



The Preventive Health and Health Services (PHHS) Block Grant Special Advisory Committee
Meeting Minutes

March 13, 2024

Oklahoma State Department of Health
123 Robert S. Kerr, Room 1, 28th Floor
Oklahoma City, OK 73102

All PHHSBG Advisory Committee meetings/hearings are open to the public. These meeting dates are published on the Oklahoma Secretary of State’s website (<https://www.sos.ok.gov/>) no later than December 15th of the preceding year in which such meetings convene in order to ensure that the public is notified and allowed to attend. In addition, all meeting notices are posted at least 48 hours in advance of the public meeting/hearing at the Oklahoma State Department of Health’s central office on a bulletin board that is conspicuously visible to the public.

Call to Order, Welcome, and Introductions

- Meeting called to order at 2:06 pm by Tracey Douglas, Chair (OSDH).

Roll Call

- Members:
 - In-person: Floritta Pope (OSDH), Dr. Tracy Wendling (OSDH), Tracey Douglas, Chair (OSDH)
 - Absent: Raffaella Espinoza (OSDH), Theodore Noel (Guiding Right Inc), Maggie Jackson (CHD), Halley Reeves (HSC), and Dr. David Gahn (Cherokee Organization)
- Guests:
 - In-person: Solina Searcy-Martin (OSDH), Jane Ann Dixon (OSDH), and Alyeshia Davis (OSDH)

Review and Approval of Minutes from December 2023, Regular Meeting. Handout provided but no quorum therefore unable to approve minutes as required.

No discussion or questions or voting required - December 2023 minutes.

- Motion for approval of Minutes:
 - December 2023 – no review as there was no quorum.
- Second for approval –
 - Name-
 - Any discussion –
 - All in Favor Aye: 0
 - All opposed Nay: 0
 - Abstain: 0

FY 2023 Program Success Stories:

Ms. Solina began the presentation with the FY23 APR success stories for Health Literacy for English as a Second Language (ESL), Office of Minority Health and Health Equity (OMHHE), Creating Healthy School Environments, Go-NAPSACC, CATCH, and Fluoride Outreach Project programs. See detailed stories below:

Success stories:

Health Literacy for ESL had two Marshallese attendees that has not completed their full ESL course, but felt more confident with going to the doctor on a regular basis instead of waiting until their too sick and need to visit the Emergency Room.

Office of Minority Health and Health Equity (OMHHE) had networked with CHW's in all districts of Oklahoma and have partnered with different communities like the National Food Bank with being able to provide them translations for the future.

Creating Healthy School Environments networking efforts with Nurses and the Nurse Cadre has created a structured statewide monthly professional development and networking opportunity. The virtual meetings have created comradery across the state, allowing opportunities to meet other nurses serving in schools settings to build relationships. Discussions to identifying best practices that are shared with other schools, which results in the nurses feeling supported and connected in a way that was not available before.

Go NAPSACC's free online tool to assist Oklahoma childcare providers with coordinating evidence based best practices to improve their menus, add more play into their daily schedules, educate staff and families about healthy eating & active play by following best practices.

NE Oklahoma CATCH School Health Initiative has provided 13 rural and low-income schools in District 4 with new physical education equipment. Physical Educators are currently working on implementation & CATCH Trainers were able to provide training to an additional 6 OSDH Health Educators across the state.

Fluoride Outreach Project and their collaborating partners has increased access to preventive oral health measures for Oklahoma's children at risk.

FY 2023 Program and Budget Summary Spend-down update

Ms. Solina continued her presentation on the FY 2023 PHHS BG budget spend down, successes, and challenges. Ms. Floritta and Dr. Tracy expressed their concerns regarding the high IDC rate. The PHHS BG and OSDH budget team are aware of the issue, and OSDH is in the process of correcting the IDC rate.

OSDH BSR				Budget Date From - 7/1/2023 Through - 6/30/2024 Budget as of: 2/23/24	
Prevent Block					
Grant			24		AP4
Type of Funds			SFY		
40000 - Funding					
TITLE OF EXPENDITUR	CURRENT BUDGET	EXPENDITURES	ENCUMBRAN	FORECASTED EXPENDITURES	SURPLUS/ (DEFICIT)
PAYROLL COSTs	\$ 667,204.45	\$ 333,141.24	\$ -	\$ 212,430.75	\$ 121,632.46
Travel	\$ 20,403.00	\$ 2,940.96	\$ 11.90	\$ -	\$ 17,450.14
Supplies	\$ 411,495.43	\$ 10,642.07	\$ -	\$ -	\$ 400,853.36
Other	\$ 74,330.00	\$ 84,283.44	\$ 7,500.00	\$ -	\$ (17,453.44)
Contracts	\$ 148,679.81	\$ 26,953.72	\$ 61,962.56	\$ -	\$ 59,763.53
Equipment	\$ -	\$ -	\$ -	\$ -	\$ -
IDC	\$ 118,992.58	\$ 322,344.67	\$ -	\$ -	\$ (203,352.09)
Totals:	\$ 1,441,105.27	\$ 780,306.10	\$ 69,474.46	\$ 212,430.75	\$ 378,893.96

No other questions or suggestions were brought up by Advisory Committee members or quests.

FY2023 Budget Revision

There were potentially two programs that canceled workplan activities and required to return the actual sum of \$21,000 in funds to be reallocated to existing programs. After consultation with the program recipient and CDC, budget revisions are not required, PHHS BG will allow the programs to provide new workplan activities. Both programs, Sexual Assault, and Partner Inflicted Brain Injury (PIBI) will provide new work plan activities which will be inclusive as part of the ACEs question for the Behavioral Risk Factors Surveillance System (BRFSS) survey.

FY2024- SFY2025 Proposal Requests and Evaluations:

Ms. Solina addressed the Feb22, 2024 meeting that discussed the FY2024 PHHSBG Proposal request document. Each committee member was sent the entire proposal request document via email approximately three weeks prior to the meeting. A total of twenty-three (23) programs submitted proposals request (applications) for PHHS BG funding.

During today’s presentation meeting, each proposal request addressed program’s goals, requested budget, HP2023 Objective and SMART Objective were discussed, and the AC members were informed that for project period FY2024 workplans will be changed to meet the CDC requirement for Federal Fiscal Year (FFY) which will occur in October 2024, and not the SFY2025 (July 2024 – June 2025).

The proposal request/applicants that requested PHHS BG funds for FY24 are identified per Table 1 with the following information:

- Program Name
- Program Budget request totals.
- Program Goal
- Healthy People 2030 (HP2030)
- Recipient Health SMART Objective

Ms. Floritta also had concerns regarding a special meeting requirement as there was no quorum to vote on the proposals. Ms. Solina discussed and confirmed that a back-up plan had been established. The AC recommendations for programs funding will be addressed with the commissioner and/or Executive Leadership Team (ELT) for final funding approval. ELT may be required to review, and final funding approval will move forward to the commissioner if there is no quorum.

The following information was confirmed:

- FY2024 PHHS BG to begin on the federal fiscal year (FFY) timeline October thru September 2024
- No Special meeting requirement

TABLE 1. Proposal Request

NUMBER	Program name/title:	Program Budget Request	Program Goal	Healthy People 2030 Objective	Recipient Health SMART Objective
1	Advancing Health Equity and Strengthening Minority Health	250,000.00	Increase the percentage of limited English proficient (LEP) adults who consistently state that their doctors or other health providers always explain medical information in a way that is easy to understand.	Increase the proportion of adults with limited English proficiency who say their providers explain things clearly - HC/HIT-D11	From 07/2024-06/2025, increase health literacy among adult LEP individuals in Oklahoma by providing accessible and culturally appropriate health information.
2	Oklahoma Colorectal Cancer Prevention and Control Program/Comprehensive Cancer Control Program	\$300,000	Provide FIT testing kits to community members with greatest need or limited access to care to promote colorectal screening.	Increase the proportion of adults who get screened for colorectal cancer – C-07	Between 07/2024 and 06/2029 the Oklahoma Comprehensive Cancer Control Program will increase colorectal cancer screening among adults (ages 45-49 years) by 8 percent (based on the most recent guidelines).
3	Healthy Aging and Injury Prevention	\$198,928.54	Engage state and community partners across sectors to implement strategies to reduce the number of falls leading to injury death, promote healthy aging, and improve health outcomes among persons 65 years and older statewide.	Reduce fall-related deaths among older adults – IVP-08	From 07/2024 to 06/2029, stabilize the rate (131.2 per 100,000 in 2021) of unintentional fall-related deaths among adults 65 years and older.
4	Northeastern Oklahoma Healthy Readers Initiative	\$167,504	The Goal of the Northeastern Oklahoma Healthy Readers Initiative, is to increase the amount of rural and low-income adolescents aged 12 and under, in District 4, who have at least one book in the home, as well as, to increase the number of parents and caregivers who have access to information regarding the benefits of reading to your children.	Increase the health literacy of the population — HC/HIT-R01 Increase the proportion of children whose family read to them at least 4 days per week — EMC-02	From 08/2024 to 06/2025, increase the percentage of rural and low-income adolescents in District 4 who have at least one book in the home.
5	Improving Health Education and Client Experience with Digital Signage	\$135,595	Alleviate the time and financial burden of the current CHD lobby print material display strategy and follow best practices of information sharing to clients by implementing a digital TV monitor display system in every county health department by January 2025.	Health Communications -> Increase the health literacy of the population — HC/HIT-R01	By July, 2025, all OSDH County Health Department locations will be equipped with a new digital display monitor in their lobbies and agency-wide communications staff will be trained on how to ensure these monitors have continually updated, relevant information for clients. These monitors will include rotating content such as CHD service information, health department awareness videos, local event and resource information, enrollment QR codes, and more. Content can be curated at the local and statewide level to ensure relevancy

					and timeliness. By January, 2027, these monitors will be a primary means of communication to clients when visiting the health department and they will be included into all statewide health communication plans when applicable.
6	Suicide Prevention	\$131,337	The IPS will use the project period to continue to develop infrastructure in suicide prevention, determine modalities that are best suited to the county health departments (CHD), and build capacity among the CHDs and other public interfacing OSDH programs to implement suicide prevention strategies and best serve our clients.	Reduce the suicide rate – MHMD 01	From 07/2024 to 06/2029, decrease the Oklahoma suicide rate from 25.6 per 100,000 population aged 10 and older to 23.5 per 100,000 population aged 10 and older.
7	Partner Inflicted Brain Injury- PIBI	\$52,462	Increase awareness of and accommodations and resources for partner inflicted brain injury among domestic violence service providers and allied professionals; implement surveillance of intimate partner violence in Oklahoma.	Reduce intimate partner violence – IVP D04	From 07/2023 to 06/2028, increase awareness of partner-inflicted brain injury and the use of appropriate accommodations for domestic violence service clients with this disability among domestic violence service (DVS) providers by providing training to 70% of DVS programs by 2028.
8	Sexual Assault Hotline Training, Support & Surveillance	\$89,800	The IPS will collaborate with community partners to implement hotline training and support to sexual assault hotline advocates in Oklahoma by June 30, 2025.	Reduce contact sexual violence — IVP D05	From 07/2023 to 06/2028, the IPS will increase capacity among sexual violence hotline staff and programs by training 70% of sexual violence service provider agencies with hotlines.
9	Child Passenger Safety Program- CPS	\$299,971.85	Distribute an average of 300 child safety seats monthly to participating sites statewide.	Reduce the proportion of deaths of car passengers who weren't buckled in - IVP-07	From 07/2024 to 06/2029, increase the statewide child restraint usage rate from 88% to 93%.
10	Certified Healthy Oklahoma Community and Congregation Consultation- CHO	\$49,307.34	The goal of the program is to see an increase of Certified Healthy Oklahoma Community and Congregation applications submitted between August 1- November 1, 2024.	Reduce the proportion of adults with obesity — NWS-03	From 07/2024 to 06/2029, reduce the percentage of adults with a body mass index of 30.0 or higher based on reported height and weight from the current percentage of 40% down to 37%.
11	2025 Public Health Nursing Core Competency Conference	\$225,000	OSDH Nursing service will develop a conference that will provide annual nursing education that aligns with the OSDH agency strategic plan, OSDH agency values and identified training and education needs.	Increase use of core and discipline-specific competencies to drive workforce development — PHI R03	PHI-RO3 - From 03/2025 to 03/2030, OSDH Nursing Service will provide Annual Public Health Nurse Conferences that focus on core and discipline-specific training. 70% of the public health nursing conferences will provide training that aligns with core competencies and discipline-specific needs. These needs will be identified through familiarity of national public health core competencies, available educational needs analysis and alignment with state public health disparities and agency strategic plan.

12	Chronic Disease Prevention Service – Community Health Screenings	\$134,000	To increase the number of adults receiving community health screenings for cholesterol, blood sugar, and blood pressure through county health departments by 10% while providing education and referrals to prevention or management programs to 100% of screened adults with elevated lab values.	Improve cardiovascular health in adults – HDS-01	From 7/2024 to 6/2025, increase the number of adults receiving community health screenings for cholesterol, blood sugar, and blood pressure through county health departments by 100% while providing education and referrals to prevention or management programs to 100% of screened adults with elevated lab values.
13	Work@Health Technical Assistance	\$50,100.80	The goal of this program is to increase the number of Oklahoma worksites that complete the CDC Work@Health Program.	Increase the proportion of worksites that offer an employee health promotion program — ECBP-D03	From July 1, 2024 to June 30, 2029 increase the number of Oklahoma worksites that have participated in the CDC Work@Health program from 53 to 150.
14	Go NAPSACC Statewide Implementation	\$62,257.34	The goal of the program is to see an increase of physical activity and nutrition strategies being implemented in Oklahoman Early Childcare Programs which will lead to a reduction in childhood obesity.	Early Childhood Program/Congregation consultation will be focused on 2030 objective: Reduce the proportion of children and adolescents with obesity — NWS-04	By June 30, 2029, Go NAPSACC will have increased statewide enrollment by 250.
15	Healthy School Environments Technical Assistance	\$122,576.60	The goal of this program is to provide technical assistance to schools in Oklahoma to create healthier environments for students.	Reduce the proportion of children and adolescents with obesity — NWS-04	From July 1, 2024 to June 30, 2029, reduce the number of Oklahoma Children ages 10-17 who are overweight or obese from 34.3% to 30%.
16	State Obesity Prevention Plan Stakeholders Group	71,999	Provide a collaborative space for over 300 stakeholders to work together to reduce obesity	Reduce the proportion of adults with obesity — NWS-03	By June 30, 2030, The State Obesity Plan Stakeholders Group will provide 4 quarterly meetings each year for all 5 sub-committees and the larger group (24 total meetings) and establish a new State Obesity Prevention plan in the year 2026. These meetings will include program spotlights to break down silos and increase collaboration, brainstorming to identify barriers and assets, and action planning to ensure progress to 5-year state plan is on track.
17	Increasing Nutrition Security in County Health Departments with Statewide Partners	\$161,165	Work with key partners to Increase nutrition security and access to fruits and vegetables and reduce health disparities throughout the state.	Reduce household food insecurity and hunger — NWS-01	By June 30, 2030, the two state food banks will establish 50 emergency food pantries in county health departments.
18	Leading Oklahoma to Prosperity through Health Communications Initiative	20,000	Strategic and aligned communications between programs and county health departments through a training will allow us to better address things like the importance of how we will communicate to our target audiences about	Health Communication: Increase the health literacy of the population — HC/HIT-R01	05/2024-05/2029; Streamline Statewide Messaging

			maternity care to lower the risk of maternal and infant mortality.		
19	Northeastern Oklahoma CATCH Coordinated School Health Initiative	\$77,244	The goal of the Northeastern Oklahoma CATCH Coordinated School Health Initiative, is to increase the amount of rural and low-income middle school aged students in District 4 participating in an evidence based physical activity and exercise CATCH Kids Club program.	Increase the proportion of children who do enough aerobic physical activity PA-09	From 08/01/2023 to 06/01/2024, increase the percentage of rural and low-income middle school aged students in District 4 participating in 60 minutes of physical activity and exercise through evidence-based CATCH programming.
20	D5 Pilot Birth Certificate Waiver for Homeless	\$45,000	Create and pilot a birth certificate waiver program that streamline processes and eliminate financial barriers to eligible individuals seeking a birth certificate.	Improve Overall Well-Being - OHM-01	From 10/2024 to 9/2025 a system will be created, to include a dedicated portal and billing process in Vital Records, that will allow community health workers (CHW) in D5 to better serve homeless and specific high-risk clients such as individuals fleeing a domestic and/or children aging out of foster care.
21	Fluoride Outreach Project	\$22,500	The goal of this program is to increase access to dental carries prevention programs for Oklahoma children.	Oral Conditions- Reduce the proportion of children and adolescents with lifetime tooth decay – OC01	Between 07/2024 to 06/2029, reduce the number of dental carries in vulnerable Oklahoma children by 22%, from Oklahoma average 66.7% to the national average of 51.6%.
22	State and Tribal Public Health Learning Collaborative	\$4,460.40	To develop a state-Tribal collaborative roadmap through ongoing partnership with Cherokee Nation, and through conducting additional listening sessions with at least 2 Tribes and 1 Tribal-serving entity.	Explore the impact of community health assessment and improvement planning efforts — PHI-R09	By June 30, 2025, conduct initial 'listening sessions' with at least 2 tribes and one 'tribal serving' entity to assess tribal public health priorities. 1 additional listening session will also be conducted with Cherokee Nation, as a continuation of ongoing collaboration.
23	Project Combatting Heavy Advertisement of Tobacco (CHAT) in Oklahoma	\$84,000	The goal of this program is to provide timely data on the retail landscape for both tobacco and non-tobacco nicotine products to inform Oklahoma policies and programs designed to limit access to and availability of tobacco products in the community for youth.	TU-22: Reduce the proportion of adolescents in grades 6 through 12 who are exposed to tobacco product marketing TU-04: Reduce current use of any tobacco products among adolescents TU-01: Reduce current use of any tobacco products by adults	From 07/2024 to 06/2025, assess 320 of licensed tobacco retailers in Oklahoma using surveillance tools to identify disparities and policy needs for point-of-sale advertising and retailer density relating to youth access to tobacco.
	Total	\$ 2,755,208.87			

Funding Recommendations

Ms. Solina continued the presentation to address the evaluation forms, scoring, rankings, FY24 work plan budgets, and the PHHS BG project's available funding allocation. Based on the AC evaluation scoring and budget recommendations the PHHS BG still exceeded the total funding allocation total of \$1.4 million.

Table 2. identifies the bullet information below, and the final AC budget for program recipients that will and will not receive funding.

- Evaluation scoring comments,
- Evaluation program budget recommendations,
- Average ranking, and
- AC final funding recommendations.

Ms. Tracey expressed an interest in how each program will sustain their program. The sustainability plan was read and shared with the group. See table 3 Sustainability Plan.

Table 2.

N U M B E R	Program name/title:	Evaluation Scoring Comments	Program Budget Request	Evaluation Average score	AC Budget-Evaluation forms	R A N K E D	AC Final Recommended Budget 3/13/24
1	Advancing Health Equity and Strengthening Minority Health	Yes, to those who do not speak English as their primary language and has a limited ability to speak, write, or understand English; the program has been funded for 4 years, but there is no indication of how it will be evaluated; Did not follow instructions regarding recipient SMART objective's which is long term beyond 1 year; Items to be measured and target values do not tie to anything w/in the budget.	250,000	20.3	\$250,000	11	\$250,000
2	Oklahoma Colorectal Cancer Prevention and Control Program/Comprehensive Cancer Control Program	Consider a small-scale pilot; clearly proposing to support CHDs but concerned that's more because of convenience and not the best way to reach the target population; There was a thorough and well thought out description of the emerging need as well as a statement that indicated that there was a pervasive challenge with colorectal cancer in Oklahoma. The data was cited by a reputable peer reviewed source in 2020. The proposal was standard yet well needed, that said the program was tied to smart objective but not to the budget. There is a sustainability that will be to apply to National Colorectal Cancer funding in 2025.	\$300,000	20.3	\$100,000.00	12	-

3	Healthy Aging and Injury Prevention	Measurement a little vague; The sustainability plan is contingent on buy in and support from the local community, there will not be collaboration by funding other local organizations.	\$198,928.54	20	\$150,000.00	15	\$150,000
4	Northeastern Oklahoma Healthy Readers Initiative	Reduced amount for a pilot; difficult to follow up on behavior change; The sustainability plan is a 4-year warranty on the vending machine and then there would only be a need of additional books, which could be source by a variety of partners some of which are listed in the proposal. There will collaborations with the local health department, district 4, local well baby visit providers.	\$167,504	18	\$25,000.00	20	\$ -
5	Office of Communications - CHD Digital Display System / Improving Health Education and Client Experience with Digital Signage	Only after interventions & FTEs are funded; proposal solely supports CHDs, but only impacts clients who would already be coming to the location; The program is innovative and save on paper supply, ink and labor. The sustainability plan is a subscription fee at the cost of \$8,019 annually to maintain software. Evidence-Based and Evidence-Informed- while data points were stated there was not citations or offering of validity. There will collaborations with the county health department and the Office of Communication.	\$135,595	20.3	\$135,595.00	14	\$95,000
6	Suicide Prevention	Measuring distribution of gun locks but not outcomes; The program is standard by providing gun locks as a harm reduction strategy. The sustainability plan is to work with internal and external partners to build subject matter understanding and to learn from other programs' successes.	\$131,337	21.5	\$131,337.00	9	\$131,337

7	Partner Inflicted Brain Injury- PIBI	The program is standard in form; however, the subject matter is unique and innovative. Within the space. The sustainability plan is to work for IPS to evaluate if state funding would be available to sustain programming beyond grant funds. While data points were stated not cited- Evidence-Based and Evidence-Informed.	\$52,462	22	\$52,462.00	7	\$52,462
8	Sexual Assault Hotline Training, Support & Surveillance	The sustainability plan is to work for IPS to explore additional funding opportunities programming beyond grant funds. While data points were stated and cited as PHSS Block Grant Sex Offense Set Aside. There will collaboration with the State Health Department and rape crisis center.	\$89,800	20	\$35,000.00	17	\$7,144
		Set- A-side					\$82,656
9	Child Passenger Safety Program- CPS	The program is standard in form; however, the subject matter is highly important and a legal necessity. families not having access or means to procure a car seat due to financial hardships. The sustainability plan is to work with a number of community partners and health department distribution channels. there is a very clear description of the population that is to be served, those with children who have a financial need mostly minorities races.	\$299,971.85	24.5	\$299,000.00	1	\$299,000
10	Certified Healthy Oklahoma Community and Congregation Consultation- CHO	The program is standard in form, but innovative in utilizing faith-based organizations for the program; The sustainability plan is to continue braid funding streams to cover cost of staffing. The summary of evaluation methodology is clearly well thought out and put into model.	\$49,307.34	22.7	\$49,307.00	6	\$49,307

1 1	2025 Public Health Nursing Core Competency Conference	Look for ways to reduce cost (share travel, food, etc.); not an intervention; evidence may be discussed, but there are no guarantees for changes or implementation; The program is standard for conference training. The sustainability plan is to explore options for funding future conferences. The summary of evaluation methodology is the Kirkpatrick Model of evaluation and the Anderson Model of Learning Evaluation.	\$225,000	20.7	\$50,000.00	10	\$ -
1 2	Chronic Disease Prevention Service – Community Health Screenings	The emerging public health need is to increase the number of adults that are receiving community health screenings. The sustainability plan is for the grant to provide initial screening supplies and in future years ongoing supplies would be provided by CHDs, the summary of evaluation methodology is to show program growth and number of preventative health screenings.	\$134,000	23.7	\$134,000.00	4	\$50,000
1 3	<u>Work@Health Technical Assistance</u>	The sustainability plan is to share results of the program with community partners in order to open up funding opportunities to sustain the program in the future. The summary of evaluation methodology is to have pre and post surveys and to use wearable devices to collect data; Healthy workplace policies are needed.	\$50,100.80	18.7	\$25,000.00	19	\$ -
1 4	Go NAPSACC Expansion Statewide Implementation	The program is standard. The sustainability plan is to look at partnerships to obtain cost sharing post program funding. The summary of evaluation NAPSACC platform offers an assessment for child care and will be used to evaluate and monitor child progress as well as planned self-assessments.	\$62,257.34	20.3	\$62,000.00	13	\$47,000.00

1 5	Healthy School Environments Technical Assistance	<p>The program is innovative as a method to obesity in children and adolescents. The sustainability plan is to obtain reusable stencils which would give the program the opportunity to grow year over year.</p> <p>The summary of evaluation methods will utilize feedback surveys and tracked community engagement; not emerging need. strategies and measures don't seem particularly conducive to long-term, meaningful change (observations of physical activity; conference feedback survey; log of school presentations) unclear on measuring utilization of painted play spaces</p>	\$122,576.60	17.7	\$61,000.00	21	\$39,204.00
1 6	State Obesity Prevention Plan Stakeholders Group	Doesn't clearly describe how the effectiveness of all the meetings will be assessed; obesity is part of the OSDH transformation and it has been said that transformation will be an ongoing effort; therefore, it seems as though agency resources or grants like PHIG should be used to meet any staffing or associated needs. Proposal is solely about meetings with stakeholders; stakeholder meetings, not implementation	71,999	14.7	\$36,000.00	22	\$ -
1 7	Increasing Nutrition Security in County Health Departments with Statewide Partners	Question 100 days of travel and staff time; Tracking through PRAPARE good. what about outcomes to reduce food insecurity?	\$161,165	21.7	\$80,000.00	8	\$80,000.00
1 8	Leading Oklahoma to Prosperity through Health Communications Initiative	Not clear on prioritizing health equity; The program is standard communication strategy. No, the target population is all Oklahomans, there was mention of those who may have a hard time accessing healthcare but no specific population with health disparities. The sustainability plan is not well thought out beyond	20,000	13	\$20,000.00	23	\$5,500.00

		<p>increasing the number of trainings in a less formal setting. The intervention is evidence informed but not well communicated.</p> <p>The summary of evaluation methods will collect social media data, pre and post surveys and information interviews. Would improve capacity of communications staff across state to achieve improved messaging.</p>					
1 9	<p>Northeastern Oklahoma CATCH Coordinated School Health Initiative</p>	<p>Existing, ongoing need to increase physical activity, tried to anticipate impact of staffing changes and make long-term plans, CATCH is a longstanding EBP full request - 100 days of travel?</p>	\$77,244	24	\$77,400.00	3	\$77,244.00
2 0	<p>D5 Pilot Birth Certificate Waiver for Homeless</p>	<p>The program is innovative and life stabilizing. The sustainability plan is a multi-approach suggestion none of which are guaranteed but are well thought out avenues for exploration. The intervention is evidence informed, there is data regarding housing stability according to US interagency Council on Homelessness. The summary of evaluation method will monitor by d5, PRAPARE screening tool, outcome evaluation report, measure access to birth certificate retrieval.</p>	\$45,000	23.3	\$45,000.00	5	\$45,000.00
2 1	<p>Fluoride Outreach Project</p>	<p>The sustainability plan is to introduce primary care providers to incorporate fluoride varnish into their healthcare practice. The program is innovative and well thought out. The sustainability plan is to introduce primary care providers to incorporate fluoride varnish into their healthcare practice.</p>	\$22,500	24.3	\$22,500.00	2	\$22,500.00

2 2	State and Tribal Public Health Learning Collaborative	<p>Very small request, maybe any leftover; proposal is broad and written generally, so the need is not clearly established or exactly what the resulting benefits are. The summary of evaluation method will process and outcome measures and there is a list of evaluation measures that will be combined. The intervention is evidence informed but cited. The sustainability plan is not addressed in detail.</p>	\$4,460.40	19	\$4,460.00	18	\$ -
2 3	Project Combatting Heavy Advertisement of Tobacco (CHAT) in Oklahoma	<p>Full amount of timeline/contract ok; The intervention is evidence informed. The summary of evaluation method will be mid and final year reporting and randomized sampling. The sustainability plan is to use data to inform policy decisions and educate stakeholders also to look for funding opportunities.</p>	\$84,000	20	\$84,000.00	16	\$40,000.00
Total:			\$2,755,208.87		\$1,929,061.00		\$1,440,698.00

Table 3. Sustainability Plan

N U M B E R	Program name/title:	Sustainability of Program
1	Advancing Health Equity and Strengthening Minority Health	The OMHHE will share resources with other program areas, request state funds, and search for other funding sources.
2	Oklahoma Colorectal Cancer Prevention and Control Program/Comprehensive Cancer Control Program	This funding will allow the OCCCP to initiate a colorectal cancer screening intervention employed by the use of FIT testing kits. OCCCP will utilize this funding to distribute FIT tests from December 31, 2024, to June 30, 2025. Afterward, the program will apply for National Colorectal Cancer funding to continue FIT testing, colonoscopies and further diagnostic screenings.
3	Healthy Aging and Injury Prevention	Although program sustainability will be supported through input and buy-in from community partners, increased uptake of the STEADI toolkit in practice, and increased numbers of TCMBB, MOB, Tai Chi for Arthritis and Fall Prevention, and CarFit teachers providing classes/trainings, programmatic efforts must be ongoing to provide leadership beyond the project life cycle. Continued focus on developing and maintaining relationships across multiple sectors is critical to enhancing communication and optimizing efficiency in strategic planning, tracking and monitoring progress, and identifying next steps. As the older adult population increases, it is essential to implement strategies that reduce injury-related morbidity and mortality so <u>Oklahomans can stay healthy and independent longer.</u>
4	Northeastern Oklahoma Healthy Readers Initiative	Book vending machines will come with a 4-year warranty and the only thing needed to continue the program are additional books. This grant will provide enough books for just over two years. To sustain the program, District 4 health departments could utilize the Reach Out and Read program or purchase books with other funds. With a book vending machine in each local county health department, sustainability of the program will need minimal effort.
5	Office of Communications - CHD Digital Display System / Improving Health Education and Client Experience with Digital Signage	The sustainability cost for this program will be a subscription fee of \$8,019 annually to maintain the software system used to deploy the content to all the lobby monitors. This cost has been discussed with agency leadership and RADs and will be split among the district budgets. (In the case that the subscription is not maintained, the lobby screens can still be used, and content provided by other means, to be assisted by the Office of Communications.)
6	Suicide Prevention	The IPS will work with internal and external partners to build subject matter understanding, potentially braid funding, and continue to explore other funding sources. The IPS works closely with the CDC Injury Center on a number of other cooperative agreements. The Injury Center has identified suicide prevention as one of its top three priorities. As a result, the IPS will stay informed of CDC opportunities and strategic directions, as well as have connections to other state injury programs to learn from other programs' successes.
7	Partner Inflicted Brain Injury- PIBI	If funds were not available, the IPS would evaluate the availability of state funding and IPS priorities to determine if state funds were available to continue supporting the program.
8	Sexual Assault Hotline Training, Support & Surveillance	The IPS will work with internal and external partners to build subject matter understanding and continue to explore funding opportunities for programming.
SV set-a-side		
9	Child Passenger Safety Program- CPS	Program sustainability will be supported through the number of community partner and county health department car seat distribution programs and the number of CPS technicians trained. Ongoing programmatic efforts are critical to maintaining communication, ensuring coordination of car seat distribution, optimizing efficiency in strategic planning and community implementation, tracking, and monitoring progress, and identifying next steps.
10	Certified Healthy Oklahoma Community and Congregation Consultation- CHO	The Certified Healthy Oklahoma team continues to braid funding streams to cover the cost of FTEs.
11	2025 Public Health Nursing Core Competency Conference	Nursing Service will need to explore options for funding of any future conference.
12	Chronic Disease Prevention Service – Community Health Screenings	This community health screening program will help show the value of performing these health screenings and providing referrals to community resources. Initial screening and quality control supplies will be purchased using grant funds. In future years, county health departments would only need to purchase the screening supplies to continue to provide these services.

1 3	Work@Health Technical Assistance	As outlined in this application, Community Analysis and Linkages is looking to increase and strengthen partnerships. Having a Master Trainer allows for continual train the trainer opportunities. This program will allow us to share results with trainers and encourage them to replicate implementing an intervention after training ends to ensure a change beyond knowledge occurs. This will allow local partnerships to strengthen, as trainers can identify local resources to connect employers to for employee wellness. Community Analysis and Linkages will work with YMCA of Greater OKC and University of Tulsa to discuss continuing partnering and replicating future training. CAL can also share results with other Work@Health trainers and assist in identifying local partners they can work with to replicate. Increasing partnerships will be vital to sustaining the program.
1 4	Go NAPSACC Expansion Statewide Implementation	Go NAPSACC provides a wealth of information and resources that early childcare programs can save. The early childcare program centers can also continue to access Go NAPSACC platform after their in-depth consultation. As more partners are recruited statewide to provide consultation through the Go NAPSACC program, there will be discussion on cost-sharing to sustain the program post funding.
1 5	Healthy School Environments Technical Assistance	By procuring new stencils for Painted Play-spaces, those can be reused in the future. This would be the third year of Painted Play-spaces so it allows for additional opportunity to promote the programs to more schools. The planning committee for the Annual Institute continues to grow each year. Identifying additional partners increases sustainability efforts by gaining increased buy-in and resources from others.
1 6	State Obesity Prevention Plan Stakeholders Group	The PAN team continues to seek and apply for a semi-permanent funding source. Presently, PAN staff are funded at .5% FTE on the Public Health Infrastructure Grant and .5% FTE on prevention dollars. This program serves a role in OSDH's State Health Improvement Plan. In order to continue this important work, the PAN team is continuously striving to identify sustainable funding.
1 7	Increasing Nutrition Security in County Health Departments with Statewide Partners	The two state food banks have funding to distribute food to their network of 2,000 community-based partner agencies and schools. SPINE funding has not covered food costs- it has covered staff time to train CHD staff and logistical support for the establishment of a new pantry which includes shelving and refrigerator costs (if applicable). Public health focused funding for Food Banks is an identified need by our partners. This funding will allow them to continue this community-clinical linkages project to expand to new locations.
1 8	Leading Oklahoma to Prosperity through Health Communications Initiative	After funding ends, our goal will be to host more trainings and we will follow-up with quarterly meetings with attendees, in a less formal setting.
1 9	Northeastern Oklahoma CATCH Coordinated School Health Initiative	The purpose of funding is to purchase CATCH curriculum and equipment supplies to implement whole child wellness programs across District 4. CATCH (Coordinated approach to child health) is a whole child wellness program that offers lessons in: Nutrition, Education, Physical Activity, & Physical Education, Vaping Prevention, integration with Social Emotional Learning (SEL) and mental health problems. The program is evidence based and is backed by over 120 peer-reviewed scientific articles. Utilizing Health Educators and community engagement staff, each county in District 4 will receive their own curriculum and equipment supplies to implement the program (8 total counties). These materials will be housed at the local Health Department and will be property of said location. This will ensure that future staffing changes will not interfere with program materials. Health Educators and community engagement staff will be trained as experts in disseminating the academy and are certified as CATCH Community Trainers who can conduct implementation training for PE Journeys within District 4. Obtaining the CATCH Kids club certification, in addition to the CATCH PE Journeys, will allow District 4 staff to ensure that our district has long term sustainability and train additional school personnel and health department staff as needed.
2 0	D5 Pilot Birth Certificate Waiver for Homeless	The Director of Vital Records and Deputy have been very clear that we must identify a funding stream as a waiver program cannot be absorbed by the service area, considering there isn't state allocation directed to the program. With that, there are several options for sustaining this project assuming it's deemed effective and is adopted as well as expanded statewide. Examples may include: * A commemorative birth certificate program where funds received are dedicated to the waiver project. * Counties allocate a portion of appropriations or seek private funders. * Other grant funds * Private funders
2 1	Fluoride Outreach Project	Project will be sustained by introducing a wide variety of primary care providers to the easy, inexpensive, and effective measure to combat one of the most common childhood diseases. Once the habit is established providers will incorporate fluoride varnish into their healthcare practice.
2 2	State and Tribal Public Health Learning Collaborative	Sustainability will come through a strategic and successful engagement process. Leveraging these grant funds to bring tribal partners to the table will ultimately lead to a self-sustaining "Learning Collaborative" where tribes and state partners engage, regularly and meaningfully, to meet common objectives. Furthermore, the development of a State-Tribal strategic alignment roadmap will pave the way for future activities and sustainability.
2 3	Project Combatting Heavy Advertisement of Tobacco (CHAT) in Oklahoma	After the program ends, the tobacco control team will use the data to inform policy decisions and stakeholders. The team will also continue to look for other funding sources to sustain this program.

Next Steps

Ms. Solina to provide new program work plan activities to the programs listed below. This will ensure that a budget revision is not required, and no action to be taken regarding the cancelation of activities as the program funding will remain as new activities will be implemented.

- Sexual Assault and PIBI workplan activities
- Public hearing to present the final approved program recipients.

No other questions or suggestions were brought up by Advisory Committee members or guests.

2024 Calendar Dates

Ms. Solina provided an update to the 2024 calendar dates. A calendar hold for the next meeting date has been sent to Advisory Committee members.

- **May 1, 2024 @ 2pm-** Public Hearing of FY24 Work Plans and Budget recommendations.
- **December 11, 2024 @2pm**

Closing Remarks, Questions and Adjournment

No other closing remarks or questions. Meeting adjourned by Ms. Tracey at 4:02 pm.