggest Problem.

Answer Options	1 Not a Problem	2 Somewhat of a Problem	3 Big Problem	Response Count
Youth (16-24) employment	7	7	3	17
High School Graduates going to College	8	4	5	17
High School Graduates ready for College	10	5	2	17
High School Drop Out Rates	6	8	3	17
Skipping School	5	7	5	17
Academic Performance	8	5	4	17
<i>answered question</i>				17
<i>skipped question</i>				0



Did we miss anything in the list above? Tell us what other concerns you have in the area of Education and Employment!
 No Responses.

Please list all of the places you know about where teens can go to get help, guidance or support.
 School x 2 responses.
 Social Services.

What are the strengths or positive things you like about your County?

Answer Options	Response Percent	Response Count
Outdoor Activities	57.1%	8
Sports Clubs/Teams/Facilities	92.9%	13
Medical Resources	50.0%	7
Crime Rate	14.3%	2
Schools	71.4%	10
Libraries	42.9%	6
Rural Nature	28.6%	4
Sense of Community	21.4%	3
Other (please specify)		0
<i>answered question</i>		14
<i>skipped question</i>		3

