

Arkansas Tobacco Settlement Commission



Quarterly Program Report
April, May, & June 2010



Arkansas Tobacco Settlement Commission

Quarterly Program Report

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Tina DeLay
Executive Assistant

Christian Yarberry
Grants Coordinator

The Arkansas Tobacco Settlement Commission (ATSC) was created under the Arkansas Tobacco Settlement Proceeds Act of 2000, along with seven funded programs including the Department of Health's Tobacco Prevention and Cessation Programs, the UAMS Fay W. Boozman College of Public Health, the UAMS Delta Area Health Education Center, the UAMS Arkansas Aging Initiative, the Minority Health Initiative, the Arkansas Biosciences Institute, and the Department of Human Service's Medicaid Expansion Programs. The ATSC is charged with monitoring and evaluating the programs created through the Act. Quarterly reports from each of the programs assist the ATSC in regularly reviewing current program activities and progress, the programs' short and long-term goals, and program finances.

The following quarterly reports are submitted regularly by each of the funded programs to the ATSC.

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TOBACCO PREVENTION & CESSATION PROGRAM

PROGRAM OVERVIEW & GOALS

The Tobacco Prevention and Cessation Program (TPCP) continues to drive tobacco control forward in Arkansas in many directions at the same time. TPCP is currently subdivided into 4 sections:

- Administration and Management
- State and Community Interventions
- Health Communication Interventions (includes Cessation Interventions)
- Surveillance and Evaluation

The Minority Initiatives are funded at 15% of the allocated funds to TPCP and they fund the Minority Initiative Sub-Grant Recipient Office, the Addiction Studies program at UAPB and a health communications contract funded to address minority tobacco use.

Substantial funding from the TPCP budget is allocated to non-tobacco control related activities and as they are not under TPCP supervision, they will not be reported within this quarterly report.

Governor's Council on Fitness	\$ 50,000
Trails for Life	\$250,000
Act 1220	\$868,748
Breast Cancer Control Fund	\$500,000
Juvenile and Adult Drug Courts	\$2.0M

The TPCP follows the four goal areas of the Centers for Disease Control and Prevention:

- Preventing the initiation of tobacco use among young people
- Promoting quitting among young people and adults
- Eliminating exposure to second hand smoke
- Identifying and eliminating the disparities related to tobacco use and its effects on populations groups

In order to integrate these goals with the TPCP program, the following 5 goals have been adopted from the strategic plan (completed in Q2 of FY2010):

5-year strategic goals (2010-2014)

- Goal 1: To reduce the youth tobacco use to 17.5% by 2014
- Goal 2: To reduce adult tobacco use to 17.5% by 2014
- Goal 3: To reduce tobacco use by pregnant women to 12.5% by 2014
- Goal 4: To reduce employee exposure to secondhand smoke in workplaces to 2 % by 2014
- Goal 5: To have statewide comprehensive clean indoor air legislation by 2014

PROGRAM PROGRESS

Administration and Management

Section Chief – Brenda Russell
Budget & Personnel Coordinator – Kim Goh Walker
Accountant – Geray Pickle
Field Audit Specialist – Sheila Garrett
Fiscal support Specialist – Evelyn Northop
Administrative Specialist – Michelle Woods

TPCP received the annual Master Settlement Agreement (MSA) payment in April 2010 in the amount of \$14,986,306 which was \$2,393,694 less than estimated. TPCP develops a budget based on a projected payment that is not received until the fourth quarter of the fiscal year. The FY 10 TPCP budget, that began July 1, 2009, was based on an estimated payment of \$17,380,000. Due to the lower than expected payment TPCP was forced to curtailed some of the planned projects. This has also had an effect on the FY 11 budget since the estimated payment for TPCP in FY 11 is \$14,220,000. It is projected that the \$2M balance fund that TPCP has strived to maintain will be exhausted at the end of FY 11.

A consultant services contract was initiated with Todd Moore in April 2010 to facilitate the completion of a strategic planning process and the development of an evaluation process for the TPCP 15% Minority Initiative funds used for tobacco prevention and cessation in minority communities.

Vacant Positions include:

Data Manager – Position has been advertised, interviews conducted, and selection has been completed pending approval of ADH-Human Resources.

Section Chief/Health Communications – Vacated by Jessica Smith-Ellis in May has been advertised; interviews have been conducted; and selection has been completed pending approval of ADH- Human Resources.

Administrative Analyst – Position has been advertised and closed on June 15 with 162 applications received. Benchmarking is in process.

Health Program Specialist/Evaluation – New ARRA funded position that has been advertised and closed on June 30 with 79 applications received. Benchmarking is in process.

Health Program Specialist/Disparities – New ARRA funded position that has been advertised and closed on July 6 with 79 applications received. Benchmarking is in process.

Health Program Specialist/Mental Health – New ARRA funded position that has been advertised and closed on July 6 with 98 applications received. Benchmarking is in process.

Grants Manager/Section Chief Cessation – New ARRA funded position that has been advertised and closed on July 6 with 53 applications received. Benchmarking is in process.

Administrative Specialist II – Request to re-fill the vacant administrative specialist position was submitted to Office of Personnel Management in May.

State and Community Interventions:

Section Chief-Hilda Douglas

Grantee Technical Support-Beccy Secrest

Youth and Schools Health Program Specialist-Marisha DiCarlo

Disparity Interventions Health Program Specialist-Toney Bailey

Secondhand Smoke and Policy Health Program Specialist-Rosa Pippin

The State and Community Interventions section includes policies, practices, and types of programs that promote public health by supporting systems change and discouraging tobacco exposure and use. The category is organized to provide the skills, resources, and information needed for the coordinated strategic implementation of effective programs. Linking state and community interventions creates synergistic effects, greatly increasing the effects of each of the program's individual components. Policy discussions, youth programs, health communication interventions and cessation interventions all serve to reinforce one another. Evidence indicates that implementing policies that promote a change in social norms appear to be the most effective approach for sustained behavior change.

Best practices dictate allocating funds for establishing and sustaining internal capacity with experienced staff and developing an infrastructure with partner organizations and other programs to oversee and implement evidence-based programs.

The Tobacco Prevention and Cessation Program (TPCP) currently provides 1.3 million dollars in funding to 19 community coalitions and 1.5 million dollars in funding to 20 coordinated school health programs throughout the State of Arkansas. The coalitions and schools utilize funding to implement community-based interventions that reduce the burden of tobacco use and shape tobacco-free norms so that tobacco becomes less desirable, acceptable and assessable. Coalitions and schools use The Centers for Disease Control and Prevention *Best Practices for Comprehensive Tobacco Control Programs and Best Practices User Guide*(2007) as the foundation for building quality programs. TPCP funds 3 state-wide programs. Supported grantees report all activities to TPCP on a web-based system and are monitored on a quarterly basis. TPCP provides technical support, media guidance, skills training through in-person and webinar trainings, and act as a resource to all funded programs including the University of Arkansas at Pine Bluff Minority Initiative Sub-grant Recipient Program (MISGRO).

TPCP Updates and Progress in State and Community Programs-

- **American Recovery Reinvestment Act (ARRA) –Communities Putting Prevention to Work Update:**
 - ARRA Positions have not been filled for Component I and III but applications are being benchmarked for interviews.
 - The Centers for Disease Control and Prevention has requested adjustments to budgets to reallocate salary savings to other activities within the award agreement.
 - Activities are reported to the Governor's Office on a bi-weekly schedule and face to face progress report meetings are held monthly. The next scheduled meeting is August 5th, 2010. Jonathan Dunkley replaced Chris Massingill as the Governor's Office liaison on the ARRA projects.
 - Work continues in the process to streamline a survey tool to capture Arkansas opinion data on secondhand smoke exposure for use in policy education.
 - The City of Fayetteville hosted a city Forum on May 13th and released the newest findings from the University of Arkansas at Fayetteville's Clean

Indoor Air Economic Impact Study and results of the Register's Voter Survey. TPCP Section Chief for Health Communication worked with the University to refine data and develop impact statements for use in communication campaigns.

- TPCP conducted 1 sub-grantee technical assistance webinar. This quarter's webinar was designed to answer questions regarding the MSA payment to TPCP for FY 10 and FY11. Due to the reduced payment(s), funding was reduced for CSH grantees and Community grantees were required to address minority or disparate populations.
- TPCP held 1 sub-grantee technical assistance work shop to provide training on coding and coding guidelines as well as training on how to develop SMART objectives.
- **Arkansas Voucher-Based Incentive Program for pregnant women**
Planning for Arkansas Voucher-Based incentive program for pregnant women is complete. This is a pilot program based on the concept from the University of Vermont of incentivizing pregnant women to stop smoking during pregnancy and will be implemented in health settings serving low resourced pregnant women who smoke. Implementation training was provided at the selected sites of Jonesboro and Blytheville. Partners include Dr. Warren Bickel UAMS, Stephanie Williams (Hometown Health), Aurian Zoldessy (Patient Services), and Randy Lee (Center for Local Public Health). The pilot project will be initiated in Craighead County and Mississippi County local health units.
- **Arkansas Conference on Tobacco Control and Health**
Planning for the 2010 conference was cancelled due the decrease in the 2010-2011 budget.
- **Promising Practice Conference: Achieving Health and Social Equity in Tobacco Control**
Toney Bailey, Program Health Specialist for Disparities attended the New Orleans, Louisiana conference presented by the Break Free Alliance and the National African American Tobacco Education Network. The conference brought together all those seeking to eliminate tobacco-related disparities in priority populations.
- **APHA Conference (Arkansas)**
TPCP staff conducted a breakout session at the 2010 APHA Conference in Hot Springs. Workshop participants had the opportunity to view the Modern Marvels-Tobacco DVD. Pre and post tests were conducted.
- **Museum of Black Arkansans' Youth Camp**
Program Health Specialists Toney Bailey and Marisha DiCarlo participated as presenters and also provided information to 12 youth and 3 adults.

- **Press Conferences to increase awareness of Act 13 (2006).**

The Arkansas Department of Health, Tobacco Prevention and Cessation Program in partnership with Arkansas law enforcement agencies, and CJRW (TPCP media contractor) successfully planned and implemented three simultaneous Act 13 (2006) Media Events in the cities of Fayetteville, Jonesboro and Little Rock on May 6, 2010 at 10:00 AM. Act 13(2006) is an Arkansas law that prohibits smoking in cars when children under six years of age are present. The purpose of these events was to increase public awareness of Act 13(2006) and the health hazards for children exposure to SHS and to also increase enforcement of the Act. The air quality and dangerous pollution levels inside a car, when a person smokes one single cigarette, was demonstrated at each of these events. Dr. Neil Klepeis, Environmental Scientist from Stanford University in California conducted the demonstration during the event in Little Rock and provided training for participant teams conducting this demonstration in the other two cities. These press events generated \$16,957 in total PR value statewide media coverage.

- **Editorial for the State Troopers Magazine**

An editorial for the State Troopers Magazine was written and placed in the June 2010 edition. The editorial placement was to educate state troopers on the very dangerous concentration of particulate matter exposure when a person smokes even one cigarette inside a car. It was also emphasized that Act 13(2006) is a primary offense and enforcement will help to have healthier young children in Arkansas by preventing them from being exposed to secondhand smoke in cars.

- **Collaboration with “Health Windows Program” of the Mexican Consulate**

TPCP collaboration with the “Health Window” program that was established after the inauguration ceremony of the program. The official inauguration of the “Ventanillas de Salud” (Health Window) program was made on June 23, 2010. This program is a partnership of the Mexican Consulate, UAMS, and Blue-Cross Blue-Shield to provide health information and screenings to Mexicans living in Arkansas. This service is provided by bilingual staff from UAMS, Monday to Friday from 8:00 am to 12:30pm at the Mexican Consulate. This program is being implemented at 40 out of the 50 Mexican Consulates in the US. Next year all 50 consulates will be operating a Health Window Program. TPCP will provide tobacco prevention and cessation promotional materials to educate and facilitate access of the Latino community to the quitline.

Four Surveys Were Developed by TPCP on Secondhand Smoke in this Quarter:

- The 2010 Environmental Tobacco Smoke Survey. This telephone survey will help assess the state’s readiness for a comprehensive Clean Indoor Air law. At present, the survey includes 62 questions regarding knowledge, opinions, behaviors and support for eliminating some of the loopholes in the current Arkansas Clean Indoor Air Act (CIAA) that allow employees and patrons to be exposed to the danger of secondhand smoke. Some of the loopholes include restaurants and bars that claim to be exempt from CIAA, employers with less than three (3) employees, and hotel/motels with 25 guest rooms plus 20 percent of the guest rooms in

hotel/motels with more than 25 guest rooms. This survey will be implemented in August, 2010.

- Hotel Managers/Owners Online Survey in Little Rock. This survey will help to assess the managers/owners' opinions, beliefs and support for 100% smoke-free hotel /motel in the state. This online Survey Monkey contains 10 questions and will be conducted in July 2010.
- The Oxygen Project Policy Implementation Survey. This is an online survey of Arkansas colleges and universities, both public and private, to determine the type of tobacco or smoke-free campus policies being implemented. The survey also inquires about the effectiveness of the TPCP tool kit that was provided. Act 734 of 2009 prohibits smoking on the campuses of all state-supported institutions for higher education starting August 1, 2010. TPCP created a tool kit to assist institutions of higher education, both public and private, with implementation of the Act. The Arkansas Department of Higher Education welcomed the assistance TPCP offered.
- An informal phone call survey was conducted of all establishments that have requested and have an active exemption from the Arkansas CIAA according to the Office of Environmental Health database. The objective of the survey was to determine the proportion of employers, hotel/motels, and restaurants/bars that have given-up their exemption status to voluntarily becoming a smoke-free establishments.
- TPCP partnered with Arkansas Center for Health Improvement and DHS Medicaid in the improvement and distribution of an educational brochure on tobacco cessation with referral to the quitline in people with diabetes. This brochure was broadly mailed out on June 1 2010 to help educate people with diabetes about the particular danger of smoking.

State Program Interventions-FY2010

Arkansas Cancer Coalition

Lung Cancer Symposium held June 11, 2010

The inaugural *Current Care and Emerging Technologies: Lung Cancer in the Natural State* conference was provided in partnership by the Arkansas Cancer Coalition, Tobacco Prevention and Cessation Program, and the University of Arkansas for Medical Sciences. It was held at the University of Arkansas for Medical Sciences in the I. Dodd Wilson Building. The purpose of the conference was to provide an updated review of the multidisciplinary approach of diagnosing, staging, and treating patients with lung cancer.

Healthy Lungs

ACC contracts with University of Arkansas for Medical Sciences (UAMS) Partners in Health Science to conduct lung cancer workshops for K-12 public school personnel. Workshops were conducted in Little Rock (Central Region), Farmington (Northwest Region), Pine Bluff (Southeast Region), Fayetteville (Northwest Region) and Harrisburg (Northeast Region). Future locations for workshops include Monticello and Star City in the Southeast Region and Jonesboro, Pocahontas, and West Helena in the Northeast Region. To date 262 pre-service and in-service teachers, school nurses and other school personnel have received training. Each teacher attending the workshop received a "resource kit" of educational materials to take back to the classroom to help educate

students and parents about the dangers of smoking, and information on emphysema and lung cancer. 262 resource kits have been distributed at the workshops; some participants received multiple resource kits depending on the size of the school served. The resource kits include: illustrated syllabus, set of 8 x 10 laminated color medical photographs, CD of PowerPoint presentation, a plastic model of the human lung, a working lung/diaphragm apparatus and a "sponge lung" experimental smoking apparatus.

Arkansas's Roadmap for Chronic Disease Prevention

This was a series of Chronic Disease planning meetings that occurred across Arkansas. A variety of collaborative programs and agencies traveled to each ADH public health region to gather public input on Chronic Disease issues in the state. Information gathered from these meetings was presented at the State Chronic Disease Forum and incorporated into the development of the Arkansas 2010 Chronic Disease State Plan. The Arkansas Cancer Coalition presented information to more than 100 partners at the State Forum.

Coalition for a Tobacco Free Arkansas Little Rock's Smoke-free Parks Efforts

In May 2010, the CTFA staff met with the Little Rock Zoo Board of Governors and asked for a 100% smoke-free zoo policy event - knowing some of the governors were totally against a comprehensive policy. After the meeting, the Board recommended the adoption of a partial smoke free policy, allowing for three designated smoking areas inside of the zoo. The CTFA re-launched a letter writing campaign to the zoo board in an attempt to re-direct their thinking from designated smoking areas to the benefits of adopting a comprehensive smoke-free policy.

Several weeks later, the Zoo Board of Governors voted to adopt designated smoking areas for the zoo, and further decided not to entertain a smoke-free policy discussion for at least a year. On June 24th, the CTFA staff addressed the Little Rock Parks Commission on the lack of tobacco-free signs promoting the city's tobacco free parks policy in most of the city parks. The CTFA also discussed its concerns with the action taken by the zoo board. The LR Parks Commission discussed the issue and decided that since the zoo is located inside a city park, they will be held to the same standards as other city parks. The Parks Commissions voted in favor of sending a resolution to the City Manager, instructing the director of the zoo to adopt the same tobacco-free parks policy as other parks.

Community/Regional Trainings

The CTFA conducted two regional meetings this quarter. One was held in Southeast Arkansas on Sunday, May 23rd in collaboration with a local church. The CTFA was able to educate more than seventy people about the dangers of secondhand smoke and increase awareness of Act 13 of 2006 (the smoke-free cars law). On Sunday, June 13th, a regional meeting was held in Arkadelphia. Twelve people attended the Act 13 of 2006 training. Of those attending, many were employed with the Arkansas State Police, representing three troops, "G", "K", "A" with two serving in an administrative capacity.

Educate Businesses in Violation of Act 8 2006

The General Manager of Chili's Restaurant in Pine Bluff, Arkansas, spoke at the June 9th press conference celebrating the 5th year anniversary of the city council's vote that made Pine Bluff a smoke-free city. Five years ago, Chili's was a Chamber of Commerce prospective business---the opposition argued that Chili's would not come to Pine Bluff if

the city council passed a smoke-free workplace law. The General Manager publicly testified to the benefits of operating a smoke-free restaurant. His establishment is not only open, but it is the top producing Chili's in the state. He urged other establishments that are not smoke-free to seriously consider adopting a smoke free policy to protect workers.

Family Service Agency-The Youth Leadership Initiative-The Y.E.S. Team

The Youth Leadership Initiative recruited 212 new members in the 4th quarter

- A Special Meeting was held via Conference Call on June 27, 2010 regarding Smoke Free Zoos. Operation Smoke free Zoo: Lions, Tigers, and Smoke! Oh My!
 - From that call, a petition was designed by TCYB Morgan Smith and activities to be completed throughout FY11 was identified: Letter writing campaign, protest, silent demonstration, use of social sites, and petitions
 - Morgan Smith, Imboden, AR wrote letters to all the Zoo Governors
- In the 4th quarter, the website had 2,852 unique page views, while the number was down by 221 views, for the entire year, there were over 10,000 unique page views on the www.yesteam.org website.

The Arkansas Tobacco Control Board

- The Arkansas Tobacco Control Board performed 2098 Compliance Checks from April 1st through June 30th, 2010. 155 Violations were reported resulting in a 7% non-compliance rate. Please see the full text report available at <http://www.arkansas.gov/tcbsl/tcbsl>

Community and School Interventions -FY2010

- The Lee County Family Resource Center coordinated with the Youth Team from Mulberry/Pleasant View High School to present tobacco prevention and media literacy education to 454 students in Kindergarten through 12th grade in the Mulberry/Pleasant View School District
- On April 19, the Lincoln Board of Education passed a new comprehensive tobacco control policy. This policy included all points required by ADH TPCP. It is a wonderful step towards K-12 tobacco prevention as well as help for those students already addicted to tobacco.
- The Izard County Tobacco Prevention Coalition coordinated with Ozarka College to provide tobacco education presentations to all incoming freshmen taking the Freshmen Year Experience class (to include new teachers.) Up to 7 classes a semester with at least 20 students per class.
- Tobacco Free Marion County has a new relationship with the Marion County Home Health Aides. Program Coordinator Paige Evans made a presentation to approx 40 nursing aides providing them information on the dangers of secondhand smoke and chronic disease.
- The Boone County Tobacco Education Network (BCTEN) has met with three property owners that have multiple low-rent units/apt. complexes. Each of these facilities are most often rented by low income families. Although policy

changes have not been made as of yet, BCTEN has gained insight from the property owners and is working toward policy change in the near future. Networking with these property owners has also helped make new connections with other property owners possibly interested in making changes

- Rogers - Lowell Tobacco Free Coalition and the Washington County tobacco prevention coalitions joined together for the Tobacco Free Teen summit. 85 Benton County students and 6 teachers participated along with a large number of Washington County students. Speakers at the summit included Javier Sanchez, from Youth-2-Youth International, and Genine Perez from the Statewide Youth Initiative . Students were encouraged to take their action packs back to their communities and make a difference in the lives of their peers. Feedback from the teachers and guidance counselors was great. One guidance counselor sent the following email: *I wanted to thank you for inviting WJHS to attend the Teen Summit. It was WONDERFUL!! Several of our students attended last year and across the board they all said that this year was SO MUCH BETTER AND SO MUCH MORE FUN!! I thought you might enjoy knowing that even though you'd not done this before, you definitely hit a home run.*
- Dawson Education Service Cooperative - The first annual Fun, Family, Friday, Fitness Night is held at the Gurdon High School Track. Families are asked to walk a mile around the track together. After walking a mile, the names are entered in a drawing for bicycles, donated by the Cabe Foundation, and other prizes. Families are fed turkey dogs, baked chips, apples and graham crackers by the Gurdon Mayor. Inflatable games and other activities are played by the children. Over 300 people participate in the Fun, Family, Friday Fitness Night and 32 parents and community members volunteered. A tobacco prevention booth was visited by almost 200 students and parents. This event is held to promote physical activity, tobacco prevention and cessation, and parent involvement. It was a huge success!
- Newton County Tobacco Education Group - Mariah Davis and Lauren Hardaway spoke at the City Council Meeting in March and convinced the City to adopt a policy to have Bradley Park become Tobacco Free. In May of 2010 the sign below was purchased along with two more to let everyone know that Bradley Park was Tobacco Free.
- SHARE - Pride Youth Programs: After the El Dorado City Council voted against the El Dorado Smoke-free Park ordinance on May 20, 2010, coalition members expressed their disappointment to city council members. As a result, a city alderman contacted Deb Crawford, the tobacco program coordinator for Union County stating that he was working with Mayor Dumas to correct the situation. On June 3, the city council made the determination that the 2006 El Dorado Clean Air ordinance included all city property. As a result, the city council voted to place tobacco-free park signs in all city parks. PRIDE Youth Programs will design and purchase the signs and the city will install the signs.

- Deb Crawford, the Union County Tobacco Program Coordinator, was awarded the Jim Smith Lifetime Achievement Award on June 10, 2010 at the Mid South Summer School held at UALR largely due to the tobacco prevention efforts made in El Dorado and Union County. During the 4th quarter, coalition members were recruited to attend City Council Meetings to voice support for the El Dorado Smoke Free Parks efforts. On April 22, 2010 the youth who picked up the largest amount of tobacco trash in the “Clean-up Tobacco Trash” in parks event that took place in March was presented a Touch IPod (donated) at the El Dorado City Council meeting. The El Dorado News Times published an article and picture the next day, April 23, 2010, giving our coalition free publicity for our smokefree park efforts. In addition, El Dorado’s PRIDE youth group who has been known in the community for their work in tobacco prevention was named as the 2010 National Team of the Year on April 1, 2010 at the International PRIDE Conference in Louisville, KY. The El Dorado News Times published an article and picture about the award on April 20, 2010. On May 29, 2010 an awards luncheon was held at the El Dorado Golf and Country Club to recognize youth for their drug prevention efforts and special recognition was given to those who had gone above and beyond in their tobacco prevention efforts.
- Community Service, Russellville School District: 2 boys and 2 girls and 1 adult attended the Y.E.S. Team Conference and the mini- coordinators conference. The 4 students have been accepted to the State Y.E.S. Team Youth Board. The conference was held on June 11 and 12th at the Doubletree Hotel in Little Rock , AR.
- As a result of ACT 13(2006) trainings with Conway and Perry County law enforcement officers, Coalition members decided that a great way to bring law enforcement closer to the table would be to honor all Conway County law enforcement and their support staff for their efforts on enforcing ACT 13(2006) and other prevention efforts. Thus, the idea for a Law Enforcement Appreciation Luncheon was born. The first annual luncheon was held on Friday, April 16, at the Conway County multipurpose building. The event was a major success, with fifty-one Conway County law enforcement officers and approximately thirty-five community members in attendance. It was hosted by the Conway County ATOD Prevention Coalition and the Conway County Literacy Council. Local churches furnished all of the desserts, and as a result of this activity, the Coalition now has a pastor on board from a Baptist Church in Plumerville. These results are evidence that Coalition efforts are encompassing all of Conway County.
- CSH Coordinator, Melinda Wiles, from Ouachita River School District wrote for the Fresh Fruit and Vegetables grant for Acorn Elementary School and Ode Maddox Elementary school. Each of the two elementary schools received the grant with a total funding for the district being \$ 20,300.00. Ouachita River School District plans to use the allocation of these funds to distribute healthy afternoon snacks for the children. These “snack-times” will also be used for teaching healthy nutrition and Tobacco-free lifestyles.

- As an Eagle Scout project, Baxter County YES Team Board member Quinn Hill, 17, worked with the Baxter County Tobacco Control Committee (BCTCC) to establish at the Mountain Home elementary and middle schools (1,200 students) as well as the junior high and high schools (875 students) age-appropriate information stations, which were built by Hill and his father and installed at each school. The stations displayed free educational materials about the risks of tobacco use, especially as the gateway drug to other illegal drugs, including alcohol. The stations will continue to be stocked at each school by a student group or club, under the supervision of a school sponsor.
- Madison County Health Coalition celebrates by presenting new Tobacco-Free signs for two businesses in Madison County. Although the businesses were already smoke free they wanted something bigger and more colorful so that the public could easily see the signs and be more aware that the businesses are tobacco free.
- The River Valley Tobacco Free Coalition (RVTF) was contacted by the Western Central Center on Aging to educate their seniors to the hazards of secondhand smoke and smoking. At the 3 centers there were a total of 120 seniors who were educated on hazards of secondhand smoke and ACT 13 to help promote health for their children and grandchildren.
- On May 19, 2010, the Lavaca School District was notified that the middle school campus was selected as one of nine Arkansas school sites to serve as a 2011 Coordinated School Health (CSH) Wellness Center. The school-based health clinic is to be designated as a Level I service site. During this first year, the following services are perceived as being provided but may not be limited to primary or preventive health care and medical screenings; treatment for common illness and minor injuries, referral and follow-up for serious illness and emergencies, on-site and consultation, as well as referral and follow-up for chronic diseases and disorders and emotional and behavioral problems, on-site referral for tobacco cessation, drug and alcohol abuse, sport physicals, and immunizations.

Health Communications

The Tobacco Prevention and Cessation Program's (TPCP) statewide tobacco counter-marketing campaign is conducted through a two-fold strategy as follows: 1) Through activities conducted by the advertising firm Cranford Johnson Robinson Woods (CJR), under the brand name *Stamp Out Smoking* (SOS), and 2) Through direct efforts implemented by TPCP's Media and Health Communications department.

The following activities were implemented through the SOS campaign:

Media: During the fourth quarter, SOS placed advertisements on broadcast and cable TV, and through radio, online and outdoor channels. Due to budget reductions, media spending during the fourth quarter was significantly reduced when compared to the third quarter. The media rotation consisted of cessation messages in the whole state, while in Northwest Arkansas a Comprehensive Clean Indoor Air message was featured.

Feature placements: To enhance the SOS anti-tobacco message SOS placed several news releases and one editorial as follows:

- **Press Releases:** The following releases were placed during quarter: Act 13 of 2006, Mother's Day and World No Tobacco Day.
- **Editorials:** In June, an editorial was placed in the Arkansas State Troopers Magazine to educate state troopers on how violation of Act 13 is a primary offense. (see above)

Enforcement of Act 13 of 2006: (see above)

Comprehensive Clean Indoor Air Campaign: In the fourth quarter of fiscal year 2010, TPCP and the Northwest Arkansas Tobacco Free Coalition requested CJRW's help in providing support for the Comprehensive Clean Indoor Air campaign. The objective of the campaign was to provide materials and media support for coalitions and community activists to use in Arkansas communities about the effects of secondhand smoke on those who work in smoking environments. CJRW recruited three Arkansans to share their testimonials and be featured in the ad campaign. To communicate the message that everyone deserves a smoke-free workplace, six print ads were created, and three radio spots were produced and began airing in Fayetteville. CJRW designed the print ads to be made available for coalition use statewide. In addition, CJRW filmed interviews with the candidates, and began editing footage for creation of three TV spots. Plans to create a micro site, online banner ads, a smoke-free policy brief and toolkit began in the fourth quarter and will be presented in the first quarter of fiscal year 2011.

Drama Contest: In the fourth quarter of fiscal year 2010, "The Big Pitch" drama contest successfully ended after SOS received 45 entries from students who produced and acted in their own television commercial aimed at sharing tobacco-free and quitting tobacco messages. The winning entries were announced and awarded prizes, and the first-place entry has already been placed in fiscal year 2011's media campaign.

Coloring Contest: The fiscal year 2010 SOS Coloring Contest came to completion in May with 28,000 entries received from more than 100 different schools - the highest participation in the history of the program. The winning entries were awarded with prizes in the fourth quarter and posted on the SOS website. CJRW organized a partnership to extend the shelf life of the coloring contest at SOS' exhibit at the Museum of Discovery. Blank coloring sheets were integrated as an activity in the Imagination Station and Craft Room, and made available as a takeaway. A stand was created to hold the artwork, which includes a poster with the SOS tobacco prevention message.

Sponsorships: During the fourth quarter of fiscal year 2010, SOS sponsored the following events in order to deliver a tobacco prevention and cessation message:

- Mississippi County Coalition Annual Banquet
- American Heart Association Heart Walk
- University of Arkansas 2010 Baseball Season
- McCallie Rodeo
- One Day At A Time
- Arkansas Cancer Coalition Summit

- Baptist Health NICU Craws For A Cause Fundraiser
- March of Dimes
- Museum of Discovery Dino Dash

Electronic Media: Information was also distributed to TPCP's stakeholders through the following channels.

- **E-newsletter:** The SOS newsletter featured the Arkansas Tobacco Quitline, the Act 13 of 2006 press event, the Arkansas Tobacco-Free Kids Day and others.
- **Website:** The SOS website www.stampoutsmoking.com was active and was kept updated during the quarter. From April to June there were 1486 visits to the site.
- **Facebook:** SOS' Facebook page www.facebook.com/stampoutsmoking was also active. Since the third quarter, the page has acquired 362 fans and is continuously updated with SOS initiatives and tobacco health statistics, among other topics.

Collateral Materials: In the fourth quarter of fiscal year 2010, per ADH's request, CJRW continued to facilitate ordering new and existing SOS collateral items to replenish the supply. Items included the following:

- **Giveaways:** Pacifier clips, onesies, bibs, totes, portfolios, water bottles, bags, pens, hunting vests, ball caps, koozies, rulers, pens, pencils, activity books and calculators.
- **Coordinated School Health Display Kit:** One tabletop display for Coordinated School Health (CSH) was developed. The display encompasses their vision of ensuring that Arkansas children become health, successful students.
- **Regional Product Kits:** A powerful kit was developed that will be used to educate Arkansans about how the tobacco industry is encouraging consumption among the youth. The product kits consisted of a tabletop display, a PowerPoint presentation, actual tobacco product and marketing postcards. The seven kits will be distributed to the five Local Health Unit regions, while one will be kept at TPCP. Also, all the artwork for the kit will be provided to MISRGO.
- **New marketing materials:** An invitation card was developed to market the Arkansas Conference on Tobacco and Health. However, due to budget shortfalls, the conference was cancelled.

TPCP Media and Health Marketing Activities: In addition to providing oversight for all the above activities, TPCP's Media and Health Marketing section implemented the following activities in order to promote the tobacco prevention and cessation message:

Arkansas Mission of Mercy: The fourth annual Arkansas Mission of Mercy event (ARMom) was held in Monticello, Arkansas on May 21 and 22. More than 700 individuals including 120 dentists volunteered to provide 1254 patients with over \$705,000 in dental treatment.

In addition to providing \$35,000 in sponsorship for the event, TPCP set up a booth at the checkout counter where patients were asked whether they used tobacco and whether they were interested in quitting. TPCP was successful in signing 162 patients to the Arkansas Tobacco Quitline (ATQ). Those who signed up to quit also received a bag of gift items and important information about the effect of tobacco on their health. Over 50 of those that signed up are currently enrolled to use the Quitline.

Informational booths and presentations:

- On June 23, TPCP hosted a booth at the University of Arkansas at Conway (UCA). While institutions of higher education in Arkansas must be smokefree by August 1 of this year as mandated by the Arkansas Clean Air on Campus Act of 2009, UCA decided to be smokefree by July 1. TPCP's booth was conveniently located in the student center, and staff and students stopped by for information on the ATQ.
- TPCP also hosted a booth on June 18 during the Governor's Oral Health Summit that was held at Pulaski Tech.
- Presentations on smokeless tobacco were held on April 26 and 28 at Pulaski Tech in Little Rock and at the Local Health Unit Administrator's meeting in Prescott, Arkansas.

Feature Placements: During the quarter TPCP placed articles in various outlets as follows:

- **Friday Letters by Dr. Paul Halverson:** This quarter five TPCP-funded events and articles were featured in Friday Letters including the following: Coloring Contest, the 8th Annual Spit Tobacco Prevention Nights, Act 13 of 2006, ARMom and the Family Smoking Prevention and Tobacco Control Act of 2009.
- **Editorials:** Two articles featuring the ATQ were placed in two local publications. ConnectCare reaches all ARkids and Medicare recipients in Arkansas while Career Watch Arkansas reaches over 50,000 college students in the state.
- **News releases:** One Father's Day a press release was published and distributed to media outlets in the whole state.
- **Media Plan FY 11:** During the quarter, TPCP held a meeting to develop the media focus for the 2011 fiscal year. During this time a plan was developed for how the budget would be spent.

Arkansas Department of Health (ADH) Website: In this quarter the new ADH website was launched, and shortly after, TPCP began working with ADH's Health Communications staff on editing and updating the Tobacco Prevention and Cessation page. Several changes have already been made including corrections and edits, the addition of a link to the GEMS website, and a new section on trends in the tobacco industry. Updates and improvements will continue during the quarter.

Cessation Interventions

Arkansas Tobacco Quitline

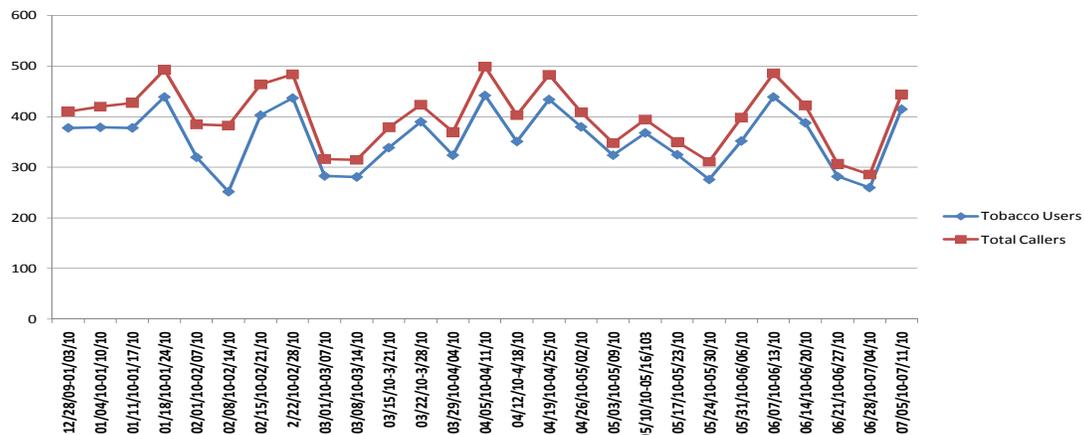
The Arkansas Tobacco Quitline (ATQ) began offering Quit Coaching to youth, 13 years and older on May 5th, 2010. Only participants 18 years and older may receive patches or lozenges. Approximately 75% of tobacco users use patches, 25% use lozenges.

TPCP continues to offer an eight week supply of patches or lozenges to uninsured tobacco users enrolled in the multiple call program, which is in alignment with CDC Best Practices for Tobacco Control Programs.

The Arkansas Tobacco Quitline reached approximately 4% of adult tobacco users, which are approximately 19,862 registered callers. Since July 1, 2009 through June 30, 2010,

approximately 18,590 Arkansans have registered for Quitline services, almost 50% of callers report some form of media as ‘their how heard about’ the ATQ.

Arkansas Tobacco Quitline Weekly Calls



UALR Survey Research Center

UALR and TPCP have worked together to amend the contract for the FY2011. In addition to the inclusion of more questions, the number of interviewees will be more than doubled. The bi-annual report is pending and should be received by August 15, 2010.

Media Cost-effectiveness Report

For the first time, TPCP analyzed media efforts and costs for what prompts tobacco users to call the Quitline. In an effort to cost-effectively increase calls, TPCP must gauge the effectiveness by media type. TPCP monitors media on a weekly basis, by evaluating the reported “How did you hear about the Quitline?” report. Below are cumulative findings from July 2009 through March 2010. The Health Communication and Cessation Interventions Section will utilize this information to choose the best media buy and media placement for FY2011.

Enrollment by Media Type	Media dollars spent per tobacco user
Enrolled Tobacco Users by Television (4,125)	\$67.14
Enrolled Tobacco Users by Outdoor (90)	\$1,270.13
Enrolled Tobacco Users by Online/Website (296)	\$176.61
Enrolled Tobacco Users by Radio (1,350)	\$147.37
Enrolled Tobacco Users by Newspaper/Magazine (237)	\$408.94

Tobacco Treatment Specialist Training and Certification

During the Q4, TPCP continued to build capacity for the number of substance abuse counselors that are trained and certified to become tobacco treatment specialists (TTS). Thirty-five people were trained – most of whom are employees and contractors of the Department of Community Correction (DCC). These participants undertook an exam on March 5, and are now working on their certification by accumulating tobacco treatment

hours. This now brings the total of trained counselors to 112. At the end of March, 1170 DCC clients have participated in Tobacco Use Treatment (TUT) groups that have been implemented by the newly-trained counselors. These include drug court and regular probation and parole clients.

Surveillance and Evaluation

The Surveillance and Evaluation section (S&E) is charged with monitoring tobacco-related attitudes, behaviors, and health outcomes at regular intervals and utilizing specific systems to collect evaluation data from our grantees.

- The Arkansas 2010 Youth Tobacco Survey (YTS). This survey was completed in June 2010. There were 69 high schools and 69 middle schools selected by CDC to participate in the survey. Of those selected 51 high schools and 56 middle schools agreed and participated in the survey. For the survey to be a valid, usable survey, at least a 60% response rate is required and is determined after the surveys are scanned by the CDC. Once scanned the data will be sent back to Arkansas for analysis. The data collected from the surveys will provide an understanding of the attitudes and habits associated with tobacco use among the youth in Arkansas. Results of the survey are expected in the first quarter of FY 2011.
- The 2010 Arkansas Health Care Provider Survey (HCPS). The HCPS was conducted between November 2009 and May 2010. A total of 4,133 surveys were mailed out to healthcare providers (primary care, pediatricians, psychiatrists, dentists) holding a medical/dental license in the State of Arkansas. These included 2,919 primary care physicians, 220 mental health physicians, and 994 dentists. A follow-up mailing was sent in late February to those who had not yet responded to the first mailing. A total of 1,217 completed surveys were returned by the cutoff day of May 18, 2010. The overall response rate was 29.4%. The results of the survey will be available in late August, 2010.
- The Tobacco Data Deck (TDD). The TDD is in the process of being updated and should be final by mid August 2010. The TDD data includes data from various chronic diseases related to tobacco use.
- Cigarette Stamps and Tobacco Tax Revenue Chart. Charts show the cigarette stamps sold and tax revenue generated from July 2008 - June 2010. They demonstrate that tax revenues are substantially increased from previous years, whereas the number of stamps sold are down (as would be expected). Similarly, tax revenue from 'other tobacco products' has increased over previous years.
- Quality Management Evaluation Tool. TPCP Quality Management Team (QMT) revised the process for evaluating quarterly reports from sub grantees to include feedback as to whether their activities related to the accomplishment of their objectives. In the past, the sub grantee's objectives were reviewed for being SMART but the activities to accomplish the objectives were not always evaluated for proper relationship. The QMT now provides better communication to the sub grantees regarding their objectives and activities. This remains a learning process,

but provides valuable feedback to all sub grantees. The majority of the sub grantees remain with 'unsatisfactory' for not providing SMART objectives.

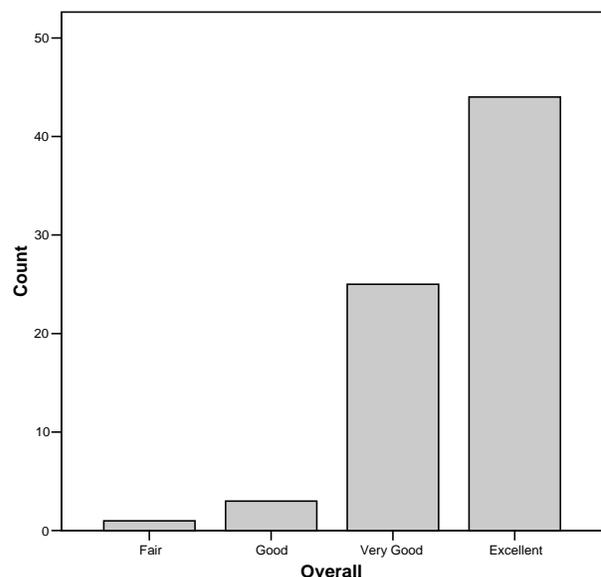
- Mosaic (GEMS). The team from Mosaic (on-line reporting program) provided training to 41 TPCP sub grantees and 18 MISRGO sub grantees in April 2010. This was a hands-on training with plenty of interaction. This training was in preparation of the implementation of the new web based reporting system in fiscal year 2011.
- 2010 Supplemental ATS. Since the CDC is conducting a National Adult Tobacco Survey (NATS), TPCP will not conduct a regular 2010 ATS. However, TPCP will conduct a special survey aimed at evaluating, among other things, the attitudes and beliefs about secondhand smoke and a comprehensive clean indoor act. A questionnaire has been developed and is being reviewed by the contractor.

15% Minority Initiatives

Minority Initiative Sub-grant Recipient Office (MISRGO)

Sub-grantees and other tobacco prevention advocates had the opportunity to attend the 7th Annual Clearing the Air in Communities of Color Conference. The Clearing the Air Conference is an annual event in which advocates for tobacco prevention and education in minority communities receive and provide information to assist in comprehensive public health efforts. Advocates use the event as an opportunity to form collaborative networks to assist in informing Arkansans about the dangers of tobacco use in minority populations. The Clearing the Air in Communities of Color Conference focuses on teaching best practices in tobacco control, displaying and demonstrating tobacco control work currently being done in minority communities, building capacity and providing content specifically designed to increase the involvement of minorities in tobacco control. This year's annual event was held at the Pine Bluff Convention Center on April 28 and 29. Speakers for the event were Elroy Brown-Executive Director of the Mississippi County Coalition for a Tobacco Free Arkansas, La Tanisha Wright National State's Director of the National African-American Tobacco Prevention Network, Dion Burns-Spoken Word Artist and Charles Stutts-Education Coordinator with the Arkansas Poison Center. The goals for this year's conference were to:

- Provide practice skills and comprehensive information for individuals involved in tobacco prevention and education in minority communities.
- Promote the exchange of innovative programs and practices among individuals who are dedicated to eliminating disparities among different population groups.
- Improve multidisciplinary interaction and collaboration among professionals in tobacco prevention and education.



Overall participants rated the 2010 Clearing the Air Conference as excellent.

Addiction Studies program

The Addictions Studies program is continuing to look for an additional faculty member for their program as they develop more courses for their program.

RAND RECOMMENDATIONS

RAND Recommendation 1: Develop new strategic goals in each program area, revisit the process indicators that track progress toward the goals, and integrate the tracking of process indicators into the Web-based reporting system.

TPCP completed its strategic planning in 2Q and has implemented the plan.

TPCP will need to understand and work with RAND what is meant by integrating the process indicators in which web-based reporting system.

RAND Recommendation 2: Strengthen the quality management process within TPCP and the communication of results to the advisory committee.

TPCP has significantly strengthened its QM process into a strong process with excellent reports provided to each grantee. Results will be communicated with the TPCP Advisory Committee.

RAND Recommendation 3: Raise funding for the nine components of a comprehensive statewide tobacco control strategy to the level recommended for Arkansas by the CDC through either additional funds over and above those provided by the MSA or reallocation of existing TPCP funds from non-tobacco programs (continuation of a recommendation in the previous evaluation report).

Although TPCP desires this recommendation, it is not within the purview of TPCP to accomplish it.

RAND Recommendation 4: Reevaluate funded programs that are not within the scope of tobacco prevention and cessation programming, as defined by the CDC guidelines, for their value in contributing to reduction of smoking and tobacco-related disease (continuation of a recommendation in the previous evaluation report).

As above, this recommendation is not within TPCP's purview.

RAND Recommendation 5: Change the process TPCP must use to budget its funds to be in line with the other tobacco settlement programs (continuation of a recommendation in the previous evaluation report).

This recommendation is not within TPCP's purview to change.

RAND Recommendation 6: Strengthen communication between TPCP staff and the TPCP advisory committee (continuation of a recommendation in the previous evaluation report).

TPCP held the first TPCP Advisory Committee retreat to review strategies obtain buy-in and agreement for the next year.

FAY W. BOOZMAN COLLEGE OF PUBLIC HEALTH

PROGRAM OVERVIEW & GOALS

The mission of the Fay W. Boozman College of Public Health (COPH) at UAMS is to improve health and promote well-being of individuals, families, and communities in Arkansas through **education, research, and service**. The COPH has elected to address this mandate through a community-based health education model.

The COPH will improve health and well-being of Arkansans by:

- Training and re-training a professional public health workforce capable of further disseminating effective community and other public health programs;
- Training healthcare and public health practitioners in prevention methods through offering continuing education programs and through partnerships in the delivery of model programs;
- Contributing to the development of linkages among graduating students, state agencies, local organizations, healthcare practitioners, and communities to help align, coordinate, and implement effective prevention programs; and
- Conducting community-based and other public health research that is Arkansas focused and based on Arkansas needs.

PROGRAM PROGRESS:

Student Expansion:

During this reporting period, **222** students are actively pursuing degrees in the COPH. For this total number of students pursuing degrees, 28 students are enrolled in a doctoral program - 17 of the doctoral students are in the DrPH program, and 11 doctoral students are in the PhD programs (8 seeking a PhD in Health Systems Research, and 3 seeking a PhD in Health Promotion and Prevention Research). Demographics of these students are as follows: 158 (71%) are female; 98 (44%) are part-time students; 52 (23%) are African-American; 1 (<1%) is American Indian or Alaska Native; 11 (5%) are Asian; 153 (69%) are non-Hispanic Caucasian; 3 (1%) are Hispanic; 1 (<1%) chose two or more races; and 1 (<1%) chose not to designate race. Student age range is wide, although younger, more traditional students are increasing in number: 43% are 20 - 29 years of age; 23% are 30 - 39 years of age; 18% are 40 - 49 years of age; 14% are 50 - 59 years of age; and 2% are 60 or above. Geographic origin of these students is also broad: 41% (91) are from the Central AHEC region; 3% (6) are from the Northwest AHEC region; 5% (12) are from the Northeast AHEC region; 3%(7) are from the Southwest AHEC region; 2% (4) are from the South AHEC region; 3%(6) are from the Delta AHEC region; 15% (34) are from the South Central AHEC region; and 9% (19) are from the North Central AHEC region. The College has 6 (2%) out-of-state students (paying out-of-state tuition); the remaining 33 students identified as from out-of-state were residing in Arkansas at the time of their admission, and 2% (4) are from foreign countries (2 paying out-of-state tuition). A total of 32 of the students (14%) are Arkansas Department of Health (ADH) employees.

Of the total number of students pursuing degrees in the COPH, **69** students were enrolled in the Summer semester; 28 of these students are enrolled in a doctoral program - 17 of the doctoral students are in the DrPH program and 11 doctoral students are currently in the PhD programs (8 seeking a PhD in Health Systems Research and 3 seeking a PhD in

Health Promotion and Prevention Research). Demographics of current enrollees are as follows: 49 (71%) of the students are female; 54 (78%) are part-time students; 19 (28%) are African-American; 1 (1%) is American Indian or Alaska Native; 1 (1%) is Asian; and 48 (70%) are Caucasian). Student age range is wide: 48% are – 20-29 years of age; 22% are 30-39 years of age; 14% is 40-49 years of age; 13% are 50-59 years of age; and 3% are 60 and above. Students are represented by 11 of the 75 counties in the following AHEC regions: Central: 50 students (72%); North central: 4 (6%); Northwest: 2 (3%); North west: 2 (3%) and South Central: 9 (13%). Two out of state students were enrolled; one paying out of state tuition, the other being a 4+1 student from Philander Smith College.

Faculty Development:

As of June 30, 2010, the COPH had 49 full-time and part-time, salary-supported faculty; 37 of these faculty members are 100% supported by the College.

Program Development:

The COPH offered 32 courses this Spring semester with 5% of the courses offered through distance-accessible learning format, including courses using WebCT, weekend (executive) formats or directed study. In addition, 17 students enrolled in the MPH preceptorship or the doctoral practicum/project or capstone seminar. 6 courses were offered during the Summer semester with 5 (83%) of the courses using WebCT, weekend (executive) formats or directed study.

Degree Programs include:

- Post-Baccalaureate Certificate in Public Health
- Post-Baccalaureate Certificate in Occupational and Environmental Health (through UAMS Graduate School)
- MPH (generalist and specialist in each of the five departments)
- MS in Occupational and Environmental Health (through UAMS Graduate School)
- Master of Health Services Administration (MHSA)
- 5 combined degrees programs: MD/MPH; JD/MPH; PharmD/MPH; MPS/MPH; MACS/MPH
- 4 Combined BA or BS/MPH with collaborating Arkansas undergraduate Institutions:
 - Arkansas Baptist College
 - Hendrix College
 - Philander Smith College
 - University of Arkansas at Pine Bluff
- Doctor of Public Health in Public Health Leadership (DrPH)
- PhD in Health Systems Research (through UAMS Graduate School)
- PhD in Health Promotion and Prevention Research (through UAMS Graduate School)

Students participating in the combined BA(BS)/MPH programs in collaboration with Arkansas undergraduate institutions can apply for provisional admission to the MPH program typically during their sophomore year. If admitted, they can begin taking MPH courses which each college has agreed to accept toward students' undergraduate degrees. The five or more courses that each college has agreed to accept for credit allow students to

complete at least 15 credit hours toward their MPH degrees, enabling students to complete the 42 credit hours for their MPH degrees typically in one additional year after graduating with their BA or BS degree.

Community Outreach:

Monthly magazine column: No column was provided by COPH faculty to the Arkansas Municipal League magazine "City and Town" during this quarter, since UAMS marketing and communications staff wanted to give other UAMS programs an opportunity to contribute articles. The monthly COPH columns provide useful information and/or useful advice on how municipal officials and administrators can promote better health.

The Health Policy/Prevention Conference is held Tuesdays from 4:00 pm - 5:00 pm (except during the months of July and August and when other activities conflict). The Arkansas Department of Health (ADH) is a conference co-sponsor of these conferences. COPH faculty/guests provide relevant information related to public health policy and prevention. Conference announcements are distributed to UAMS and ADH employees and interested parties outside of UAMS.

Public Health Grand Rounds are held each Thursday from 8:00 am - 9:00 am in the ADH auditorium. The COPH participates as a co-sponsor of these grand rounds.

Federal and Philanthropic Funding:

During this quarter, the COPH faculty submitted 7 grant proposals seeking approximately \$8.9 million; one of the submitted proposals has been funded (\$33,083) and six are still pending at the current time. Two grants and contracts previously submitted were funded (\$101,800) during this period. The total, active extramural funding in the COPH at the end of June 2010 is approximately \$32 million.

Research Relevant to Arkansans:

Conducting research relevant to Arkansans and community-based in nature is one of the four primary ways in which the COPH seeks to realize its mission and improve the health and well-being of Arkansans. Coronary heart disease (CHD), cancer, and stroke are the three leading causes of mortality and morbidity among all gender and race/ethnicity groups nationally and in Arkansas. Through strategic planning, the COPH has focused on research relevant to smoking and obesity prevention and control and has established Interdisciplinary Centers in Tobacco and Obesity to ensure that a focus will be maintained on developing research programs for these two leading risk factors for CHD, cancer, and stroke. Two nationally recognized leaders are directors of the college's Interdisciplinary Tobacco Center and Interdisciplinary Obesity Center: Drs. Warren Bickel and Delia Smith West, respectively. Many ethnic and racial minority groups, including our state's African-American and rapidly growing Latino populations, experience a disproportionate disease burden. The COPH has also identified eliminating these racial and ethnic health disparities as an additional research focus relevant to the health issues within Arkansas. Federal funding has been obtained to establish and support two additional COPH Centers to address racial and ethnic health disparities: The Arkansas Center for Health Disparities (ARCHD) funded by NIH; and the Arkansas Prevention Research Center (ARPRC) funded by CDC. These four centers are designed to provide a focus on the health issues important to Arkansans.

Tobacco Research - No new project was funded relative to tobacco research during this reporting period. Ongoing projects described in past reports include three projects by **Dr. Christine Sheffer, PI:** "Treatment Modality and Socioeconomic Status in Treating Tobacco

Dependence”; “Provider Education Program for Treating Tobacco Dependence”; and “Changing Thought and Action in Tobacco Dependence with Transcranial Magnetic Stimulation”. Another ongoing project is “The Delay Discounting as a Predictor of Relapse among Tobacco Smokers” with - **Dr. Warren Bickel, PI**.

Obesity Research - No new project was submitted or funded relative to Obesity research during this reporting period. Ongoing projects described in past reports include the CDC-funded Arkansas Prevention Research Center’s (ARPRC) “ -**Dr. Martha Phillips,PI**; the web-based “Weight Loss Grant” and the “Translation of Obesity and Cognition Research in a Rural State via Senior Centers”, both with **Dr. Delia Smith West, PI**; the Robert Wood Johnson Foundation funded project to continue the “Evaluation of Act 1220”, with **Dean Raczynski, PI**; and, the full research project for ARCHD with **Dr. Elaine Prewitt, PI**.

Minority Health Disparity Research - No new project was submitted or funded relative to Minority Health Disparity research during this reporting period. Ongoing projects described in past reports include the CDC funded “Arkansas Prevention Research Center (ARPRC)”, with **Dean Jim Raczynski, PI**; the “Arkansas Center for Health Disparities (ARCHD)”, with **Dean Jim Raczynski, PI**; and, the “Arkansas Health Disparities Service Learning Initiative”, with **Dr. Kate Stewart, MD, MPH, PI**. Dr. Creshelle Nash, MD, Assistant Professor, COPH Department of Health Policy and Management, also remains under contract to serve as Medical Director for the Arkansas Minority Health Commission.

Resource to Public Officials/State agencies & community:

The COPH acts as a resource to the General Assembly, the Governor, state agencies, and communities. During this reporting period, the College of Public Health faculty/staff engaged in various activities with legislators and state agencies:

- April 8, 2010 - Participated in Tobacco Settlement Commission Retreat
- April 23, 2010 - Staff participated on the AMHC agenda addressing the Marshallese population in Springdale, AR. Legislators, public officials, public health professionals and many representative of the Marshallese population attended.
- May 25, 2010 - Dr. Paul Greene and other COPH faculty/staff participating in AR Cancer Coalition Quarterly Meeting.
- June 17, 2010 - Participated in Rural Health Retreat - “Community Outreach Section”.
- COPH faculty and staff continue to serve in a leadership capacity and are visible partners with the AR Cancer Coalition, AR Minority Health Commission, AR Department of Health, The American Cancer Society, and the Central Arkansas Health Association.
- COPH students have over 35 agency/organization choices for their integration projects and preceptorships.
 - Three COPH faculty/staff serve on an Advisory Committee of the Philander Smith College Kendall Health Science Institute. Collaboration, research, and increasing the number of minorities in health related jobs are the primary foci of the Advisory Committee.
 - COPH faculty/staff are ongoing participants in the Clinton School of Public Service educational activities.

Collaboration and Cooperation:

Collaboration and cooperation is one of the four primary ways the COPH seeks to improve the health of all Arkansans. For the purpose of this section, information lists the

collaborations made, attempted to be made, and possible collaborations between COPH and the other programs funded through tobacco settlement funds.

Delta AHEC

- Mary (Mellie) Watson, M.S., Director, Delta AHEC South continues to serve as Co-PI of the research project and member of the Steering Committee for the ARPRC.
- Strategic planning is ongoing within UAMS on better ways to coordinate and collaborate with all Area Health Education Centers.

Arkansas Minority Health Commission (AMHC)

- Dr. Creshelle Nash, Medical Director of the AMHC is an Assistant Professor at the COPH and serves as the AMHC representative in the Education component of the NIH-funded ARCHD. Dr. Nash also serves as the PI for one of the ARCHD pilot research projects.
- Willa Black Sanders, Assistant Dean, Governmental Relations and Special Projects, is a Senate President Pro Tem- appointed Commissioner to the AMHC.

Area Aging Initiative (AAI-UAMS)

- Dr. John Wayne is completing the evaluation of the AAI initiatives.

Arkansas Biosciences Institute (UAMS)

- The following COPH faculty members have obtained past funding from the Arkansas Biosciences Institute: Warren Bickel, PhD; JianJun Zhang, MD, PhD, Dr. Gunner Boysen, PhD, and Alesia Ferguson, PhD.
- COPH faculty members Gunner Boysen, PhD is presently receiving funding from the Biosciences Institute.

AR Department of Health (ADH)

- Dr. Paul Halverson, ADH Director, is a Professor in the COPH's Department of Health Policy and Management.
- Dr. Joe Bates, Deputy Director at the ADH, is also appointed in the COPH as Associate Dean for Public Health Practice and as Professor in the COPH's Department of Epidemiology.
- ADH and the COPH jointly sponsor the Tuesday Health, Policy Research Conferences held at the COPH from 4:00 to 5:00 pm of each week. The COPH also jointly sponsors the Thursday Grand Rounds held at ADH from 8:00 to 9:00 am.
- A weekly meeting is held between ADH Deputy Director Joe Bates and Dean Raczynski to help coordinate and develop new opportunities for ADH/COPH collaboration.
- Several ADH staff have faculty appointments in the COPH, including: Drs. Appathural Balamurugan, Joseph Bates, Jennifer Dillaha, Jeffery Moran, Leonard Ntaate Mukasa, Gordon Reeve, John Senner, and Namvar Zohoori, as well as Ms. Chris Patterson, Ms. Shirley Louie, and Ms. Cheryl Ledoux.

Additional Possible Collaborations based on COPH's primary purposes

- Although COPH Masters and Doctoral students select their Integration Project and Preceptorship sites, opportunities at targeted needs program sites could be more prominently highlighted among the opportunities available to students;
- Although examples exist when COPH faculty have partnered with Targeted Needs Program Sites to develop research programs, more systematic efforts to promote collaborative research could be developed;

- Copenhague faculty who have expertise in evaluation are currently assisting or have provided past assistance/consultation with planning for Targeted Need Programs evaluation planning. Assistance could also be offered to other programs; and
- Copenhague co-sponsors Tuesday Conferences and Public Health Grand Rounds to provide relevant information related to public health policy and prevention, but Targeted Needs Program partners could participate in these presentations as a way of identifying other opportunities for collaboration. Aaron Black, Director of the Tobacco Settlement Commission has spoken at this Tuesday Conference as well as Dr. Joe Bates with the Arkansas Department of Health.

RAND RECOMMENDATIONS - 2009

RAND Recommendation 1: Maintain the growth trajectory of student enrollment from across the state and faculty research.

COPH Response: The COPH will continue to promote and encourage faculty research, educational awareness, and provide convenient classes through distance-accessible formats (WebCT, weekend/executive formats, directed study, etc.) to maintain the growth trajectory of student enrollment from across the state. UAMS Chancellor Rahn has pledged campus support to enhance distance educational technology technical assistance for COPH courses.

RAND Recommendation 2: Continue to build COPH's major programs, especially epidemiology and biostatistics.

COPH Response: Faculty are being interviewed for the biostatistics position. Ads are being posted in the appropriated venues for the Environmental & Occupational Health position. The Chancellor is supportive of using a search firm for the Epidemiology position, as this is the most challenging position to fill due to competition among public health schools.

RAND Recommendation 3: Develop a student tracking system that provides more current and accurate information about student enrollment.

COPH Response: UAMS had planned to implement a University-wide student information tracking system but budget concerns have re-prioritized the implementation of such a system in the very near future. A university-wide system will ultimately be implemented. Because of the COPH's anticipation of this university-wide system, the College continues to utilize a home grown system and has not invested scarce funds toward an advanced tracking system which might not be compatible with a new, university-wide system. The COPH believes it would be very helpful to have a more sophisticated tracking system and will continue to tweak our existing system until the university-wide system is implemented.

DELTA AREA HEALTH EDUCATION CENTER

PROGRAM OVERVIEW & GOALS

Program Overview: The Delta Area Health Education Center (Delta AHEC) was established by the Tobacco Settlement Proceeds Act (July 1, 2001). It is the intent of the Act that "the University of Arkansas for Medical Sciences (UAMS) establish a new Delta Area Health Education Center to serve the following counties: Chicot, Crittenden, Desha, Lee, Monroe, Phillips, and St. Francis. The new Delta AHEC shall be operated in the same fashion as other facilities in the UAMS-AHEC program including training students in the

fields of medicine, nursing, pharmacy, and various allied health professions, and offering medical residents specializing in family practice. The training shall emphasize primary care, covering general health education and basic medical care for the whole family. The program shall be headquartered in Helena with offices in Lake Village and West Memphis."

Primary Goals: (1) To serve Chicot, Crittenden, Desha, Lee, Monroe, Phillips, and St. Francis counties by increasing access to quality healthcare through the composition, distribution, and appropriate preparation of a culturally competent health professional workforce; and, (2) to further serve the citizens by increasing the capacity of participation in culturally sensitive health promotion and health education programs.

PROGRAM PROGRESS

Since its inception the Delta AHEC has worked in three primary areas: (1) provide services to communities and clients throughout the Delta region; (2) educate health care professionals, and (3) increase access to health care. In 2001, three process indicators were selected to track the overall progress of their efforts to fulfill the mandates in the Act. Participation in each area during April, May and June 2010 is summarized in the tables below.

1. Services Provided to Communities/Clients

The following stories, as recently reported by Delta AHEC staff, illustrate the impact our programs have on the daily lives of area residents. A community garden is growing in Helena-West Helena! On April 30th, Helena's Growing Healthy Communities Kick-Off included the ground-breaking for the Healthy Community Garden! Food from the garden will be used in the 2010 school lunch program and will be sold at the Downtown Helena Farmers Market. Volunteers and donations of seeds, gardening supplies/equipment, and additional funding have made the garden a reality.

The Fitness Center continues to demonstrate remarkable outcomes. One client has lost 80 pounds doing Zumba and working out in the fitness center. The staff helped her with healthy eating habits and workout plans. "I had to work this hard to get the weight off because my daughter has always wanted to play tennis and I was too big to play with her. I now am able to play tennis with my daughter." Another client also lost 80 pounds after exercising in the fitness center and participating in the Diabetes Clinic. "I think this is the greatest place I have ever been. This place has changed my life. You have so much to offer. I travel and have never seen a place that can help as much as the Delta AHEC. You guys should be a model for all other states."

Clients also appreciate our facilities, as evidenced by these comments regarding the UAMS Delta AHEC South Community Outreach Center. "I love this place and am very happy with the change in hours. I think this UAMS Delta AHEC South Community Outreach Center is a wonderful opportunity for the community to get involved and take some responsibility for their health. I hope this center will be here for a long time." "We are in an exercise class every day and meet at 11:00. We are so appreciative to have this nice facility. It is always clean and the temperature is just right even though the exercise is not

too strenuous that we work up a sweat. Our age group averages approximately 70-85. The staff is very courteous and helpful." "I love the hours of operation of the building. I come all throughout the day, whenever I have spare time, I run in and out." "I am very pleased with our and feel that it helps our community." "We play cards here twice a week and really enjoy the use of the facility. It is always clean and comfortable, and the employees are courteous and knowledgeable. We appreciate the water, snacks and other refreshments. The facility is easy to get to and the parking is nice."

Outreach can be done in many places, including health screenings. "One high school senior, tested at a private school in Dumas, said, "I wasn't planning on getting my finger pricked today but decided to because my father is a diabetic and I know I need to. Thank you for coming to our school and offering this service." He had an elevated blood sugar, and his mother called the school after hearing about his results to thank us. At a faculty screening, one individual said, "I'm so thankful I can get my blood pressure checked. I haven't been feeling very good lately and haven't had time to get to my doctor. I'm so glad Delta AHEC came to me!" Her blood pressure was elevated and she needed medication from her doctor.

Prenatal support is also an important community service. "The quarterly baby showers are great; it's a place to meet other pregnant moms and learn about caring for ourselves and our babies. Thank you for this opportunity." "I think it is wonderful to have a doula program available in this community. Thank you for helping us birth our daughter, just having the one-on-one support through shift changes and so many different nurses was comforting. I don't think we would have done as well without the doula. "

Attendance at public education programs this quarter was as follows:

<i>To increase the capacity of participation in culturally sensitive health promotion and health education programs:</i>	
282	CPR/First Aid for Consumers/Babysitting
1,452	Health Education for Adolescents
730	Health Education for Adults
1,087	Health Education for Children
1,952	Health Fairs/Screenings
464	How Healthy is your Faculty/Industry/Church?
1,120	AR Kids Outreach
2,770	Kids for Health
385	Prescription Assistance (\$288,189.68 savings)
127	Seniors CLASSICS
0	Grief Counseling (Remembering Angels)
20	Tobacco Cessation
26	Tobacco/Substance Abuse Prevention
65	Sexually Transmitted Infections
<i>To improve health behaviors related to chronic health problems:</i>	
2	Asthma
65	Diabetes (1-on-1 and Group)

129	Diabetes Clinic
1	Diabetes Hospital
50	Diabetes Outreach
49	Diabetes Self-Management
84	Diabetes Support Group
666	Sickle Cell Project
921	Consumers provided with library services
<i>To improve health behaviors in regards to physical activity and nutrition:</i>	
8,797	Fitness Center Encounters
145	Tai Chi
3,912	Other Exercise Programs
33	Nutrition (Group, includes Lunch and Learn)
61	Nutrition (1-on-1 Counseling)
<i>To improve health behaviors related to pregnancy, teen prevention, and parenting skills:</i>	
289	Teen Pregnancy/Parenting

2. Education Provided to Healthcare Professionals

Attendance at programs for health professionals this quarter was as follows:

<i>To provide educational activities for area health professionals and health professions students:</i>	
146	Continuing education (54 programs; includes compressed video)
45	CPR for Health professionals
100	Health professionals provided with library services
75	Health professions students/residents provided library services
402	Public education programs for health professionals (no CE credit)

3. Activities to Increase Access to Health Care

The Helena Veteran's Community Based Outpatient Clinic had a total of 203 encounters for this quarter, and our total enrollment is up to 256 veterans. Full time staff for the clinic has been secured and new hires include Josephine Jackson, APN, Bobbie Ford, LPN, Tameka Lofton, Lab Assistant, and Jill Richmond, Administrative Assistant. Clinic staff are committed to keeping the promise made by Abraham Lincoln, "To care for him who shall have borne the battle...". Participation in activities to increase access to health care this quarter was as follows:

<i>To increase the number of health professionals practicing in underserved areas in the Delta:</i>	
4	RNs preparing for BSN
2	BSNs preparing for MNSc
0	MNSc preparing for administration
1	Medical students mentored for admittance to UAMS COM
1	Pharmacy student mentored for admittance to UAMS COP
0	Nursing students doing clinical rotations at the Delta AHEC
4	UAMS medical students doing preceptorships
3	UAMS senior medical students doing selective rotation
<i>To acquaint minority and/or disadvantaged youth with health careers:</i>	

197	Health Careers
1	Students mentored/shadowing professionals
<i>To provide support services for health professionals and their patients:</i>	
0	Tele-medicine patient follow-up visits with UAMS cardiologist
543	Veterans' Community Based Outpatient Clinic patient encounters

Leadership/Advisory Board Activities

Angela Whatley, RN, of Delta AHEC North, gave two presentations at the National AHEC Convention in Las Vegas. The first, "Oral Infant Care: Start at Birth" reported the collaboration with Crittenden Regional Hospital and the University of Tennessee Residency Pediatric Dentistry Program that educates parents of newborns in the hospital on oral care for their infant to reduce dental caries. The second, "Supporting the Perinatal Experience with a Doula" described our Community Based Doula Program through the Delta AHEC North in West Memphis. This program, funded by a Blue & You Foundation Grant, was designed to help other AHECs replicate this program and find funding to support such a program. Representatives from 20 other AHECs attended this seminar, indicating a growing interest in this type of program.

Healthcare Professionals/Students

The number of UAMS students completing student rotations in the Delta AHEC service area increased this year. We had 4 first-year medical students complete preceptorships, 1 in Helena and 3 in Forrest City, and 8 senior medical students completed Senior Selective rotations, 2 Primary Care in Helena, 4 Acting Internships in West Memphis and Lake Village, and 2 electives in West Memphis.

A former MASH student who did a summer internship with the Registered Dietitian said, "Thank you so much for letting me shadow. I had such a great time and learned so much I feel like I was finally able to apply what I've learned in the classroom. I am so thankful that I had this opportunity. I really appreciate the time and effort you put into planning activities and the extra hours you spent at work for me."

Collaboration & Cooperation

The East Arkansas Family Health Center will use Delta AHEC materials for a Tobacco Prevention Program for approximately 500 sixth-graders in the West Memphis School District and approximately 200 sixth-graders in Blytheville public schools. All items will be displayed and discussed with the students to give them a first-hand look at what tobacco use can cause. Each student will receive the "How Tobacco Affects your Body" and the "Tobacco Fortune Teller Game" brochures along with a "Be Smart - Say No to Smoking" educational activity book.

Media & Public Relations

Delta AHEC's work to encourage students to pursue careers in the field of nutrition and Andrea Tappe's weekly tele-counseling sessions with senior Nutrition and Dietetics majors were recognized in the UAPS School of Agriculture, Fisheries and Human Sciences' newsletter.

In June, a “Beat the Heat Survival Kit’ was distributed using e-mail and Facebook. This fact sheet from the Arkansas Department of Health’s Center for Health Protection Injury Prevention and Control Branch provided information about staying safe in the heat.

Continuous Quality/Program Improvement

Next quarter we will begin reporting to the ATSC in a new format and with an updated set of RAND recommendations. The Delta AHEC staff and 23 stakeholders participated in a strategic planning session based on the SOARS model. Recommendations of the group were to develop a new student mentoring program, to explore billing opportunities under Healthcare Reform, especially in regards to wellness programs and worksite wellness, to explore providing dental care to the community, to become the “Healthy Face” of the community and serve all people, to provide a therapeutic swimming pool, and to develop an educated group of volunteers to promote AHEC, making childhood obesity a priority.

RAND RECOMMENDATIONS

Below are three recommendations that come out of our most recent evaluation process. One recommendation is a continuation of a recommendation in the previous evaluation report.

RAND Recommendation 1: Increase efforts to recruit health students.

Recruiting health professionals to the region is a challenge that should be high on the radar for all tobacco programs. We recognize the Delta AHEC administration’s challenges to recruiting health professionals to the region and wish to encourage them in their efforts to pursue students interested in the health professions. We commend that the Delta AHEC hire staff to focus on this important work as well as their focus on increasing the number of potential health professionals through programs for students early in their careers.

Program Response: The Pre-professions database is operational and in use. We also have a website and are using social networking via a Facebook page for health careers.

RAND Recommendation 2: Continue to increase resources to conduct program evaluation activities.

Delta AHEC has responded to past recommendations by building evaluation into most of its services and programs. Delta AHEC wrote up a “Service Profit Chain” documenting the link between employee satisfaction and client satisfaction. This document also has a list of indicators that can be collected to assist in program evaluation. These evaluation components include process and outcome indicators collected by multiple data sources that have been institutionalized into the everyday workings of the program. Data sources include scannable participant surveys, automated participant data (i.e., scannable identification cards that feed into a participant database), and program-based outcomes that support evaluation of their programs (e.g., weight, blood pressure, etc.). Delta AHEC has a useful data system that is utilized by each site to track participant numbers consistently. They have also instituted quality management processes that demonstrate the understanding that consistency is something that must be planned (e.g., development of protocol manuals for each program). Preparing for potential staff changes by creating a series of manuals that holds all of the necessary information needed to run each program

is a wonderful model that has been shared with AAI and MHI. We recommend that Delta AHEC continue on its current path towards building its evaluation capacity.

Program Response: The new statewide activities database will be operational by the first of September. The outreach directors and Delta AHEC staff will be trained in the use of the database before the database becomes active.

RAND Recommendation 3: Conduct a survey of knowledge gained in training sessions as part of its evaluation efforts.

We recommend that Delta AHEC conduct knowledge surveys as part of their training sessions to track the response to the education opportunities and incorporate the information into their continuous quality improvement efforts. Surveys do not have to be a part of every training session given by each site. However, a strategic sampling of training sessions geared towards various groups of professionals would provide information that could help Delta AHEC better gauge their effectiveness.

Program Response: Knowledge and satisfaction surveys are being administered when appropriate.

ARKANSAS AGING INITIATIVE

AAI PROGRAM OVERVIEW & GOALS

The AAI is an infrastructure of eight satellite Centers on Aging located across the state. This program is designed to address one of the most pressing policy issues facing this country: how to care for the burgeoning number of older adults in rural community settings. The vision of the AAI is to improve the quality of life for older adults and their families and is fulfilled through two primary components: an infrastructure that partners to provide quality interdisciplinary clinical care and innovative education programs for older adults and their families, professionals and students of the health and social services disciplines, and the general public.

Mission

- To improve the health of older Arkansans through interdisciplinary geriatric care and innovative education programs
- To influence health policy affecting older adults

Goals

- *Clinical Services:* Older Arkansans will receive evidence-/consensus-based health care by an interdisciplinary team of geriatric providers;
- *Education:* The AAI will be a primary provider of quality education for the state of Arkansas;
- *Promotion:* The AAI will employ marketing strategies to build program awareness;
- *Policy:* The AAI will inform aging policies at the local, state, and/or national levels;
- *Sustainability:* The AAI will have permanent funding sufficient to continue implementation of its programs; and
- *Research:* The AAI will evaluate selected health, education, and cost outcomes for older adults who are provided services.

AAI PROGRAM PROGRESS

- **Progress toward outcomes, significant changes, and accomplishments this quarter**
 - The Administration on Aging (AoA) grant with ARRA (stimulus) money which we partnered with The Arkansas Department of Health for more money to provide more CDSMP training was granted. This will mean that for each “completer” of the CDSMP training, a site should receive around \$300 in reimbursement from the grant. The AoA also awarded another grant through the AR Department of Health for completers of Matter of Balance. These are two evidence-based programs that we have had a lot of success implementing.
 - The Donald W. Reynolds grant to replicate the Schmieding Caregiving Training program first site in Jonesboro had its Grand Opening with over 125 dignitaries and special guests in attendance on April 6. By the end of June, they have had 19 graduates from the program.
 - WCCOA moved locations and had an Open House event at their new location at 512 S. 16th Fort Smith. The event was sponsored by their local Advisory Board and WCCOA staff with 56 attendees.
 - The AAI had their annual retreat in June at The Winthrop Rockefeller Center at Petit Jean State Park. The main topic was Implementation of the Chronic Care Model & sustainability plans. Plans are being made for a retreat in the fall to discuss a new strategic plan.
 - At Mt. Home, The Murk Family Center on Aging held its second Men's Health Forum. There were 185 in attendance where five physicians spoke and several screenings were offered that included free hearing tests, balance, B/P, vision and skin cancer.
 - The Arkansas Geriatric Education (AR - GEC) was renewed effective July, 2010 through June, 2015 through a cooperative agreement; the new grant is a consortium with UAMS as the lead and Arkansas State University, the University of Central Arkansas, the Arkansas Cancer Coalition, and the Arkansas Department of Health Chronic Disease Branch as partners.
 - Drs. Beverly and McAtee attended the ATSC Retreat at Mt Magazine with several new commissioners where a new overall plan was discussed
 - Dr. McAtee attended the Minority Health Summit at Philander Smith College in April where ideas were shared.
 - Dr. Kate Lorig, author of the evidence-based program, CDSMP, spoke at the GEC sponsored Best Practice event in April and made a special visit to talk with the COA Education Directors about their successes and challenges with CDSMP.
 - The new Chancellor, Dr. Dan Rahn, visited three AHECs and COA sites this quarter, El Dorado, Texarkana and Jonesboro.
 - The Regional Centers on Aging participated in 30 Health Fairs this quarter with over 1600 contacts and personal interactions with more than 500 individuals.
- **Leveraging Activity**

The Total leveraged dollars for this quarter: **\$325,935**

SACOA	Delta	COA-NE	SCCOA	WCCOA	TRCOA	Schmieding	Oaklawn
32,271	18,841	14,586	45,600	33,447	3,774	117,065	60,351

- **Clinical Services** Senior Health Clinic visits for April, May and June, 2010 was 10,576.

SACOA	Delta	COA-NE	SCCOA	WCCOA	TRCOA	Schmieding	Schmieding Bella Vista
789	685	2,023	1,017	860	796	2,304	2,102

- **Geriatric education** Total Education Encounters for this quarter was 18,318 of those 20% to minorities.

AAI Site	Health Professionals	In-services	Para Professionals	Community	Exercise	Students	Totals
SACOA	19	70		970	563	12	1634
<i>Minorities</i>	7	48		156	167		378
DCOA		49	17	267	1664	40	2037
<i>Minorities</i>		40	16	194	1445	28	1723
DCOA-Helena		164		220	423		807
<i>Minorities</i>		99		152	36		287
COA-NE	365	21		926	266	71	1649
<i>Minorities</i>				12		14	26
TRCOA	300	32		290	257	23	902
<i>Minorities</i>	38	22		101	21	7	189
Schmieding	107		636	703			1446
<i>Minorities</i>			92	25			117
SCSHE-Bella Vista		40		594			634
<i>Minorities</i>		4		2			6
SCSHE-Mtn. Home	98	53	49	673	1176		2049
<i>Minorities</i>	2	1	1				4
SCSHE-Harrison			59	1389	1609	43	3100
<i>Minorities</i>							
SCCOA	134	11		1456	43	30	1674
<i>Minorities</i>	73	1		573	17	16	680
WCCOA	86	30		1131	71		1318
<i>Minorities</i>	13			54	3		70
Oaklawn	14	111		849	94		1068
<i>Minorities</i>	4	26		58			88

Total Ed Encounters	1123	581	761	9468	6166	219	18318
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RAND RECOMMENDATIONS

RAND Recommendation 1: Ensure that each COA establishes and maintains a formal quality improvement process to monitor, assess, and improve performance, and establish a strategic plan for evaluation in which AAI's central administration assesses COA performance on a periodic basis.

Program Response:

- A formal quality improvement process was developed and implemented Spring/Summer 2007 and is updated each year. This process includes:
 - Annual onsite evaluation visits in the fall with each COA by the AAI core leadership team. These will begin in August of 2010.
 - Annual strategic planning and budget meetings are held with each site and the AAI core leadership during early spring. The strategic plans and budgets meetings for FY 2011 are complete. Each center developed a strategic plan based off the AAI strategic plan and submitted preliminary budgets. These meetings were all held via webcams.
 - A subcommittee of the AAI Education Directors met in May to try and formalize a quality Improvement process that could be completed at each site. They reviewed quality improvement activities that had been completed or are ongoing and discussed possible plans for the next few years. This group will present their ideas to the entire Education Directors group in August.

RAND Recommendation 2: Set more specific fundraising goals for each COA including identifying a short list of funding opportunities through the state and federal governments, foundation, and the private sector for each site and setting financial goals for each year.

Program Response:

- The Regional Centers on Aging Advisory Committees are actively involved in long-range planning to include more community involvement in programs and activities of the Centers on Aging. Committee members identify programmatic and physical resources available in regional communities. This enables the Centers on Aging to serve the rural population that is handicapped due to lack of adequate transportation. Committees continue to develop relations with their local political delegations in an effort to seek support for the continued funding of the Arkansas Aging Initiative. Committees are expanding their efforts to secure funding from private sources. The committees continue their aggressive public relations campaign to acquaint communities with the services of the Center and form partnerships with other agencies committed to serving older Arkansans..
- Ongoing Grants

- We continue to be partnered with the AR State Health Department and the AoA grant. The carryforward money was award this spring and each COA did additional CDSMP classes.
- \$11,000 total per quarter is received for AAI sites to participate in the Advancing Excellence in America's Nursing Home Campaign.
- Donald W. Reynolds grant to replicate the Schmieding Caregiving Training program was awarded in May, 2009 and planning started July 1, 2009. Jonesboro and Pine Bluff had expenses on this grant during this quarter.

RAND Recommendation 3: Continue to push forward with collaborative efforts partnering with the other tobacco funded programs.

Program Response:

- All COA sites have continued to partner with multiple entities, some examples are below:
 - The AAI is partnering with the COPH on an evaluation outcome study for the AAI, a final report is expected in the summer of 2010.
 - Active programs for older adults continue to be presented on a weekly basis with the DCOA and the Delta AHEC.
 - DCOA and the Minority Health Initiative entered into an agreement to improve the lifestyle of 40 patients of the Delta Center of Aging's Seniors Health Clinic helping patient demonstrate improvement in at least one of the areas of weight, blood pressure, lipid levels, glucose levels or physical activity.
 - Each Center continues to partner with several local and regional entities (AAAs, churches, civic clubs, chambers, barber shops, community colleges, universities, wellness centers etc...)
 - Additional partnerships with national, state, regional and local entities continue to flourish at all 8 COAs.
 - All Centers continue to participate in the National Advancing Excellence in America's Nursing Home Campaign. This collaboration includes the Nursing Home Collaborative, Office of Long Term Care, AIPP, AFMC, Arkansas Health Care Association, and others.

RAND Recommendation 4: Build on AAI's strategic plan to present a set of outcome measures that are representative of its work given its funding levels

Program Response:

- The evidence-based programs that we are conducting this FY, Matter of Balance and Chronic Disease Self Management, are both being evaluated and results will be available summer 2010.
- The AAI is partnering with the COPH on an evaluation project to study the impact the AAI has on quality of care for seniors using secondary data. A final project was accepted and work has begun.
- Data regarding encounters, program offerings, county penetration, clinic visits, and many other statistics are entered by each center into a central database and reports are generated as needed.

- Three Regional Senior Health Clinics participated in Medicare's Pay for Performance program during 2009 and have received monetary payments for their successes. The Center on Aging -NE received \$20,000 for 2 physicians reaching the goals, The South Central Center on Aging was awarded \$10,000 for their only physician, and the Delta Center on Aging was awarded \$2,689. We wish to congratulate each for their stellar accomplishments in providing evidence-based care in a cost effective manner.

ARKANSAS MINORITY HEALTH INITIATIVE

PROGRAM OVERVIEW & GOALS

The mission of the Arkansas Minority Health Commission (AMHC) is to ensure all minority Arkansans access to health care that is equal to the care provided to other citizens of the state and to seek ways to provide education and to address, treat and prevent diseases that are prevalent among minority populations.

AMHC LEGISLATIVE MANDATES

Established through the enactment of Act 912 of 1991, the Arkansas Minority Health Commission (AMHC) is charged to;

- Study issues relating to the delivery and access of health services;
- Identify gaps in health delivery systems;
- Make recommendations to relevant agencies and the General Assembly for improving health delivery; and
- Study and make recommendations as to whether services are adequate and available.

In 2001, the Arkansas General Assembly passed **Initiated Act 1**, commonly known as the **Tobacco Settlement Proceeds Act**. The Minority Health Initiative, administered by the AMHC, is one of four *Targeted State Needs* programs identified. *Initiated Act 1* mandates that the AMHC establish and administer the Arkansas Minority Health Initiative for screening, monitoring, and treating hypertension, strokes and other disorders disproportionately critical to minority groups in Arkansas. The program is established to:

- Increase awareness of hypertension, strokes, and other disorders disproportionately critical to minorities by utilizing different approaches that include but are not limited to the following; advertisements, distribution of educational materials and providing medications for high-risk minority populations;
- Provide screening or access to screening for hypertension, strokes and other disorders disproportionately critical to minorities but will also provide this service to any citizen within the state regardless of racial/ethnic group;
- Develop intervention strategies to decrease hypertension, strokes and other disorders noted above, as well as associated complications, including: educational programs, modification of risk factors by smoking cessation programs, weight loss, promoting healthy lifestyles, and treatment of hypertension with cost-effective, well-tolerated medications, as well as case management for patients in these programs; and

- Develop and maintain a database that will include; biographical data, screening data, costs, and outcomes.

Act 574 of 2009 modified, clarified and expanded the AMHC's duties with regards to disparities in health and health care to;

- Gather and analyze information regarding disparities in health and health care access
- Perform statewide educational programming regarding disparities in health/health care and health care equity
- Make specific recommendations relating to public policy issues
- Promote public awareness and public education encouraging Arkansans to live healthy lifestyles
- Develop, implement, maintain and disseminate a comprehensive survey and
- Publish evidence-based data, define state goals and objectives and develop pilot projects for decreasing disparities

Act 358 of 2009 specifies that the AMHC;

- Develop, implement, maintain, and disseminate a comprehensive survey on racial and ethnic minority disparities in health and health care
- Repeat the study every five years; including disparities in geographic location and economic conditions
- Publish evidence-based data, define state goals and objectives and develop pilot projects for decreasing disparities

AMHC GOALS FOR 2010 -2012

The AMHC goals for 2010 through 2012 include, but are not limited to;

- Increase the number of minority Arkansans that obtain recommended health screenings (HIV/AIDS, sickle cell, cholesterol, hypertension/blood pressure, immunizations, vision, glucose, dental checks ...etc.);
- Increase education and awareness regarding disparities and equity in health and health care services by partnering with appropriate organizations;
- Establish a comprehensive system among agencies of coordination and collaboration surrounding minority health disparities and
- Influence public policy towards an equitable health care system for all Arkansans

AMHC KEY FOCI FOR 2010-2012

The AMHC key foci for 2010 through 2012 include two disease states (as recommended by RAND) and two organizational capacity building areas;

- **HIV/AIDS Outreach Initiative** - education, awareness, advocacy, and capacity building among grassroots organizations throughout the state related to the disproportionate disparities in this disease state among minority Arkansans
- **Sickle Outreach Initiative** - statewide education, awareness, advocacy and capacity building among grassroots organizations throughout the state related to the disproportionate disparities in this disease state among minority Arkansans
- **Health Care Workforce Diversity** - establish a collaborative network of stakeholders to address health care equity and health workforce diversity issues;

support programs aimed at increasing minority participation at higher levels of public health care and policy

- **Minority Health Navigation System** - establish a system of supported online navigation and resource guide designed to provide the public free and easy access to all relevant sources on minority health care in Arkansas through one convenient, user-friendly website and guide

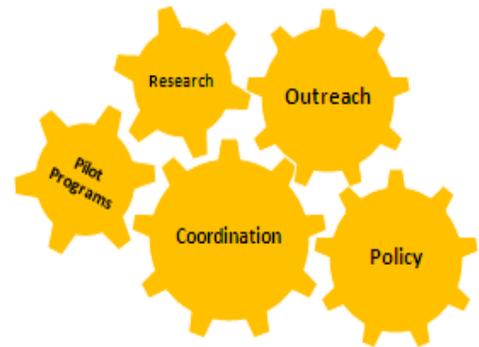
To achieve its mission, legislative mandates, goals and key foci, the AMHC commits itself progressively to evidence-based activities in five key areas:

- Outreach
- Research
- Public Policy
- Coordination/Collaboration
- Pilot/Demonstration Projects

PROGRAM PROGRESS

OUTREACH

Outreach is accomplished through *AMHC Official Quarterly Health Fairs, Public Forums*, numerous collaborative *Community Health Fair Participations* on a weekly/monthly basis, as well as, *Sponsorships* specifically identified as events that engender opportunities for AMHC to maximize its mission and goals within local minority communities throughout the state. In addition, AMHC has narrowed the Minority Health Initiative (MHI) focus for the next three to five years to two disproportionate health disparities disease states; *HIV/AIDS Outreach Initiative* and *Sickle Cell Outreach Initiative*.



AMHC Official Quarterly Health Fairs/Public Health Forum

On April 23-24, 2010, the AMHC held a Public Health Forum and Community Health Fair in Springdale, Arkansas to benefit the residents in Washington County and surrounding areas.

The AMHC's Public Health Forum was very successful. Local representatives, senators, county judges, mayors and health care providers were in attendance as well as Hispanic and Marshallese community members. There were approximately 60 participants in attendance. Representatives from the panel consisted of two AMHC Board members, Executive Director and Medical Director; an Arkansas State Representative from NW Arkansas; a Gaps in Services to Marshallese Task Force representative; and the Consul General of the Marshallese Consulate in Springdale. Participants discussed access to health services in Washington County, questions were asked regarding public health issues and dinner was provided at no cost. There were 6 vendors present at the public forum listed below;

AMHC Health Forum Vendors:

- Arkansas Department of Health (ADH)
- UAMS College of Pharmacy Arkansas Poison Center
- Arkansas Insurance Department Senior Health Insurance
- Department of Human Services
- Washington Regional Hospice
- UAMS/Mexican Consulate Esperanza y Vida

An evaluation of the attendees overall opinion was completed regarding the Public Health Forum. Attendees were asked if they understood the information that was discussed at the forum. Fourteen (14) attendees reported understanding all of the information, while 8 reported understanding some of the information and 1 reported understanding very little of the information. When asked if they were able to discuss health concerns that they felt were important to them and their families, 18 of respondents reported that they were able to discuss important health concerns. When asked are you or your loved ones provided with translation services when you visit the doctor if needed, 11 answered yes. Overall the evaluation was positive with 22 of attendees reporting that the event was very helpful.

The AMHC partnered with AARP’s Wellness Tour Bus to host the health fair. Health screenings, information and lunch was provided free of charge to approximately 300 participants. Screenings offered were blood pressure, glucose, cholesterol, dental, vision, flu shots and bone density. Below is the total number of screenings completed at the health fair.

Blood Pressure	Cholesterol	Glucose	Vision	Flu Shots	Bone Density	Total Attended
107	107	107	70	104	107	107

Attendees were asked to complete a demographic and an event evaluation form. Eighty-eight (88) attendees completed the demographic survey and 57 attendees completed the evaluation that provided feedback on the event. From those evaluations returned, there were 57 Hispanics, 18 Marshallese’s, 12 Whites and 1 African American. There were 29 males and 59 females. There were 19 vendors present at the health fair listed below;

AMHC Health Fair Vendors:

- AARP and AARP Wellness Tour Bus
- Arkansas Army National Guard
- Advanced Family Eye Care Springdale
- Arkansas Department of Health – Health Statistics/County Health Rankings
- Arkansas Department of Health – Connect Care
- Arkansas Forestry Commission
- Arkansas Insurance Department Senior Health Insurance
- Arkansas Minority Health Commission
- Department of Rehabilitation, Human Resources & Communication Disorders
- DHS Washington County
- NWA Community Clinic
- NWA Positive Links Support Network

- U of A School of Nursing Fayetteville
- UAMS College of Pharmacy Arkansas Poison Center
- UAMS Jones Eye Center
- UAMS/Mexican Consulate Esperanza y Vida
- UAMS/Northwest Arkansas AHEC
- United States Census
- Washington County Arkansas Department of Health

In addition to all of the vendors listed above, local community volunteers were on hand to provide support and live entertainment for the crowd. The local radio station provided a live-remote and assisted in encouraging the community to come out to receive free screenings and health information.

AMHC Collaborative Community Health Fair Participation

AMHC continues to expand its outreach efforts with numerous organizations across the state to provide health information/resources and free screenings. During this quarter, AMHC participated in 3 community health fairs in 3 counties (Pulaski, Drew, Ashley) across the state with over 860 attendees. There were a total of 355 screenings including 72 blood pressure, 85 cholesterol, 76 glucose, 29 HIV, 21 sickle cell, 26 mammograms, 34 prostate cancer, and 12 physical exams.

AMHC Equipment Loan Program

As a collaborative effort AMHC often provides screening equipment and supplies to organizations across the state. This enables them to offer free health screenings to the local community. In return, these organizations are asked to report total number screened. To ensure follow up care is provided each organization must provide a follow-up plan for addressing all abnormal screenings. The equipment loan program data is as follows:

	Blood Pressure	Cholesterol	Glucose	HIV	Prostate	Mammogram	Total
April	0	0	0	0	0	0	0
May	123	109	202	23	0	0	457
June	229	310	310	175	79	60	1163

The following table demonstrates a summary of screenings for April, May and June. There were 2,473 screenings performed during this reporting period.

	Blood Pressure	Cholesterol	Glucose	HIV	Sickle Cell	Mammogram	Prostate Cancer	Physical Exam	Bone Density	Vision	Total
AMHC Quarterly Health Fairs	107	107	107	0	0	0	0	0	107	70	498
Community Health Fairs	72	85	76	29	21	26	34	12	0	0	355
Equipment Loan	352	419	512	198	0	60	79	0	0	0	1620

Program											
Total	531	611	695	227	21	86	113	12	107	70	2473

AMHC Sponsorships

AMHC sponsored several events during this quarter. The events included

- UAMS - Student National Medical Association Spring Gala
- The Stars Come Out Inc. 2nd Annual Celebrity Dance Showcase
- UAMS College of Pharmacy Arkansas Poison Control Center
- Mississippi County Coalition for Tobacco Free Arkansas -
- ARORA Golf Classic
- Hola Arkansas Health & Safety Fair
- Reed Memorial 7th Annual Minority Health Fair
- Arkansas Martin Luther King Commission Non-Violent Youth Summit Part II
- Arkansas Public Health Association - 62nd Annual Arkansas Public Health Association Conference
- Sickle Cell Support Services 3rd Annual Sickle Cell Golf Classic
- First Baptist Church - Linking the Communities to Health Services Health Fair
- Asian Festival 2010 - Asian Pacific Resource & Cultural Center

More than 4,170 citizen encounters were captured from these events. AMHC was able to provide health education at all events and screenings were also offered at several of the events (numbers captured in the collaborative community health fair participation section above).

“Southern Ain’t Fried Sundays” Faith Based Outreach Program

“Southern Ain’t Fried Sundays” (SAFS) is a project uniquely designed to educate African American churches and organizations about healthier alternatives to preparing and cooking southern-style foods. It is also a creative mechanism for partnering with these groups in an effort to educate their members about the signs and symptoms of stroke, diabetes, and heart attacks. It is estimated that more than 10,000 Arkansans have been exposed to the SAFS program through this faith-based outreach initiative.

The program is being revamped to expand its reach to the Hispanic communities and individual participants. A registered dietician has reviewed the recipes to make sure the content is healthy and provided recommendations for changes to recipes. The program manager is organizing and formatting the cookbooks in preparation for final layout.

HIV/AIDS Outreach Initiative

The AMHC’s Outreach Initiative Grants Program is designed to fund and support organizations that improve minority health in Arkansas through multiple socio-environmental contexts using innovative methods or activities.

One of AMHC’s health foci selected for 2009-2012 was human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) within racial and ethnic minority communities in Arkansas. This health focus was selected because minority

Arkansans continue to display a high rate of this life threatening disease, and HIV/AIDS has been inadequately addressed within minority communities. The seven funded organizations ended their projects April 1, 2010 with great accomplishments. Over 1000 individuals received free HIV screenings and over 7000 were provided with HIV education.

Two of the funded organizations received recognition from other out of state entities for the work they did. Jefferson Comprehensive Care System gained recognition by the Black AIDS Institute, a Los Angeles based organization, for their "SISTA" program. "SISTA" is a college based social skills training intervention aimed at reducing sexual risk behavior among African American women that in many cases lead to HIV. The Brotha's and Sista's program coordinator was selected by the National Association of People with AIDS to receive the Positive Leadership Award. The award gives recognition to individuals who have demonstrated unparalleled leadership to the cause of HIV/AIDS.

HIV Prevention Project

The AMHC continues to build its partnership with the ADH through a collaborative effort in planning capacity building trainings for the 2010 grantees. Through the relationship with the CDC, the health department was able to request training through the CHRIS system which allowed the training to be offered as part of their provided technical assistance at minimal to no cost.

Through this partnership the AMHC funded four community base organizations and one faith base organization in Union, Pulaski and Jefferson counties. Funding these five organizations affords the opportunity to promote HIV/AIDS education and awareness within multiple populations. The various populations being targeted include African American and Hispanic females, the homeless population, teen parents, Hispanic males and teenage girls.

HIV/AIDS Prevention Coalition

The Coalition continues its assessment of housing issues in the state for the HIV positive population. As the Coalition continues to develop strategies to engage the faith base communities, active planning is underway to organize an HIV awareness training targeting faith base leaders across the state.

In recognition of National HIV Testing Day, the AMHC along with the ADH recruited churches from across the state to host testing events at their facility. Many churches answered the call and met the challenge. Testing events were held on June 26th and June 27th in Union, Pulaski, and Jefferson counties. A total of 176 screenings were reported from these events. There was no coalition meetings scheduled during this reporting period.

Sickle Cell Outreach Initiatives

The AMHC continues to research the development of a strong and wide reaching Sickle Cell Outreach Initiative.

AMHC has partnered with Sickle Cell Support Services (SCSS), a non-profit community based organization, in their efforts to enhance the well-being of sickle cell patients and

families in the state of Arkansas through outreach, education and awareness. Currently, AMHC is working with SCSS to organize a Sickle Cell Conference scheduled for September. AMHC is also working to help community based organizations enhance their Sickle Cell outreach programs by providing the opportunity to receive funding. AMHC is currently working on a Request for Proposal (RFP) that is planned to be announced during National Sickle Cell Awareness Month in September.

AMHC continues to participate in the Arkansas Legislative Taskforce on Sickle Cell and work towards other collaborative efforts with organizations across the state.

Media/Communications Outreach

Arkansas minority citizens were exposed to AMHC through media outreach surrounding advocacy, awareness and education from April to June 2010. Continuing communication efforts include the **Ask the Doctor** radio show on KIPR Power 92 that features AMHC Medical Director, Dr. Creshelle Nash. The show airs the third Tuesday of each month from 7am to 9am. Power 92 listeners call in questions or email questions. In addition to answering health questions, Dr. Nash also highlights important AMHC news and events.

As part of our agreement with Citadel Broadcasting Company for Ask the Doctor, AMHC runs 70 monthly **60-second radio spots** on KIPR Power 92.3, KOKY 102.1 and KPZK Praise 102.5. These radio spots provide general information about AMHC, give important health information during health awareness months and inform the public of AMHC events. Since April, more than **250** radio spots have run on KIPR, KOKY and KPZK.

Another continuing communication tool, **the Minority Report**, is disseminated via email the third week of each month. This is a monthly newsletter that highlights the events and news of the prior month and future events. The AMHC also has a **Facebook** page that is updated regularly to inform the community of AMHC news, events, as well as recent news coverage. (www.facebook.com/arminorityhealth)

Other monthly communication activities are listed below:

April:

The first edition of the **“bridge” magazine, AMHC’s annual publication**, was released the last week of April. The publication features 26 pages of information about the work of the Commission as well as a profile about Commission founder, and 15th Surgeon General of the United States, Joycelyn Elders, M.D. **More than 2500** copies have been disseminated around the state since the magazine was launched.

AMHC, with presenting sponsor AARP, hosted the **Arkansas Minority Health Summit**, April 15 on the Philander Smith College campus in Little Rock. The Summit featured the former Surgeons General Drs. Richard Carmona, Joycelyn Elders and Antonia Novello. Press releases were distributed to all daily and weekly newspapers, radio stations and college campuses in Arkansas announcing the event.

Other communications pieces associated with AMHC sponsorships leveraged visibility for the event; the JCCSI HIV/AIDS conference program booklet, April 4 and 5; Student

National Medical Association program booklet for their annual gala on April 10; and the Black Student Law Association program booklet.

Two articles were published in En Lace Latino on March 25 promoting the Summit event. Articles were also published in Stand News and Hola! Arkansas.

To promote the Summit, AMHC staff, commissioners and collaborators conducted several television and radio interviews on KARK Channel 4, KIPR Power 92.3, KOKY 102.1, KATV Channel 7, KCLT-Helena/West Helena, KMLK-El Dorado and KZRB-Texarkana.

Featured panelist at the Minority Health Summit, Dr. Joycelyn Elders, was asked to appear on KARN's Morning Show for an interview prior to the event.

Advertisements were placed in newspapers statewide from Northwest and Northeast Arkansas to South Arkansas. As a result of paid and unpaid promotion the event was a huge success and the venue exceeded capacity with more than 350 attendees.

Following the event, post-coverage appeared on Today's THV Channel 11 with interviews from AMHC Medical Director, and Summit Event Facilitator from UAMS College of Public Health. The Arkansas Democrat Gazette published an article titled, "Aiding health of poor is key, 3 say." The Arkansas News Bureau also published an article titled, "Science must guide public health former surgeons general say."

Summit video of the opening session is also available on YouTube to allow attendees to relive the experience.

AMHC closed out the month of April with its fourth quarterly **Health Fair and Public Forum** on April 24 at the Jones Center for Families in Springdale. More than 300 residents from the Springdale community including the Marshallese and Hispanic communities received free screenings. The event was covered by La Prensa, the only weekly Spanish newspaper in Northwest Arkansas. The Spanish radio station KZRA-AM also provided coverage of the event and entertainment to health fair participants. Press releases were sent to all major media outlets in Northwest Arkansas and surrounding areas. Ads ran from April 14 to April 22 in Northwest Arkansas Times, La Prensa, Hola Arkansas and Springdale Morning News.

May:

A press conference was held May 19 on the campus of the University of Arkansas for Medical Sciences to announce the **Health Care Workforce Diversity Endowed Scholarship** for the UAMS College of Nursing funded by AMHC. This scholarship was created in an effort to address a shortage of minority nurses teaching in the state's nursing programs. Hola Arkansas published an article in their May issue and UAMS posted an article and photos of the event on their web site.

An article "**Health care reform needs our support,**" written by Dr. Creshelle Nash was published in the May issue of Stand News. The article emphasizes the need for Arkansans to voice their support of health care reform to Arkansas legislators, policy makers and

health care providers. That same issue featured AMHC Executive Director, Idonia Trotter as Outstanding Person. The article chronicled her journey from gospel radio disc jockey to executive director of AMHC.

Also in May, AARP announced a partnership with AMHC to promote a series of health screenings and public forums this year in their magazine.

June:

AMHC sponsored the **AMDPA 117th Annual Scientific Meeting** held June 10-12. A panel featuring Arkansas Surgeon General, Dr. Joe Thompson; Dr. Glen Mays, UAMS; and AMHC Medical Director, Dr. Creshelle Nash discussed how the recent Health Care Reform Bill will affect Arkansans. Ads were placed in Arkansas Democrat Gazette that ran June 6 and 9. Dr. Nash appeared on Today's THV with Stephanie Bryant and Dr. Mays was interviewed on KARN 102.9 prior to the event.

Also on June 10, to ensure AMHC is reaching its target audiences and the mission of the Commission is clearly conveyed, two focus groups (one African American and one Hispanic) were conducted in Central Arkansas. The focus groups consisted of 10 to 15 participants. These focus groups revealed:

1. Health literacy must be addressed and overcome
2. Traditional and non-traditional communication tactics should be utilized
3. Information from the Arkansas Minority Health Commission must be developed in a manner that will best resonate and be well-received by the target audience
4. Brand clarification is a must
5. Not only should the brand be clarified but also the services provided by AMHC

As a result of these focus groups, the Communications Director has more of an understanding of how to reach the target audiences in the most cost effective and efficient way.

As part of our HIV awareness initiative, the AMHC launched the **"Take Responsibility" bus campaign** on June 15. This campaign consists of 20 buses on various routes in and around the Little Rock area and will last until August 15. With this campaign AMHC seeks to increase awareness of the importance of HIV testing in minority communities.

The **Arkansas HIV/AIDS Minority Task Force** held a public forum June 22 in **El Dorado**. This public forum was open to all residents in and around the El Dorado area. In this forum, the taskforce discussed the Arkansas State Healthcare Access Research Project or SHARP Report and revealed recommendations for reducing HIV/AIDS in Arkansas's minority populations. A press release was sent to area media outlets prior to the event. El Dorado News Times covered the event and published an article June 23.

The AMHC and ADH HIV/STD/Hepatitis C Section held a press conference on June 25 at the First Baptist Church, 811 S.A. Jones Drive in North Little Rock. AMHC and ADH announced more than \$600,000 in grant awards to community-based organizations to fight HIV/AIDS and highlight **National HIV Testing Day**. Speakers included ADH representative, Dr. Nate Smith; faith-based organization representative, Yolanda West;

and Senator Tracy Steele. A press release was sent to all major television outlets. A 60-second radio spot ran for two weeks prior to the event inviting faith-based organization to become HIV screening sites. Prior to the event, Today's THV announced the press conference and AMHC testing activities.

Television stations in attendance were Today's THV, Fox 16 and KARK Channel 4. The event was covered by all attending television stations and was picked up by the Missouri-based television station, Ozark First. AMHC HIV testing activities also caught the attention of bloggers whose focus is on HIV/AIDS. As part of our National HIV Testing Day activities each location was given **"What's Your Status" t-shirts** for each attendee that received an HIV test.

Through these communications activities the AMHC is sure to increase the awareness of public health and minority health issues as well as garner support of AMHC activities.

PILOT PROJECTS

Pilot Projects undertaken by the AMHC are established to test new strategies, materials, hypothesis and theories related to the health of minorities in the state. These pilot projects are designed to utilize evidence-based data, programs and materials in determining what strategies may be appropriate for use by and dissemination among minority populations with an eye towards reducing and, ultimately, eliminating health disparities in Arkansas. The following are programs currently undertaken this reporting period by AMHC as strategic pilot projects to address the aforementioned;

The Jones Center for Families, Inc. Gaps in Services- Northwest Arkansas

The Gaps in Services to Marshallese Task Force, requested funding from the AMHC to develop a handbook to help with the acculturation process for citizens relocating to Arkansas from the Republic of the Marshall Islands. The handbook is available in print and on the Internet in both English and Marshallese. Agencies represented on the Gaps in Services collaboration have been invited to have a link to the handbook on their respective websites.

Northwest Arkansas has the largest number of Marshallese citizens living in the continental United States. The estimated population of Marshallese in Northwest Arkansas ranges from 6,000 - 10,000.

The goal of this project is to provide to migrating citizens access to quality health care through healthier lifestyles and awareness of services within Arkansas' health care system. Helpful information regarding housing, finances, driving and education is included to help with the transition.

The English version of the handbook, "Living in Arkansas" was unveiled in November 2009 during a press conference at the Jones Center for Families in Springdale, Arkansas. Thirty-five (35) attendees from various health/human services agencies.

The Gaps in Services to Marshallese Task Force sponsored a luncheon on April 23rd to share with the local Marshallese the results of the 2009 Marshallese Health Survey

conducted by the ADH and to announce the “unveiling” of the Marshallese translated version of the handbook. Following the luncheon and presentation, six focus groups took place with 100 Marshallese community members. An action plan was put into place as a result of the focus group responses.

One thousand, two hundred twenty-five (1,225) copies of the Marshallese version of the handbook were printed. Initial copies were sent to: the AMHC (40 copies), the Jones Center Community Outreach Coordinator (20 copies) and the Washington County Health Department (2 copies). A television and DVD player, located at the Consulate, was purchased with the remaining grant funds. Upon completion of the DVD, Consul General and her staff will conduct on-site orientations for newcomers. Each participant will receive a handbook and a DVD. Upon completion of the orientation, participants are asked to complete a brief survey rating the helpfulness of the information provided.

Although the formal agreement between AMHC and Gaps in Services has reached its end date of June 30, 2010 an evaluation process has been established to entail the following components and will take place at six months and one year. The following information will be tracked:

- Number of printed handbooks (English and Marshallese) distributed to health and human services agency and the Marshallese community
- Number of hits of on-line downloadable version of the handbook through the Jones Center for Families, Inc. and the Hawaiian Yakowe.net websites
- Distribution of the DVD and Marshallese version of the handbook through the Consulate
- Pre and post questionnaire of the distribution for the printed handbook, on-line downloadable version of handbook, and DVD
- Community Base Focus Groups
- Non-administrative health care and human service providers focus groups
- Number of referrals to the services listed in the handbook
- Documentation of success stories with pictures/videos from the Marshallese community who have successfully utilize the health care and the other pertinent resources in the handbook

Arkansas Aging Institute-Delta Center on Aging, Healthy Lifestyles Challenge

The goal of this project is to improve the lifestyle of 40 patients of the Delta Center on Aging’s Senior Health Clinic by helping each patient demonstrate improvement in at least one of the areas of weight, blood pressure, lipid levels, glucose level or physical activity. The program is a nutritional, physical activity and disease self-management program that focuses on the elderly population under physician supervision. This intervention will be piloted to determine effectiveness and feasibility of dissemination of program to additional Centers on Aging in minority areas.

This program will utilize evidence-based medicine: nutrition, exercise, education, group support, and accountability. It is unique in that it involves exclusively older adults in a

program under physician supervision. The program is individualized for each participant and allows monitoring of health benefits besides just weight with the focus on developing a healthy lifestyle. There is no cost to the participants.

The Healthy Lifestyles Challenge Program plans to implement activities and events to enhance the lives of 40 senior patients as follows:

- Determine baseline for weight, exercise, blood pressure, lipid levels, and glucose levels
- Individualized evaluation by registered dietitian for nutritional needs
Individualized evaluation by nurse educator for exercise needs
- Physician review of evaluation/plan
- Conduct weekly support sessions
- Conduct exercise classes
- Conduct nutrition counseling
- Conduct monthly Healthy Benefits Cooking Class
- Conduct Self Management Education classes for diabetes, heart failure, and hypertension

The registered dietitian resigned January 15, 2010 which postponed the start of the program. Although Arkansas Aging Initiative had requested the Healthy Lifestyles Challenge Program delay implementation until UAMS Internal Review Board (IRB) approval, recruitment of patients started in March. The IRB approval is expected on July 8, 2010. Ten participants (6 African American; 4 Caucasian; 9 women; 1 man) were enrolled in the first quarter of the 12 month program.

Upon approval from UAMS IRB, the Arkansas Aging Initiative and the Healthy Lifestyles Challenge Program, AMHC and Arkansas Aging Initiative will hold a Press Conference at the Crittenden Regional Hospital in West Memphis announcing the program and its unique features to help seniors develop a healthier lifestyle.

AMHC continues to provide technical support to the Healthy Lifestyles Challenge Program in order to meet the goals outlined in the contract established by AMHC and Arkansas Aging Institute - Delta Center on Aging.

University of Arkansas for Medical Sciences Delta Area Health Education Center (AHEC) Navigation Project

AMHC and The Delta Area Health Education Center (Delta AHEC) entered in a Memorandum of Agreement (MOA) to examine and address health disparities in the 7 county service area of the Delta AHEC region. The 7 counties are: Chicot, Crittenden, Desha, Lee, Monroe, Phillips, and St. Francis. Multiple public forums and data gathered from the community have identified a common problem of the lack of utilization of existing services. The Delta AHEC will seek to improve health through increased utilization of health services by minority community members.

The Delta AHEC plans to establish goals to increase the utilization of services by conducting focus groups and interviews in the community to determine why minority residents do not utilize existing health and human service resources. They will develop a plan for a mobile “1-stop-shop” of resources that can move to different community locations within the 7 county areas. The “1-stop-shop” will develop a plan for this project and evaluate the program based on the findings gathered by the Community Facilitator/Liaison and the UAMS COPH preceptor student.

To date, there have been 7 focus groups with 99 attendees and 2 key-informant interviews. All attendees have participated in questionnaires and surveys, which will be analyzed and reported to AMHC to show why minorities do not utilize the existing services in the Delta region. Upon the release of the findings, this project will be “piloted” for its effectiveness to “bridge the gap” between the minority community and health and human services in the Delta region.

The original end date for this project was May 2010. Due to additional time needed by the Community Facilitator/Liaison and the UAMS COPH preceptor student to summarize and analyze the findings from the focus groups and the key-informant interviews, a request for a no-cost extension is pending. Once approved, it will take 219 hours or 11 weeks to complete, as the Community Facilitator/Liaison works part-time for this project.

AMHC continues to provide technical support to the project as the program progresses to meet the goals outlined in the contract established by AMHC and Delta AHEC.

Other “Pilot Projects”

The **HIV/AIDS Outreach Initiatives** and **Sickle Cell Outreach Initiatives**, although they are significant Outreach and community awareness, education programs at AMHC, are also pilot projects established to test new strategies, materials, hypothesis and theories. See pages 6-8 to review.

Southeast Targeted Area Resources for Health (STAR.Health)

STAR.Health is a pilot program, in Southeast Arkansas covering Chicot, Desha, and Lincoln counties that is showing a new way for delivering public health programs and services in local communities. One in which the health agency works in specially-defined partnerships with other state agencies (Human Services, Education, Economic Development, UA Cooperative Extension), as well as with local citizens, hospitals, doctors, schools, churches, businesses and civic groups. In this pilot project, the Arkansas Department of Health (ADH) recruits and trains Community Health Workers (CHW) from and for three counties with very high minority population ratios. All lie in Southeast Arkansas where there are also low levels of traditional health providers/resources.

The STAR.Health involves all aspects of the community that effect health such as economic, education, and health care access. By linking an array of ADH and other organizational and state agency resources with leadership that already exists in these local communities, STAR.Health maximizes efforts toward its goal of health improvement.

Two important aspects of the STAR.Health initiative include its lay CHWs and AmeriCorps volunteers. Both are used to expand the reach of educational and service activities promoting healthy behavior, as well as provision of individualized assistance to persons in need.

During this period, the CHWs provided services to 861 total persons. Approximately 65% of those contacts were African American, 2.5% were Hispanic and 81% were female. Since the beginning of the program in June 2009—4,905 persons have been served. AmeriCorps volunteers have also assisted in the promotion of several health-related events in the area.

AMHC in conjunction with ADH are assessing the qualitative and quantitative data provided by this pilot on an on-going basis. The steering committee met June 29, 2010 and will continue to meet quarterly. The CHWs met June 21, 2010. They meet monthly and continue to receive in-service trainings.

COLLABORATION/COORDINATION

During this reporting period, the following collaborations/coordinated efforts have been aggressively pursued;

- **All of the above and below** collaborative partnerships mentioned throughout this quarterly report document.
- **AMHC's Minority Health Summit 2010** – The Summit was scheduled April 15, 2010 at Philander Smith College. The theme was “Healthy People 2020: Health Equity for ALL Arkansans”. The Summit was a huge success with approximately 350 attendees. The highlight of the event was having 3 former Surgeons General (Dr. Antonia Novello, Dr. Joycelyn Elders, and Dr. Richard Carmona) speak at the Summit's opening panel discussion. This collaborative effort brought in a broad range of stakeholders in Arkansas' public health community. Included in this collaboration were the AMHC, Office of Governor Mike Beebe, Philander Smith College, University of Arkansas for Medical Sciences (UAMS): Fay W. Boozman College of Public Health and Center for Diversity Affairs, AR Department of Health (ADH) – Office of Minority Health, University of Arkansas Fayetteville – College of Education & Health Promotion and Arkansas Migrant Education Program, Boston Mountain Education Cooperative, AARP, Arkansas Foundation for Medical Care, Medco Health Solutions, Inc., Arkansas Cancer Coalition, Asian Pacific Coalition for A Smoke Free Arkansas, AHEC Northwest, Senior Health Insurance Information Program, Arkansas Advocates for Children & Families, Arkansas Relay Service, DHS/Division of Aging & Adult Services, Spit for the Cure, Baptist Health, UAMS Library, Arkansas State Lottery, ICAN, University of Arkansas, Say It Loud! Readers & Writers, K L & Associates, Arkansas Association for the Deaf, Lilly, Inc., Friends of Blanche Lincoln's Office, and ADH-STD section.
- **Minority Health Month**
The AMHC offered an opportunity for community-based, non-profit organizations across the state to apply for sponsorship of events planned during the month of April that focus on health promotion and disease prevention in minority

communities. The twelve organizations listed below were funded to promote health education and awareness for hypertension, diabetes, smoking cessation, mental health, physical fitness and nutrition as well as provide free physical examinations and screenings.

- UAMS Delta AHEC - Phillips
- Beta Pi Omega Chapter of AKA - Pulaski
- Arkansas Community Dispute Resolution Center - Pulaski
- Women's Council on African American Affairs, Inc. - Pulaski
- Asociacion de Mujeres de Arkansas/AR Association of Women of Arkansas - Pulaski
- Hearne Centre Health and Education, LLC - Pulaski
- Arkansas River Education Service Cooperative - Jefferson
- Patient First of Arkansas, Inc. - Pulaski
- Freedom for Youth, Inc. - Phillips
- Greater First Baptist Outreach Ministry - Phillips
- Conway Interfaith Community Clinic - Faulkner
- Phoenix Youth and Family Services, Inc. - Ashley

Health Disparities Service Learning Course:

The Arkansas Health Disparities Service-Learning Collaborative (ARHDSLCL) is collaboration between UAMS College of Public Health Office of Community Based Public Health and AMHC and University of Arkansas at Little Rock (UALR), Department of Sociology. The purpose of this collaboration was to develop a service learning course that focuses on the problem, theory, and solutions to racial and ethnic health disparities. This effort uses service learning and community campus partnerships to eliminate those disparities.

This quarter we presented along with a student and community partner at a national conference entitled Community Campus Partnerships for Health in Portland, Oregon on May 10th, 2010. The presentation was entitled "Development and Early Experience with a Masters Level Public Health Service learning Course on Racial and Ethnic Health Disparities". We are currently developing an academic paper based on our experiences and evaluation for dissemination.

RESEARCH

Arkansas Racial and Ethnic Health Disparity Survey

This project continues AMHC's effort to increase awareness about health disparities and diseases that affect Arkansas minorities. This work is a continuation of the collaboration and work with the UALR Survey Center and the Pulaski County Racial Attitudes Survey focusing on Health and Health Care in Pulaski County. The survey is a statewide survey that examines multiple health and health care issues in the community. Some areas examined include health beliefs, health literacy, access to health care, quality health care, cultural competency and medical mistakes.

During this period there has been ongoing analysis and development of partnership with Arkansas Center for Health Improvement to support data driven policy recommendations.

Marianna Examination Survey on Hypertension (MESH)

The MESH is a population-based representative household examination survey of blood pressure and cardiovascular disease risk factors in adults in Marianna, AR. It was initiated in June 2005 and completed May 2007 with a total of 473 participants completing the survey and 262 completing labs. MESH originated as an effort to assess the rate of hypertension of those at risk for cardiovascular disease, diabetes and stroke in the city population of Marianna focusing on diagnosed as well as undiagnosed cases.

Currently, AMHC along with committee members representing the College of Public Health, Office of Public Health, and ADH are designing multiple factsheets to show the impact of hypertension and diabetes among the minority population along with the socio-environmental factors that potentially influence health.

During this quarter, we have continued to make progress towards the goals of the project. Specifically 1) we are planning local release of the project report with Lee County Revitalization Project to support their community improvement process 2) we have joined the Lee County Revitalization Project health subcommittee 3) Finally, the committee members are completing a methodology paper and papers focusing on stress and depression and hypertension.

Export Pilot

This project is in collaboration with the UAMS College of Public Health Center for Health Disparities Research. Physician practice based methods to enhance adherence to practice guidelines and improve overall quality of care have been examined in a variety of prevention and treatment arenas, however there is little research in using these methods to reduce health disparities by improving overall quality of care. Therefore, formative research is critical to understand how best to approach practices to engage them in promoting appropriate care for diabetes and CVD among minority patients and how best to facilitate enhanced adherence to established practice guidelines so that health disparities are reduced.

In this reporting period, we have maintained Institutional Review Board approval. We are also restructuring given recent health care reform efforts.

PUBLIC POLICY

Arkansas Colorectal Cancer Prevention, Early Detection and Treatment Program

The intent of this legislation was to create a program analogous to the BreastCare program. It is a state funded program to provide screenings for underinsured and uninsured low-income Arkansans. A diverse group of advocates worked on this legislation including but not limited to UAMS Winthrop P. Rockefeller Cancer Institute, UAMS College of Public Health, Arkansas Department of Health, Department of Health and Human Services, American Cancer Society and AMHC. AMHC participated in the bill creation and mark up sessions prior to introduction at the Arkansas General Assembly. This bill sponsored by Senator Joyce Elliot, was passed and received appropriation in the Arkansas 2009 General Assembly. There has been no additional activity this quarter.

Acute Stroke Task Force

The Arkansas Acute Stroke Care Task Force was established through Act 663 during the regular session of the 85th General Assembly. Act 663 designates twelve members to be appointed by the Director of the Arkansas Department of Health to the Task Force representing the following organizations and constituencies: ADH, American Heart Association, AMHC, The Arkansas Hospital Association, Arkansas Foundation for Medical Care, University of Arkansas for Medical Sciences' Fay W. Boozman College of Public Health, Division of Medical Services of the Department of Human Services, emergency medical services, Arkansas Medical Society, medical insurance industry, community at large, and the Arkansas Medical, Dental and Pharmacy Association. The Stroke Care Task Force is charged with coordinating statewide efforts to combat the debilitating effects of strokes on Arkansans, to improve health care for stroke victims. During this quarter, there has been no activity.

Health Care Reform

The national debate about health care reform is critical to health improvement efforts in Arkansas. During debate, the AMHC saw that minority health issues were not represented in the discussions. Minority communities did not have a voice in the process and had concerns about its meaning. During this process, AMHC developed guiding principles and addressed myths and concerns of our community. During this reporting period, we have monitored health care reform on a daily basis and released policy statements to inform minority communities and other stake holders with a goal of eliminating racial and ethnic health disparities. We have also participated in and hosted community discussions on health care reform including with Arkansas Medical Dental and Pharmaceutical Association on June 10, 2010.

Arkansas Minority Health Consortium

No activity during this reporting period.

EXTERNAL FUNDING

During this period, AMHC received approximately \$24,000 in outside funding related to the Arkansas Minority Health Summit sponsorships and vendors. Sponsorships and vendor receivables include:

Sponsors

AARP Arkansas
ADH - Office of Minority Health
Arkansas Foundation for Medical Care
University of Arkansas

Exhibitors

Arkansas Cancer Coalition
Asian Pacific Coalition for A Smoke Free Arkansas
AHEC Northwest
Senior Health Insurance Information Program

Arkansas Advocates for Children & Families
Arkansas Relay Service
DHS/Division of Aging & Adult Services
Spit for the Cure
Baptist Health
UAMS Library
Arkansas State Lottery
ICAN
University of Arkansas
Say It Loud! Readers & Writers
K L & Associates/UAMS
Arkansas Association for the Deaf
UAMS Fay W. Boozman COPH

Other (Ads, etc.)

Lilly, Inc.
Friends of Blanche Lincoln's Office
ADH-STD section

RAND RECOMMENDATIONS - 2008

The AMHC has adhered to the recommendations as suggested by RAND. The site visit which occurred in April, 2008 rendered the following recommendations. The Recommendations are listed with the Commission's response underneath:

• **RAND Recommendation 1: Finalize strategic plan for FY 2008-FY 2011**

The five year strategic plan has been completed with goals and objectives defined. This document will be continually reviewed and updated as needed. By the end of the fourth quarter, historical information on the AMHC will be added to the strategic plan to make it a more comprehensive document. The Commission is currently developing system-wide work plans and evaluative systems. Originally, AMHC established a deadline of December 11, 2009 to finalize its work plans and internal evaluative systems but this has been extended to June 2010. The AMHC staff met with Dr. Martha Phillips on March 22, 2010 and reviewed evaluation processes and work plans.

• **RAND Recommendation 2: Narrow its focus on one or two health concerns**

The Commission voted to follow RAND recommendations and focus its health concerns on two critical health disparities disease states; HIV/AIDS Outreach Initiative and Sickle Cell Outreach Initiative. On April 23, 2010, the Board of Commissioners voted to add Nutrition & Fitness as a key focus.

• **RAND Recommendation 3: Examine the professional contract process and outcomes**

AMHC has examined the professional service contract and elected to utilize the RFP process as a better mechanism to fund pilot projects in line with AMHC focus areas. AMHC has not eliminated the professional contract

process and will continue to use it as a tool to identify existing programs that AMHC may pilot to meet its mission and goals.

- **RAND Recommendation 4: Diversify the AMHC Board**

Since RAND made this recommendation, the Governor appointed a Hispanic female and a Caucasian female. In addition, the House of Representative House Leader appointed a Hispanic male. Yet, more diversity is still needed. The Commission is currently comprised of eight African Americans, three Hispanics and one Caucasian. The AMHC administration has requested that the Governor, Senate Pro Tempore and Speaker of the House consider more diversity for future appointments.

- **RAND Recommendation 5: Expand the Afterschool Children Nutrition Education & Exercise Program (ACNEEP)**

The program has been discontinued.

- **RAND Recommendation 6: Improve program monitoring and evaluation.**

AMHC ensures that each and every programmatic area and internal systems have established appropriate systemic evaluative processes. AMHC is currently addressing evaluative and monitoring in its strategic planning processes as to institutionalize these critical areas of the Commission's work.

- **RAND Recommendation 7: Seek supplemental funding for programs and services**

AMHC is committed to developing its capacity and process for seeking external funding. This reporting period demonstrated some improvement as AMHC pulled in sponsorship and vendor support for the Arkansas Minority Health Summit.

- **RAND Recommendation 8: Strategically fund pilot and demonstration programs**

In FY08 and FY09, AMHC funded seven (7) HIV/AIDS pilot programs which are currently ongoing. They were strategically selected within the framework of a competitive RFA process. In FY10, the Commission funded five (5) HIV/AIDS pilot programs. In addition to the HIV/AIDS programs, the Commission has also funded thirteen (13) pilot projects in FY10.

- **RAND Recommendation 9: Collaborate with other tobacco settlement programs**

AMHC has forged a "one-stop shop" concept with the Delta AHEC to improve health in seven Delta counties through increased utilization of health services by minority community members. In addition, AMHC is collaborating with the **Arkansas Aging Initiative** to develop intervention programs for senior residents of the Delta Center on Aging Senior Health Clinic with a nutritional, physical activity and disease self-management program that focuses on the elderly population under physician supervision. AMHC is also continuing to work with the **UAMS College of Public Health** through teaching and research activities focused on racial and ethnic

disparities. AMHC is developing a new collaborative relationship with TPCP in bringing about heightened awareness among those infected with HIV/AIDS of the increased risks associated with the combination of HIV and Smoking.

AMHC and ADH Minority Initiative Sub-recipient Grants Office (MISRGO) collaborated in support of the AMHC Arkansas Minority Health Summit and the UAPB MISRGO Clearing the Air in Communities of Color. Each organization shared information about the others event to their network of partners and grassroots constituency.

ARKANSAS BIOSCIENCES INSTITUTE

PROGRAM OVERVIEW & GOALS

Arkansas Biosciences Institute, the agricultural and biomedical research program of the Tobacco Settlement Proceeds Act, is a **partnership of scientists** from Arkansas Children's Hospital Research Institute, Arkansas State University, the University of Arkansas-Division of Agriculture, the University of Arkansas, Fayetteville, and the University of Arkansas for Medical Sciences.

In accordance with the Tobacco Settlement Proceeds Act, the purpose of the Arkansas Biosciences Institute is to conduct:

- **Agricultural research** with medical implications;
- **Bioengineering research** that expands genetic knowledge and creates new potential applications in the agricultural-medical fields;
- **Tobacco-related research** that identifies and applies behavioral, diagnostic, and therapeutic knowledge to address the high level of tobacco-related illnesses in Arkansas;
- **Nutritional and other research** that is aimed at preventing and treating cancer, congenital and hereditary conditions, or other related conditions; and
- **Other areas of developing research** that are related or complementary to primary ABI-supported programs.

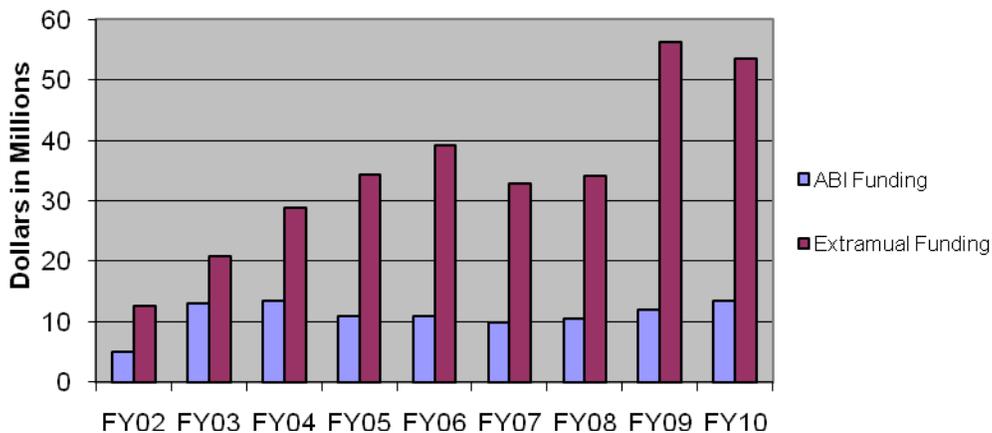
PROGRAM PROGRESS

Leveraged Funding

The five member institutions use their ABI support to attract extramural funding to Arkansas. The Arkansas Children's Hospital Research Institute recently announced a new award from the National Institutes of Health (NIH) to Dr. Tamara Perry. The \$2.2 million, five year project, Reducing Asthma Disparities in Rural Areas, is designed to study whether school-based telemedicine sessions with medical doctors can help rural students control their asthma. Arkansas State University recently reported two new Small Business Innovation Research (SBIR) Grants from the US Department of Agriculture to research swine flu and other viral diseases and from NIH to research therapeutic proteins produced from plant cells. The University of Arkansas - Division of Agriculture announced two new awards of more than \$400,000 from the US Department of Agriculture for research in reducing *Salmonella* bacteria.

Overall ABI-related extramural funding is tracked annual for all institutions combined. The estimated extramural funding for FY2010 is \$53.6 million. Since inception, ABI-related extramural funding has totaled more than \$312 million from federal agencies and foundations.

Figure 1: ABI and Extramural Funding



Collaborative Research

The Arkansas Biosciences Institute and the National Center for Toxicological Research (NCTR) hosted the ABI-NCTR Joint Workshop on Stem Cell Research in April for approximately 65 researchers. The goal of the workshop was to bring together Arkansas-based scientists working in the field of stem cell research in order to develop new research collaborations and possible funding proposals for NIH submission.

Research Updates

Arkansas State University recently announced that Drs. Maureen Dolan and Fabricio Medina-Bolivar received an US Patent for their ABI-supported research on “Production of Stilbenes from Plant Hairy Root Cultures.” Their research relates to a new production system of stilbenes, a natural product with a multitude of health benefits in the areas of diabetes, aging, cancer, and neurodegenerative diseases.

ABI support was used in part to recruit six new researchers to Arkansas:

- Dr. Jason Zhou – Cell Biologist, Department of Biology
Arkansas State University
- Dr. Clint Kilts – Professor, Department of Psychiatry
University of Arkansas for Medical Sciences
- Dr. Craig Forrest – Assistant Professor, Department of Microbiology and Immunology
University of Arkansas for Medical Sciences
- Dr. Chandra Carpenter – Program Director, Department of Biology
Arkansas State University

- Dr. Brandon Kemp – Environmental Engineer, College of Engineering
Arkansas State University
- Dr. Daohong Zhou – Professor, Department of Pharmaceutical Sciences
University of Arkansas for Medical Sciences

Upcoming Events

- ABI Fall Research Symposium – September 29
- Annual BioNanoTox Symposium (supported in part by ABI) – November 4-5
- ABI Quarterly Board Meeting – January 2011 (date TBD)

RAND RECOMMENDATIONS

RAND Recommendation 1: Maintain at least the current level of total grant funding.

Program Response: ABI member institutions continue to leverage their ABI funding to help develop proposals for and secure extramural funding from federal agencies and foundations. Extramural funding for FY09 totaled \$56.3 million from sources such as the US Department of Agriculture, the National Science Foundation, and the National Institutes of Health. After a low in FY07 (\$9.9 million), ABI funding has been increasing, allowing more researchers to receive research support from ABI. Extramural funding in FY2010 is estimated to be \$53.6 million.

RAND Recommendation 2: Increase applied research that will have community impacts and increase collaboration with local businesses.

Program Response: ABI-related patent activity is a good indicator of moving research from the laboratory to the workplace. Patent filings and patent awards to ABI-supported investigators are tracked annually: Eleven patent filings or awards in FY08 and thirteen in FY07. Patent information for FY09 shows that ABI-supported investigators received three patents awards and submitted for eight additional patents; patent information for FY10 will be available in August.

RAND Recommendation 3: Bring ABI scientific and research capabilities to pilot or community-based programs.

Program Response: Outreach activities are the bridge between ABI-supported research and the communities. While the purpose of ABI is to conduct research in the five areas listed above, ABI-supported investigators are presenting seminars on their work and giving many elementary students, secondary students, and community organizations an opportunity to learn about ABI-supported research through both didactic and hands-on experiences.

MEDICAID EXPANSION PROGRAM

PROGRAM OVERVIEW & GOALS

The goal of the Medicaid Expansion program is to create a separate and distinct component of the Arkansas Medicaid Program that improves the health of Arkansans by expanding health care coverage and benefits to populations as established by Initiated Act 1 of 2000.

PROGRAM PROGRESS

Pregnant Women Expansion

- Increased the income eligibility limit from 133% to 200% of the federal poverty level
- Program implemented November 1, 2001
- Cumulative number of program eligibles –

April	16,389
May	16,559
June	16,753 (44.70% minority)

Hospital Benefit Coverage

- Increased the number of benefit days from 20 to 24 and decreased the co-pay on the first day of hospitalization from 22% to 10%.
- Program implemented November 1, 2001

65 and Over Expansion (AR Senior)

- Incrementally increase coverage to the 65 and over population
- Implemented November 1, 2002 at 75% of QMB Level
- Increased to 80% of QMB Level effective January 1, 2003
- Current program participants –

April	4,374
May	4,409
June	4,436 (31.00% minority)

Age 19 to 64 Expansion (ARHealthNetworks)

- This population will be covered through a federal waiver program which provides eligible small employers and sole proprietors with health coverage.
- The ARHealthNetworks Program was implemented in January 2007.

Program Description:

Every 12 months ARHealthNetworks will cover the following:

- *7 Inpatient Days Per Year*
- *2 Major Outpatient Services per Year, including emergency room and major services performed in the office.*
- *6 Provider Visits Per Year*
- *Two Prescriptions Per Month*
- *Maximum Annual Benefit of \$100,000*
- *Renewable each 12 months*

Deductible and Co-Insurance for ARHealthNetworks

- *\$100 annual deductible (does not apply to office visits & Rx)*
- *After deductible, 15% co-insurance will be required*
- *\$1,000 maximum out of pocket annually, including deductible*
- *NovaSys Health providers must be used for benefits to be paid (including ER)*
- *Ongoing discounts apply after benefits are exhausted*

Pharmacy Benefits for ARHealthNetworks

- Two Monthly Prescriptions
- Subject to Co-pay (but not deductible)
- \$5 Generic
- \$10 Brand Formulary
- \$30 Brand Non Formulary
- Program administered by Express Scripts
- Wide choice of pharmacies (no mail order)

Current program enrollees -	April	9,939
	May	10,286
	June	10,668

Expenditures for April 1, 2010 through June 30, 2010 and Proportion of Leveraged Medicaid Dollars

	Total	Tobacco	Federal
Pregnant Women	\$ 1,469,525	\$ 276,565	\$1,192,960
In-Patient Hospital	\$ 2,283,900	\$ 429,830	\$1,854,070
ARSeniors	\$ 1,041,410	\$ 195,993	\$ 845,417
ARHealthNetworks	\$ 6,270,432	\$1,444,458	\$4,825,974
Sub-Total Program	\$11,065,267	\$2,346,846	\$8,718,421
Administration	\$ 258,784	\$ 129,392	\$ 129,392
Total	\$ 11,324,051	\$2,476,238	\$8,847,813

RAND RECOMMENDATIONS

RAND Recommendation 1: Develop new programmatic goals and revisit the process indicators that track progress toward the goals.

Program Response: The Department has developed new program goals for each of the Medicaid Expansion initiatives to more accurately reflect post-implementation outcomes. DHS is continuing to work with RAND to establish the evaluation baselines and process indicators to allow for more accurate tracking of progress toward the new goals.

RAND Recommendation 2: Initiate an outreach campaign to inform both potential enrollees and providers about the availability of the Medicaid Expansion Programs.

Program Response: The Department has suspended the design and/or implementation of new MEP outreach efforts pending the development of a strategy to “Bend the Arkansas Medicaid Cost Curve” to operate within future funding projections.

RAND Recommendation 3: Allocate funds to educate newly enrolled and current enrollees in the Pregnant Women’s Expansion program and the AR-Seniors program regarding the services they are eligible to receive under their respective programs.

Program Response: Changes at the national level to increase enrollment in the QMB Program will increase participation in the ARSeniors Program for those with incomes below 80% of the Federal Poverty Level. Arkansas has started receiving a monthly tape from SSA with the names of individuals who were found eligible for

the Medicare Part D Low Income Subsidy. Letters are being sent to these individuals to inquire as to their interest in applying for the QMB Program. The letter will advise applicants of the expanded service package under the ARSeniors Program. Response to the letter continues to be low.

RAND Recommendation 4: Develop partnerships with some of the other tobacco settlement programs or other state or local organizations to educate and conduct outreach in communities.

Program Response: DHS agrees with the RAND recommendation to develop partnerships with other tobacco settlement programs and organizations to more effectively promote the Medicaid Expansion Initiatives. The agency continues to participate in the collaborative meetings sponsored by the ATSC to identify potential opportunities for “partnering” with other entities. The Department will be looking for opportunities to more fully utilize websites and links to promote the Medicaid Expansion programs.

ATSC PROGRAM FUNDING SUMMARY

The separate financial summary is prepared by the Arkansas Bureau of Legislative Research on a regular basis and reported to the General Assembly. The following financial report covers through the period of this quarterly program report.

Tobacco Settlement
Summary of Income, Expenses and Balances

INCOME

<u>Month To Date - July 2010</u>	Initial Balance	MSA Deposits	Investment Income	Ending Balance
Arkansas Healthy Century Trust Fund	\$ 128,359,592	\$ -	\$ 337	\$ 128,359,929
Tobacco Program Pool	\$ 104,967,855	\$ -	\$ 1,582	\$ 104,969,437
Tobacco Debt Service Fund	\$ -	\$ -	\$ -	\$ -
Total	\$ 233,327,446	\$ -	\$ 1,920	\$ 233,329,366

Fiscal Year To Date - FY '11

Arkansas Healthy Century Trust Fund	\$ 128,359,592	\$ -	\$ 337	\$ 128,359,929
Tobacco Program Pool	\$ 104,967,855	\$ -	\$ 1,582	\$ 104,969,437
Tobacco Debt Service Fund	\$ -	\$ 5,000,000	\$ -	\$ 5,000,000
Total	\$ 233,327,446	\$ 5,000,000	\$ 1,920	\$ 238,329,366

Life - 1/11/01 - 7/31/10

Arkansas Healthy Century Trust Fund	\$ -	\$ 100,000,000	\$ 27,718,650	\$ 127,718,650
Tobacco Program Pool	\$ -	\$ 476,427,150	\$ 13,391,120	\$ 489,818,270
Tobacco Debt Service Fund	\$ -	\$ 45,000,000	\$ -	\$ 45,000,000
Total	\$ -	\$ 621,427,150	\$ 41,109,769	\$ 662,536,920

FUND BALANCES

07/31/10

TSA Healthy Century Trust Fund	\$ 128,982,176
TSB Tobacco Settlement Program Fund	\$ -
TSC Tobacco Settlement Commission	\$ 6,668,889
TSD Prevention & Cessation Program Fund	\$ 6,015,498
TSE Targeted State Needs Fund	\$ 8,122,702
TSF Biosciences Institute Fund	\$ 10,812,299
TSG Medicaid Expansion Fund	\$ 69,334,384
Total	\$ 229,935,948

Tobacco Settlement
Summary of Income, Expenses and Balances

EXPENSES

<u>As of 07/31/10</u>	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	TOTAL
TSB0000 Tobacco Settlement Program Fund	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
TSC0200 Tobacco Settlement Commission	\$ 3,149	\$ 670,891	\$ 768,502	\$ 654,272	\$ 453,531	\$ 806,779	\$ 975,671	\$ 1,153,383	\$ 1,258,661	\$ 28,381	\$ 6,773,220
TSD0100 Prevention & Cessation	\$ 2,274,755	\$ 13,624,294	\$ 12,895,637	\$ 11,610,903	\$ 9,744,413	\$ 12,077,561	\$ 10,507,063	\$ 12,046,511	\$ 12,621,439	\$ 722,262	\$ 98,124,836
TSD0200 Prevention & Cessation Minority Comm.	\$ 214,893	\$ 1,666,806	\$ 3,278,812	\$ 2,263,488	\$ 1,980,051	\$ 1,237,809	\$ 1,891,107	\$ 1,501,201	\$ 2,638,031	\$ 345,742	\$ 17,017,941
TSE0100 Minority Health Initiative	\$ 258,257	\$ 999,633	\$ 1,496,313	\$ 2,223,837	\$ 1,562,528	\$ 1,389,453	\$ 1,205,182	\$ 1,422,447	\$ 1,613,506	\$ 214,790	\$ 12,385,945
TSE0201 Donald W. Reynolds Center on Aging	\$ 575,812	\$ 2,179,428	\$ 1,563,298	\$ 2,128,476	\$ 1,535,195	\$ 1,643,114	\$ 1,306,293	\$ 2,119,389	\$ 1,991,144	\$ -	\$ 15,042,150
TSE0202 Arkansas School of Public Health	\$ 913,012	\$ 3,219,800	\$ 2,737,543	\$ 2,799,128	\$ 2,401,305	\$ 2,364,746	\$ 2,119,073	\$ 3,018,394	\$ 3,077,381	\$ -	\$ 22,650,382
TSE0203 Area Health Education Center	\$ 674,137	\$ 2,081,028	\$ 1,723,245	\$ 1,968,627	\$ 1,362,900	\$ 1,815,820	\$ 1,608,736	\$ 1,816,531	\$ 1,867,970	\$ -	\$ 14,918,995
TSF0100 Biosciences ASU Jonesboro	\$ 343,688	\$ 4,749,099	\$ 2,947,823	\$ 4,039,154	\$ 2,291,379	\$ 3,726,834	\$ 2,978,941	\$ 3,504,197	\$ 3,883,247	\$ -	\$ 28,464,362
TSF0200 Biosciences U of A 318	\$ 424,637	\$ 2,268,091	\$ 1,085,922	\$ 2,644,296	\$ 927,038	\$ 2,284,392	\$ 1,331,424	\$ 2,127,887	\$ 2,072,160	\$ -	\$ 15,165,846
TSF0202 Biosciences U of A 321 Agri	\$ 700,426	\$ 2,050,587	\$ 2,040,819	\$ 1,717,326	\$ 1,686,786	\$ 1,523,739	\$ 1,578,277	\$ 1,881,613	\$ 2,072,068	\$ -	\$ 15,251,641
TSF0300 Biosciences UAMS 365	\$ 1,366,936	\$ 5,930,979	\$ 5,252,128	\$ 4,528,243	\$ 3,983,235	\$ 4,439,805	\$ 2,091,252	\$ 3,978,149	\$ 3,623,760	\$ -	\$ 35,194,487
TSG0100 Medicaid Expansion *	\$ 1,293,882	\$ 20,631,803	\$ 3,718,707	\$ 6,226,545	\$ 4,720,724	\$ 7,031,730	\$ 9,004,381	\$ 9,548,785	\$ 10,236,209	\$ 892,760	\$ 73,305,526
Total	\$ 9,043,582	\$ 60,072,439	\$ 39,508,747	\$ 42,804,295	\$ 32,649,086	\$ 40,341,784	\$ 36,597,400	\$ 44,118,489	\$ 46,955,576	\$ 2,203,935	\$ 354,295,331

* TSC0100 Medicaid Expansion updated 10/7/2005 to reflect dollars transferred for Medicaid Expansion Expenses