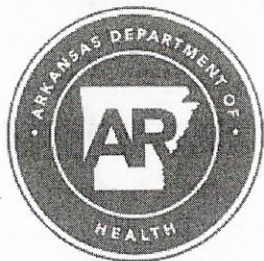
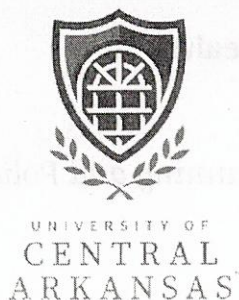
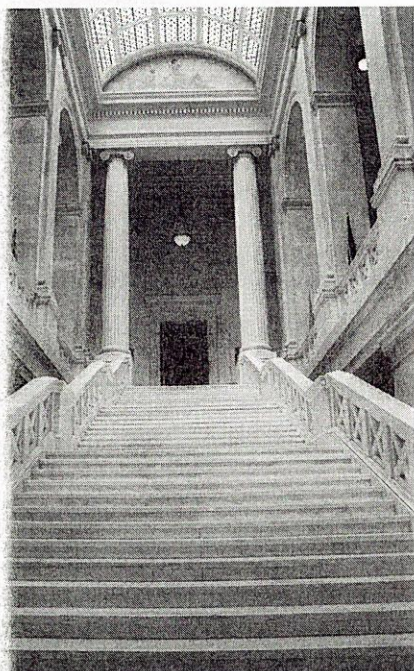


ARKANSAS TOBACCO SETTLEMENT COMMISSION



**January-March 2021
Quarterly Evaluation Report**



Report Prepared August 2021 by

Arkansas Tobacco Settlement Evaluation Team

Emily Lane - Project Director

University of Central Arkansas

201 Donaghey Avenue

Conway, AR 72035

Report Prepared for

Arkansas Tobacco Settlement Commission

101 East Capitol Avenue, Suite 108

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Arkansas Tobacco Settlement Commission and Staff



Andrea Allen, Commission Chair

Deputy Director, ASU Delta Center for Economic Development: Governor Appointee

Tom Chilton, Commission Vice Chair

Director of Science and Technology, Arkansas Economic Development Commission:
AEDC Permanent Designee

Jerri Clark, Commissioner

Director of School Health Services, Arkansas Dept. of Education: ADE Permanent
Designee

Mary Franklin, Commissioner

Director of Divisions of County Operations, Arkansas Department of Human Services:
DHS Permanent Designee

Nick Fuller, Commissioner

Deputy Director, Arkansas Dept. of Higher Education: ADHE Permanent Designee

Ken Knecht, MD, Commissioner

Physician, Arkansas Children's Hospital: Senate President Pro Tempore Appointee

Roddy Smart Lochala, DO, Commissioner

Physician, Family Practice Clinic: Attorney General Appointee

Renee Mallory, Commissioner

Chief of Staff, Arkansas Department of Health: ADH Permanent Designee



Arkansas Tobacco Settlement Evaluation Team

University of Central Arkansas

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Janet Wilson, PhD

Evaluator: Tobacco Prevention and Cessation Program

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Evaluator: Tobacco Settlement Medicaid Expansion Program

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Evaluator: UAMS Centers on Aging

Jacquie Rainey, DrPH, MCHES

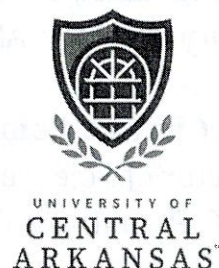
Co-PI & Administrator

Evaluator: UAMS East Regional Campus

Rhonda McClellan, EdD

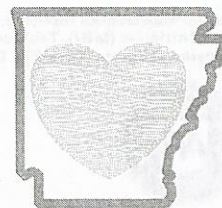
Co-PI

Qualitative Report



Building a Culture of Health

Arkansas Biosciences Institute (ABI), UAMS Fay W. Boozman College of Public Health (COPH), Arkansas Minority Health Initiative (MHI), Tobacco Prevention and Cessation Program (TPCP), Tobacco Settlement Medicaid Expansion Program (TS-MEP), UAMS Centers on Aging (UAMS-COA), UAMS East Regional Campus (UAMS East)



EDUCATION

161

**HEALTH PROFESSIONALS
AND STUDENTS EDUCATED**
ABI, COPH, TPCP, UAMS-COA, UAMS EAST

40

UAMS

**DISTANCE ACCESSIBLE
COURSES OFFERED BY COPH**

COMMUNITY EDUCATION

MHI, TPCP, UAMS-COA, UAMS EAST

**21,504
TOTAL
EDUCATION
ENCOUNTERS**

**6,982
YOUTH
EDUCATION
ENCOUNTERS**



NAVIGATING UNCHARTED WATERS

22nd ARKANSAS CANCER SUMMIT
1st CLEARING THE AIR IN COMMUNITIES OF COLOR CONFERENCE

Tuesday, March 9
Wednesday, March 10



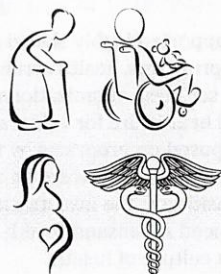
The 18th Clearing the Air in Communities of Color Conference was held in conjunction with the Arkansas Cancer Coalition's Cancer Summit in March. The event was a collaboration between several organizations including TPCP, MHI, and MISRGO--which is funded through TPCP.

A total of 184 Arkansans attended the virtual conference.

SERVICE

12,283

ARKANSANS
SERVED THROUGH
TS-MEP



11,947

**EXERCISE
ENCOUNTERS**
UAMS-COA, UAMS EAST



8,746

**CLINIC & PATIENT
ENCOUNTERS**
UAMS-COA, UAMS EAST



3,038

**HEALTH
SCREENINGS**
MHI, UAMS EAST



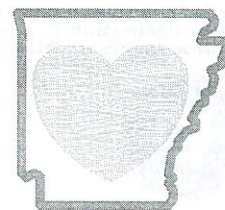
692

**CALLERS ENROLLED
IN TOBACCO
CESSATION**



Building a Culture of Health

Arkansas Biosciences Institute (ABI), UAMS Fay W. Boozman College of Public Health (COPH), Arkansas Minority Health Initiative (MH), Tobacco Prevention and Cessation Program (TPCP), Tobacco Settlement Medicaid Expansion Program (TS-MEP), UAMS Centers on Aging (UAMS-COA), UAMS East Regional Campus (UAMS East)



RESEARCH



Arkansas Children's
Research Institute

ARKANSAS STATE
UNIVERSITY

UNIVERSITY OF
ARKANSAS

UAMS
UNIVERSITY OF ARKANSAS
MEDICAL SYSTEMS

Arkansas
Biosciences
Institute

Researchers at ABI have pivoted some of their research pursuits to focus on COVID-19. Several projects are underway including those focused on virus transmission via breast feeding, rapid screening by chest x-ray, prediction of outcomes in patients, rapid detection in rural and underserved communities, community sentiment, bio-banking of lung tissue, modeling to accelerate drug development, novel compounds that inhibit viral replication, and controlling consumer exposure.



Pictured above is ABI's "COVID robot," one of the newest tools used in the state to process COVID-19 samples. ABI Director McGehee explains, "Prior to having the robot, the microbiology labs could process about 700-800 samples a week. With the robot sample handlers, they are able to triple the number of weekly COVID samples."

80

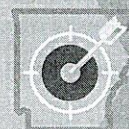
COPH
RESEARCH
PROJECTS



Faculty and students of the COPH are engaged in a variety of research topics including the impact of COVID-19 on the mental health of high-risk populations, tobacco cessation treatments, depression, diabetes prevention, effects of poverty on health, cancer studies, public health policy for restaurants, health literacy, HIV in minority populations, birth defects, and hypertension.

94%

COPH PROJECTS
FOCUSED IN
ARKANSAS

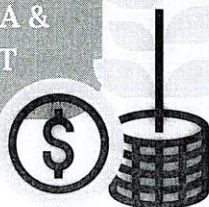


A new center using evidence-based research to inform public health practice in criminal justice settings has been established by the COPH. Researchers at the Southern Public Health and Criminal Justice Research Center will conduct, analyze, and disseminate research in criminal justice settings by working with partners and policymakers to understand challenges associated with criminal justice involvement and its impact on families and communities. Researchers are also investigating COVID-19 outbreaks, transmission health issues, and issues associated with transitioning formerly incarcerated people back into society.

ECONOMIC IMPACT

\$286,631

TOTAL LEVERAGED
BY UAMS-COA &
UAMS EAST



TS-MEP CLAIMS PAID AND FEDERAL
MATCHING LEVERAGED FUNDS

\$21.9
MILLION

CLAIMS

\$15.9
MILLION

LEVERAGED

\$12,386

COMMUNITY
PARTNER
DONATIONS TO
UAMS-COA



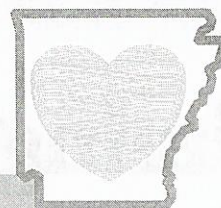
WELL-BEING RETURNS ON
TOBACCO SETTLEMENT
INVESTMENTS



ATSC funding during the quarter supported highly skilled jobs, research projects, health education programs, health screenings and COVID-19 vaccinations, clinical services, organizational and community partnerships, and vital healthcare for vulnerable Arkansans. Despite limitations imposed on programs by the pandemic, more than 80% of program indicators were on track to meet future goals. All things considered, the investment of ATSC dollars in the state has enhanced Arkansans' health and well-being and supported a culture of health.

Building a Culture of Health

Arkansas Biosciences Institute (ABI), UAMS Fay W. Boozman College of Public Health (COPH), Arkansas Minority Health Initiative (MHI), Tobacco Prevention and Cessation Program (TPCP), Tobacco Settlement Medicaid Expansion Program (TS-MEP), UAMS Centers on Aging (UAMS-COA), UAMS East Regional Campus (UAMS East)



TESTIMONIALS

ABI: Bats have been implicated as reservoirs for a range of new human infections, and most current evidence suggests they are the source for SARS-CoV-2. Research by Dr. Kristian Forbes, assistant professor in the Department of Biological Sciences at the University of Arkansas Fayetteville (UAF) is investigating this connection. According to Wesley Stites, PhD, associate vice chancellor for research at UAF, "One of [Forbes's] current projects is focused on investigating known and novel viruses carried by bats in high-risk settings in Kenya and Rwanda. These areas are home to more bat species than most other parts of the world, and, due to cultural practices, people are especially likely to come into contact with bats and their pathogens, thus significantly increasing the risk of virus spillover to people." The Forbes research team has already identified several new coronaviruses carried by bats in these areas.

COPH: A collaboration between the COPH and the Arkansas Foundation for Medical Care has resulted in a documentary film recounting the events and work that lead to establishing the COPH in 2001. The documentary was the culmination of the work of Joe Bates, MD, MS, associate dean for Public Health Practice in the COPH and others. Dr. Bates shared, "The college helped prepare Arkansas' first generation of healthcare professionals who understand the urgency and complexities of public health. Their extraordinary skills are evident everyday as we're called upon to find solutions to the coronavirus pandemic. I invite you to learn about the creation of the college from the people who made it happen, in their own words."

MHI: An attendee at the Arkansas Cancer Summit, Joyce C., reported, "The cancer summit was well organized. I loved the testimony and all the data. The summit overall was very informative and good food for thought and action."

TPCP: The 22nd Arkansas Cancer Summit was held in conjunction with the 18th Clearing the Air in Communities of Color Conference on March 9-10. The conference theme was "Cancer in the COVID Era: Navigating Uncharted Waters." The conference featured key presenters from local and national organizations. A breakout session was also held featuring a tobacco control topic: "Smoking, Vaping, and COVID-19: A Dangerous Mix." One conference attendee stated, "I liked the usage of local talent and programs in the conference." Another attendee, and TPCP sub-grantee, reflected, "In spite of the pandemic, you keep pushing. You provide excellent support to sub-grantees."

UAMS-COA: An attendee of exercise programs at the Schmieding Center reported, "Until I retired five years ago, I was very active. Although I intended to stay just as active and pursue multiple hobbies and special projects as before I retired, I became a couch potato. Suddenly I stopped exercising altogether and only let the dogs out in the front yard. By March 1, 2020, I was so weak, stiff, and sore when I woke up, went to sleep, or tried to sleep that I had to support myself by leaning on furniture and going upstairs/downstairs by clinging to the rail. So these Schmieding Center exercise programs have literally been a lifesaver for me."

UAMS East: A patron of UAMS East shared, "After being diagnosed with Type II diabetes, I began a quest to heal myself. I was determined to not have to take insulin or prick my finger five times a day. I also have extensive arthritis. This [fitness] center is single handedly responsible for me no longer being diabetic, and I now have good mobility."



Timing of Program Evaluation

While all ATSC-funded programs rely on annual indicators to guide their activities, the timing of annual evaluation varies across programs, depending on the timing of indicator goals. Some programs are evaluated at the end of the fiscal year, while others are evaluated at the end of the calendar year. For clarity in this quarterly report, we provide an illustration of evaluation timing below, broken down by the four evaluation reports that the UCA evaluation team produces.

January-March Quarterly Report (current report):

- Quarterly progress updates for all ATSC-funded programs are provided.

April-June Quarterly Report:

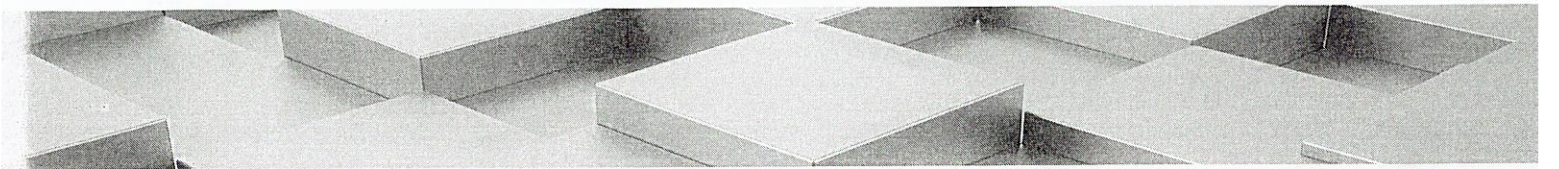
- Quarterly progress updates for ABI, CPH, TS-MEP, UAMS-COA, and UAMS East are provided.
- Fiscal year evaluation of MHI and TPCP is provided.

July-September Quarterly Report:

- Quarterly progress updates for CPH, MHI, TPCP, TS-MEP, UAMS-COA, and UAMS East are provided.
- Fiscal year evaluation of ABI is provided.

Annual/Biennial Report, inclusive of October-December data:

- Calendar year evaluation of CPH, TS-MEP, UAMS-COA, and UAMS East is provided.
- Review of most recent fiscal year evaluation of ABI, MHI, and TPCP is provided in addition to progress updates for the current fiscal year.



ABI Evaluator Summary and Comments

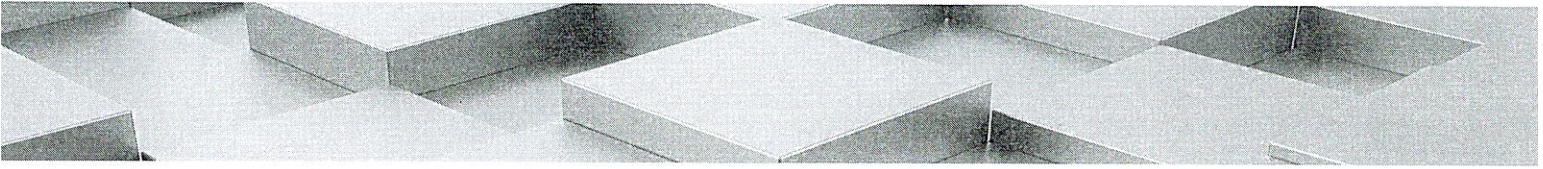
Program Description

The Arkansas Biosciences Institute, the agricultural and biomedical research program of the Tobacco Settlement Proceeds Act, is a partnership of scientists from Arkansas Children's Research Institute, Arkansas State University, the University of Arkansas System Division of Agriculture, the University of Arkansas, Fayetteville, and the University of Arkansas for Medical Sciences. The ABI supports long-term agricultural and biomedical research at its five member institutions and focuses on fostering collaborative research that connects investigators from various disciplines across these five institutions. The ABI uses this operational approach to address the goals as outlined in the Tobacco Settlement Proceeds Act. These goals are 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.

Overall Program Goal

The goal of the ABI is to develop new tobacco-related medical and agricultural research initiatives to improve the access to new technologies, improve the health of Arkansans, and stabilize the economic security of Arkansas.



ABI Evaluator Summary and Comments

Challenges

COVID-19 restrictions for both students and researchers have continued to curtail in-person research opportunities. This restriction has been especially true for ABI-supported researchers who require research-related travel. For example, Dr. Kristian Forbes, assistant professor in the Department of Biological Sciences at University of Arkansas at Fayetteville, studies emerging infectious diseases that are caused by viruses transmitted from bats to people and livestock. His field research on bat species in Kenya and Rwanda has been on hold for more than 12 months.

Opportunities

Emergence of the SARS CoV-2 coronavirus has led to an expanded research focus for many ABI-supported researchers. Researchers studying the human lung, drug discoveries, artificial intelligence, or other areas have had an opportunity to shift and/or expand their research. For more than a decade, Richard Kurten, PhD, professor in the UAMS College of Medicine, Department of Physiology and Biophysics, and his laboratory at the Arkansas Children's Research Institute have routinely generated preparations of human lung slices for use in local and national studies in pharmacology, immunology, allergy, and infectious diseases. Because these slices provide an outstanding approach to understanding mechanisms for SARS-CoV-2 infection and propagation within the human lung, this project will extend their human lung slice preparation to include bio-banking (long-term storage and cryopreservation of human tissue), and recovery for subsequent experiments in coronavirus research.

Evaluator Comments

ABI institutions and investigators responded quickly to focus expertise and research efforts to meet the challenges of the pandemic. Resources were channeled into a variety of investigative activities to solve the pandemic puzzle. These activities included antibody testing, vaccine development, public health awareness, transmission, and other more complex issues. In addition to the novel problems posed by the SARS-CoV-2 battle, ABI investigators continued to leverage ABI funding to attract extramural funding from agencies and foundations throughout the nation and were on track to meet all indicators.



ABI Performance Indicators and Progress

Long-Term Objective

The institute's research results should translate into commercial, alternate technological, and other applications wherever appropriate in order that the research results may be applied to the planning, implementation, and evaluation of any health-related programs in the state. The institute should also obtain federal and philanthropic grant funding.



Indicator

The five member institutions will continue to rely on funding from extramural sources with the goal of increasing leveraged funding from a baseline of \$3.15 for every \$1.00 in ABI funding.



Activity: On Track

This indicator is on track to meet the FY21 goal. Research investigators continue to use ABI funds to obtain grants from outside agencies such as the National Institutes of Health, U.S. Department of Agriculture, National Science Foundation, and American Heart Association. This extramural funding expands university-based employment within the state. During FY20, ABI scientists brought in more than \$49 million, translating to \$4.31 in extramural funding for every \$1 of ABI monies. Data for this indicator are reported at the end of the fiscal year.



Indicator

ABI-funded research will lead to the development of intellectual property, as measured by the number of patents filed and received.



Activity: On Track

This indicator is on track to meet the FY21 goal. Research projects conducted by ABI investigators continue to reveal research findings that may lead to unique intellectual property and commercial applications that are eligible for patent protection. The report of filings and patent awards is collected and disseminated at the conclusion of each fiscal year.




ABI Performance Indicators and Progress



Indicator

The ABI will promote its activities through various media outlets to broaden the scope of impact of its research.



Activity: On Track

This indicator is on track to meet the FY21 goal. Publications, newspaper articles, press releases, and television/radio broadcasts provide an ongoing conduit through which research results are disseminated to the public and scientific communities. These articles, releases, and broadcasts continue to highlight the activities of ABI investigators and increase the scope and impact of the research conducted by this program. Data related to ABI contacts with media outlets are reported at the end of the fiscal year.



ABI Performance Indicators and Progress


Short-Term Objective

The Arkansas Biosciences Institute shall initiate new research programs for the purpose of conducting, as specified in § 19-12-115, agricultural research with medical implications, bioengineering research, tobacco-related research, nutritional research focusing on cancer prevention or treatment, and other research approved by the board.



Indicator

The ABI will allocate funding to its five member institutions to support research, while also monitoring that funded research activities are conducted on time, within scope, and with no overruns.



Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the FY21 goal. Funds continue to be utilized to support research studies related to COVID-19. These studies focus on a wide range of topics that include transmission via breast feeding, rapid screening by chest x-ray, prediction of outcomes in patients, rapid detection in rural and underserved communities, community sentiment, bio-banking of lung tissue, modeling to accelerate drug development, novel compounds that inhibit viral replication, and controlling consumer exposure. Since its inception, ABI has conducted research in a timely and cost-effective manner. Data for this indicator are reported at the end of the fiscal year.



Indicator

The ABI and its member institutions will systematically disseminate research results and ensure that at least 290 publications and 370 presentations are delivered each year. These include presentations and publications of results, curricula, and interventions developed using the grant funding, symposia held by investigators, and the creation of new research tools and methodologies that will advance science in the future.



ABI Performance Indicators and Progress

◆ **Activity: On Track**

This indicator is on track to meet the FY21 goal. One measure of ABI success is the publication and presentation of research results in national and international publications. Research scientists at the member institutions continue to build upon a solid foundation of publications, publishing more than 7,200 original manuscripts, books, and book chapters since its inception. Additionally, ABI researchers continue to create new research tools and methodologies that aid the advancement of scientific inquiry. Data for this indicator are reported at the end of the fiscal year.



Indicator

Employment supported by the ABI and extramural funding will be maintained at a baseline of 300 full-time equivalent (FTE) with at least 65% of the FTE supported by extramural funds.

◆ **Activity: On Track**

This indicator is on track to meet the FY21 goal. ABI funding and the extramural funding generated by ABI scientists are used to support technical positions at the five member institutions. These knowledge-based jobs include laboratory technicians, animal care specialists, post-doctoral research fellows, and biostatisticians. Since inception, ABI-supported employment has averaged around 297 FTE annually at the five institutions. Additionally, it should be noted that ABI resources are frequently used to recruit research investigators to the state. These investigators significantly contribute to Arkansas's biomedical and agricultural research infrastructure in areas such as melanoma research, pediatric kidney injuries, diet and metabolism, and rice and sorghum research. Data regarding employment are reported at the conclusion of the fiscal year.

ABI Performance Indicators and Progress



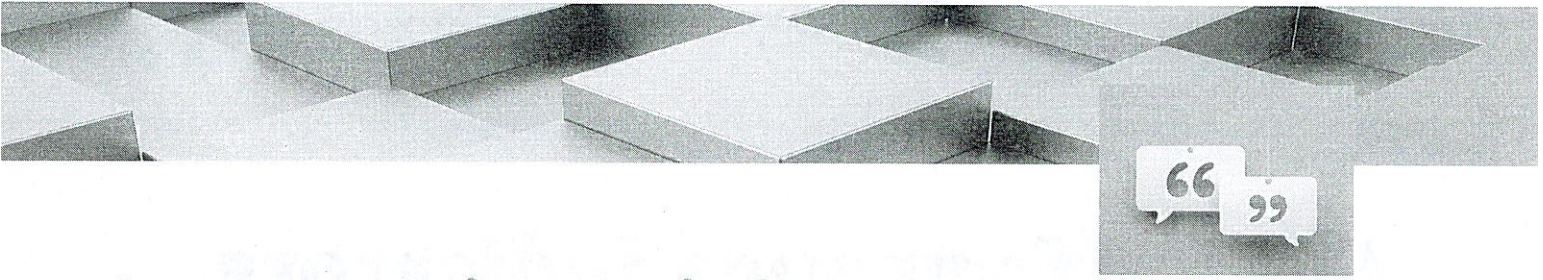
Indicator

The ABI will facilitate and maintain research collaboration at a level of 20% - 25% among member institutions.

Activity: On Track

This indicator is on track to meet the FY21 goal. Significant research collaborations among ABI scientists are in progress. During FY20, there were 217 new and ongoing research projects at the five institutions.

Thirty-three percent (33%) were collaborative efforts. Data regarding this indicator will be reported at the end of FY21.



ABI Testimonial

How Do Viruses Move from Animals to Humans? University of Arkansas, Fayetteville Research Scientist Tracks Transmission

Emerging infectious diseases are one of the greatest threats to global human health and well-being, highlighted by the recent emergence of SARS-CoV-2 and the disease it causes, COVID-19. “Most emerging infectious diseases are caused by viruses transmitted from animals to people, a process known as spillover, after which it can be quickly transported around the world by infected travelers,” noted Dr. Kristian Forbes, assistant professor in the Department of Biological Sciences at the University of Arkansas Fayetteville (UAF). Dr. Forbes is an ecologist/eco-immunologist who studies pathogen susceptibility and transmission in wildlife.

Rapid containment is key to preventing and mitigating the spread of these diseases, which to be most effective necessitates research at the wildlife-human interface in high emergence risk settings. Bats have been implicated as reservoirs for a range of new human infections, and most current evidence suggests they are the source for SARS-CoV-2. According to Wesley Stites, PhD, Associate Vice Chancellor for Research at UAF, “Dr. Forbes is well poised to address some of these challenges and one of his current projects is focused on investigating known and novel viruses carried by bats in high-risk settings in Kenya and Rwanda. These areas are home to more bat species than most other parts of the world, and, due to cultural practices, people are especially likely to come into contact with bats and their pathogens, thus significantly increasing the risk of virus spillover to people.” The Forbes research team has already identified several new coronaviruses carried by bats in these areas as well as an ebolavirus. Ongoing work aims to further understand these viruses and the risks they pose to people, including potential transmission pathways to people, such as direct contact with bats, and livestock species acting as intermediate hosts between bats and people.



COPH Evaluator Summary and Comments

Program Description

The Fay W. Boozman College of Public Health (COPH) educates a public health workforce and advances the health of the public by investigating the causes, treatments, and prevention of human health problems. Preventing chronic disease and promoting positive health behavior is the most effective way to improve the health of all people. The College's mission of improving the health of all Arkansans is realized through teaching and research as well as service to elected officials, agencies, organizations, and communities. Examples of the complex health issues addressed include improving the multiple dimensions of access to healthcare; reducing the preventable causes of chronic disease; controlling infectious diseases; reducing environmental hazards, violence, substance abuse, and injury; and promoting preparedness for health issues resulting from terrorist acts, natural disasters, and newly emerging infectious diseases.

Overall Program Goal

The goal of the COPH is to improve the health and promote the well-being of individuals, families, and communities in Arkansas through education, research, and service.



COPH Evaluator Summary and Comments

Challenges

The COPH was authorized by the Arkansas Department of Health to conduct COVID-19 contact tracing for public and private colleges and universities in Arkansas, in partnership with the Arkansas Department of Higher Education and the Arkansas Department of Health. The COPH was able to establish the contact tracing call centers, develop a dedicated website with resources, materials, and best practices as well as hire and train over 75 in late July and early August of 2020 to be in place prior to the beginning of the fall semester.

The effort, in the form of a contract with the Arkansas Department of Health, was supported by \$5 million in federal coronavirus aid that was allocated by the Arkansas Coronavirus Aid, Relief and Economic Security (CARES) Act Steering Committee created by Gov. Asa Hutchinson. It was uncertain that the federal CARES Act funding would continue past December 31, 2020, or that the contract with Arkansas Department of Health would be renewed. As a result, the COPH faced the challenge of planning for both the contact tracing centers to continue uninterrupted and for them to end immediately on December 31, 2020. This planning included immediately vacating spaces that housed the centers and accounting for and moving center equipment and materials. The sense of limbo was most significant in how to handle the contact tracing staff since their positions would end when the centers closed. The COPH Associate Dean for Business and Administration and the COPH HR liaison worked tirelessly to ensure that the staff was fully aware of the situation and, if the centers were suddenly closed, would be notified as quickly as possible. They also prepared for the more complicated scenario of the centers being closed and quickly reopened, ensuring methods and mechanisms were in place to allow staff to be rehired quickly and as seamlessly as possible.

The uncertainty of whether the funding would continue or the contract be renewed continued into the beginning of the year until it was made clear that the funding would cease on June 30, 2021 and the call center will be dismantled by that time.



COPH Evaluator Summary and Comments

Opportunities

A new center using evidence-based research to inform public health practice in criminal justice settings has been established by the COPH. The Southern Public Health and Criminal Justice Research Center (S-PAC) is directed by Nick Zaller, PhD, and researchers will conduct, analyze, and disseminate research in criminal justice settings by working with community members, organizations, and policymakers to understand the challenges associated with criminal justice involvement and its impact on families and communities. Zaller is a professor in the COPH Department of Health Behavior and Health Education. “We will specifically focus our efforts on the southern U.S., where mass incarceration is particularly severe,” said Zaller. “We hope to better understand the epidemic of mass incarceration within a local context so we can address the needs of those populations most severely impacted.”

Arkansas has the sixth highest incarceration rate in the country at 900 per 100,000 people. Further, Arkansas’s incarceration rate is considerably higher than that of the United States as well as many other countries. The center has many projects underway, through multiple funding sources including the Robert Wood Johnson Foundation, Arnold Ventures, the National Institute on Aging, and the National Institute on Minority Health and Health Disparities. Projects include reducing probation revocations in Pulaski County, Arkansas; developing an Aging Research in Criminal Justice and Health (ARCH) network; treating substance use disorder in the criminal justice system through digital health; increasing use of HIV pre-exposure prophylaxis among high-risk jail detainees; and evaluating opportunities for diverting individuals with behavioral health needs away from incarceration. “Our ultimate goal is to eradicate racial, economic, and public health inequities related to criminal justice involvement,” said Zaller. The center will maintain four core units – administrative, education and training, research and evaluation, and dissemination and policy.

Others involved in the center include:

- George Pro, PhD, assistant professor in the Department of Health Behavior and Health Education, will examine relationships between prison-based COVID-19 outbreaks and community spread, and study ways to utilize health data systems to improve healthcare among recently incarcerated individuals.



COPH Evaluator Summary and Comments

Opportunities - CONT'D

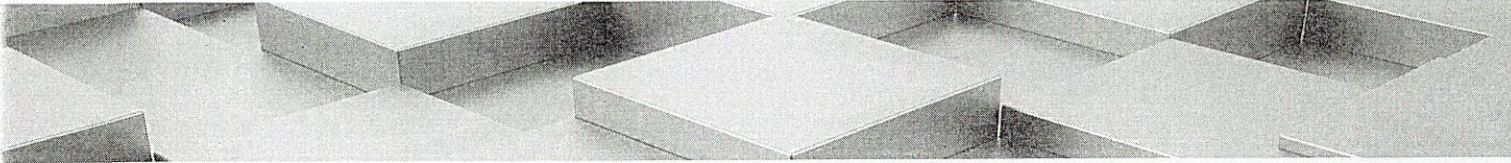
- Brooke Montgomery, PhD, assistant professor in the Department of Health Behavior and Health Education, will provide expertise on the role of criminal justice system involvement on homeless mothers.
- Nakita Lovelady, PhD, postdoctoral fellow, will investigate health disparities and violence prevention among Black men in institutional and community settings.
- Meg Gorvine, PhD, postdoctoral fellow, will study stress, integrative health, and resilience in criminal justice settings and among people reentering the community from incarceration.
- Heather Horton, MA, will serve as research coordinator for the center.
- Mofan Gu, PhD candidate in the Department of Epidemiology, will provide expertise on adverse health outcomes using social and behavioral factors.
- Ruby Welch, community health coordinator for UAMS and founder of F.E.L.O.N. (Formerly Incarcerated Empowered Leaders Overcoming Negative Stigmas), works to educate detainees on various health risks and concerns.

For more information about the center, visit

<https://publichealth.uams.edu/departmentsandunits/centers/spac/>.

Evaluator Comments

The COPH continues to respond to health concerns of Arkansans and is on track to meet all of their annual goals. Their research in areas of public health, and during this time of COVID-19 in particular, is valuable to the state. COPH provides outreach and public service to a wide-range of constituents. In addition, its role in establishing contact tracing for colleges and universities in Arkansas has filled a critical need. COPH graduates are also providing research and service to improve health related issues in Arkansas. As noted above, the new Southern Public Health and Criminal Justice Research Center shows promise in providing assistance to help reduce the incarceration rates in Arkansas. This appears to be a much-needed area of emphasis for improvement in Arkansas given our high incarceration rates.



COPH Performance Indicators and Progress


Long-Term Objective

Elevate the overall ranking of the health status of Arkansans.



Indicator

Through consultations, partnerships and dissemination of knowledge, the COPH serves as an educational resource for Arkansans (e.g., general public, public health practitioners and researchers, and policymakers) with the potential to affect public health practice and policy – and population health.




Activity: On Track

This indicator is on track to meet the annual goal. Faculty reported being engaged in 52 public health activities (43 in Arkansas and nine nationally). These activities included presentations to professional or lay audiences; serving as consultants, or on an expert panel, task force, committee, or board of directors; or partnering with public health practitioners or community organizations that have a health-related mission.



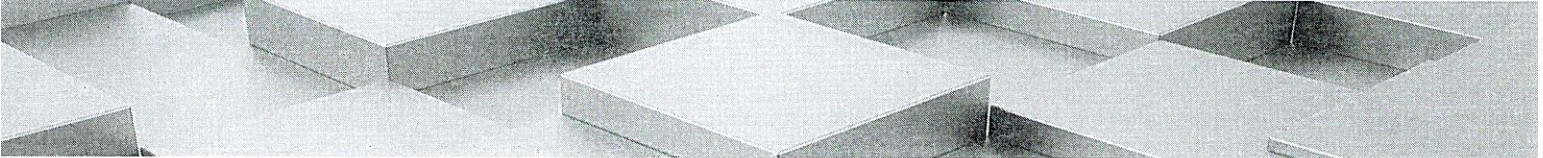
Indicator

COPH faculty productivity is maintained at a level of two publications in peer-reviewed journals per one full-time equivalent (FTE) employee for primary research faculty.



Activity: On Track

This indicator is on track to meet the annual goal. Data for this indicator are reported in the October-December quarter and will be presented in the 2020-2021 biennial report.



COPH Performance Indicators and Progress



Indicator

Research conducted by COPH faculty and students contributes to public health practice, public health research, and the health and well-being of Arkansans.



Activity: On Track

This indicator is on track to meet the annual goal. Currently, faculty are engaged in 36 research studies of which 33 are based in Arkansas. In addition, 44 student research projects are ongoing with 42 based in Arkansas. A wide range of health topics are being investigated including, but not limited to, COVID-19, cancer studies (e.g., breast and prostate), telehealth, diabetes prevention, HIV in minority populations, underserved populations, cardiovascular disease, mammography screening, birth defects, and hypertension.



Indicator

COPH faculty, staff, and students are engaged in research that is based in Arkansas.



Activity: On Track

This indicator is on track to meet the annual goal. Currently, 94% of research projects (75 of 80) are based in Arkansas.



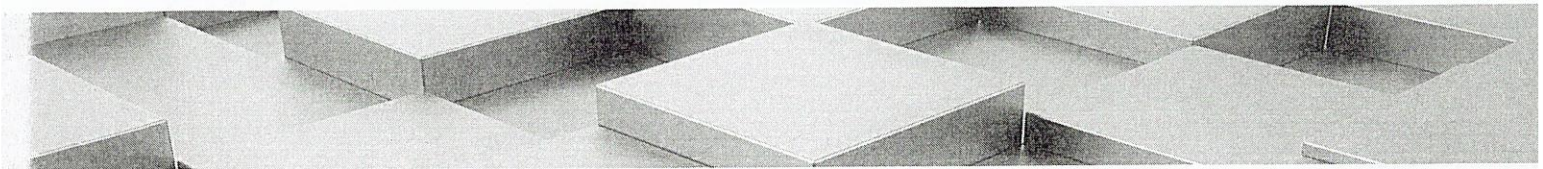
Indicator

The COPH makes courses and presentations available statewide.



Activity: On Track

This indicator is on track to meet the annual goal. Forty distance-accessible courses were made available statewide during this quarter. In addition, 10 presentations were made available remotely, including eight presentations related to COVID-19.



COPH Performance Indicators and Progress



Indicator

Twenty percent of enrolled students at the COPH come from rural areas of Arkansas.



Activity: Exceeding Expectations

This indicator is exceeding expectations towards meeting the annual goal. In total, 78 of 298 students (or 26%) enrolled in the COPH were from rural areas.



Indicator

COPH graduates' race/ethnicity demographics for Whites, African Americans and Hispanics/Latinos are reflective of Arkansas race/ethnicity demographics.



Activity: On Track

This indicator is on track to meet the annual goal. These data are reported in the April-June, July-September, and October-December quarters.



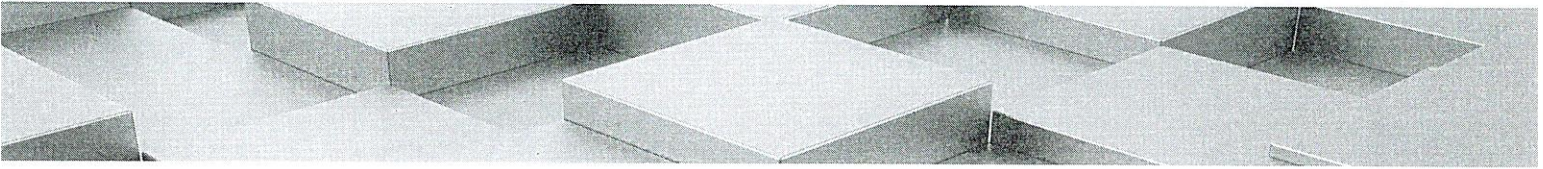
Indicator

The majority of COPH alumni stay in Arkansas and work in public health.



Activity: On Track

This indicator is on track to meet the annual goal. These data are reported in the April-June, July-September, and October-December quarters.



COPH Performance Indicators and Progress

Short-Term Objective

Obtain federal and philanthropic grant funding.



Indicator

The COPH shall maintain a 1.5:1 ratio of total annual fiscal year extramural award funding to annual fiscal year tobacco settlement dollars.

Activity: On Track

This indicator is on track to meet the fiscal year goal. Data and evaluation of this indicator are reported in the July-September quarterly report.



COPH Testimonial

Film Documents Founding of COPH

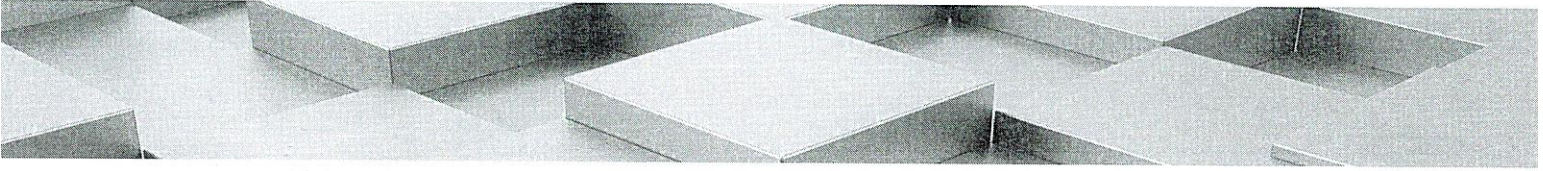
A collaboration between the COPH and the Arkansas Foundation for Medical Care has resulted in a documentary film recounting the events and work that lead to establishing the COPH in 2001. In 1998, 46 states, Washington D.C., four U.S. territories, and Puerto Rico sued tobacco companies for damages to human health from tobacco use, pointing out that companies had denied under oath before a congressional committee that tobacco use was not addicting. As a result, four tobacco companies entered into the Master Tobacco Settlement Agreement (MSA) with those entities.

Under the MSA, the tobacco industry pays the states \$206 billion in the first 25 years of the agreement. The provisions of the settlement include a monetary award to each state based on the state's population. Since 2001, Arkansas has received approximately \$50 million per year from the MSA. All the states, except Arkansas, spent their share on things like improving roads and security for loans. Arkansas is the only state that has spent the money on healthcare services, health education programs, and health-related research.

Tobacco settlement revenue bonds were issued with the MSA for Capital Improvement Projects in Arkansas including construction of the UAMS College of Public Health building. The film documents, via oral history accounts, how the COPH came into existence. It features interviews with key figures in the effort to bring the college from idea to reality, including former Governors Mike Huckabee and Mike Beebe.

The documentary was the culmination of the work of Joe Bates, MD, MS, associate dean for Public Health Practice in the COPH; Ray Hanley, president and chief executive officer of the Arkansas Foundation for Medical Care; Carol Cassil, MPH, APR; Steve Shuler; and Anne H. Wasson.

Dr. Bates shared, "The college helped prepare Arkansas' first generation of healthcare professionals who understand the urgency and complexities of public health. Their extraordinary skills are evident everyday as we're called upon to find solutions to the coronavirus pandemic. I invite you to learn about the creation of the college from the people who made it happen, in their own words."



MHI Evaluator Summary and Comments

Program Description

The Arkansas Minority Health Initiative (MHI) was established in 2001 through Initiated Act I to administer the Targeted State Needs for screening, monitoring, and treating hypertension, strokes, and other disorders disproportionately critical to minority groups in Arkansas by 1) increasing awareness, 2) providing screening or access to screening, 3) developing intervention strategies (including educational programs) and developing/maintaining a database. To achieve this goal, the MHI's focus is on addressing existing disparities in minority communities, educating these communities on diseases that disproportionately impact them, encouraging healthier lifestyles, promoting awareness of services and accessibility within our current healthcare system, and collaborating with community partners.

Overall Program Goal

The goal of the MHI is to improve healthcare systems in Arkansas and access to healthcare delivery systems, thereby resolving critical deficiencies that negatively impact the health of the citizens of the state.



MHI Evaluator Summary and Comments

Challenges

Heart disease continues to be a paramount challenge in the state as the number one cause of death for minority Arkansans, and the MHI continues to fight the battle against heart disease. The COVID-19 pandemic also continues to be a major challenge for the MHI. Because of the pandemic, the MHI has had to cancel, reschedule, and/or amend their sponsored, partnered, and Mobile Health Unit events. Once the Mobile Health Unit became available again in late 2020, they were short staffed and not able to travel as regularly. They are in the process of hiring a new nurse and coordinator in 2021.

Opportunities

In spite of the COVID-19 pandemic, the MHI has embraced three opportunities related to the health crisis.

- The pandemic has afforded an increased outreach effort through media (TV, radio, and social media).
- The MHI received CARES funding for the Mobile Health Unit, PPE, and testing. They were able to get on the road in February and March.
- MHI served as a state agency to provide oversight for CARES funding for several partner organizations. These funds provided access to resources including testing, education, media, food, funeral expenses, and other COVID-19 related services.

Evaluator Comments

As the pandemic drags on, the MHI continues its fruitful outreach efforts and has sustained robust numbers in all media categories. The MHI continues to add to its website, particularly ongoing information related to COVID-19, the webpage with the highest number of views last fiscal year. The MHI's media presence has offered thousands of Arkansans opportunities to gain crucial information regarding overall health, including nutrition, physical activity, tobacco, breastfeeding, mental health, and COVID-19, among other topics. The MHI provided "Ask the Doctor" radio segments and live Facebook events where individuals throughout the state could ask questions and receive answers without running the risk of face-to-face exposure. All in all, the MHI continues to provide vital services and information that will help minority Arkansans reduce death/disability due to tobacco, chronic, and other lifestyle-related illnesses.



MHI Performance Indicators and Progress

Long-Term Objective

Reduce death/disability due to tobacco, chronic, and other lifestyle-related illnesses of Arkansans.



Indicator

The MHI will raise awareness and provide access to screenings for disorders disproportionately critical to minorities as well as to any citizen within the state regardless of racial/ethnic group, as measured by the number of health screenings, educational encounters, counties reached, as well as efforts related to multimedia outreach.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the fiscal year goal. Although COVID-19 still has an influence, MHI has been able to schedule outreach initiatives and sponsor events like the 22nd Annual Arkansas Cancer Summit and multiple events put on by the Arkansas Martin Luther King Jr.

Commission, each with increased participation compared to this time last year. In all, 384 attendees were provided health education materials and health screenings. Further, the MHI was able to utilize their Mobile Health Unit (MHU) to provide screenings statewide. This the MHU reached three counties, totaling 50 participants and 209 screenings. This makes a total of 2,432 screenings for the quarter. Also, more than 1,400 Arkansans were provided health education information through outreach events.

Education and health screening efforts reached 32 counties in total.

Although the MHI was limited in terms of face-to-face events, the agency contributed health information through their multimedia outreach. More than 3,500 radio and television ads were run focusing on a variety of health topics. The MHI also continued to use print media (El Latino), webpages (Fox16.com, KATV.com, and the AMHC website), and social media (Twitter and Facebook) to disseminate information. On their social media platforms alone, more than 50,000 impressions were reported.



MHI Performance Indicators and Progress

Short-Term Objective

Prioritize the list of health problems and planned interventions for minority populations and increase the number of Arkansans screened and treated for tobacco, chronic, and lifestyle-related illnesses.



Indicator

The MHI will maintain the number of health screenings and educational encounters related to stroke awareness for minority Arkansans within a 10% variation of the previous fiscal year.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the annual goal. High blood pressure and cholesterol are the two leading causes of stroke. During this quarter, 182 blood pressure screenings and 30 cholesterol screenings were provided to Arkansans at two sponsored outreach events. The MHI also ran 921 television commercials that encourage viewers to eat healthy, exercise, get proper health screenings, and avoid tobacco to help prevent health problems that lead to stroke.



Indicator

The MHI will maintain the number of health screenings and educational encounters related to hypertension awareness for minority Arkansans within a 10% variation of the previous fiscal year.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the annual goal. During the quarter, 182 blood pressure screenings were provided. Further, the MHI ran 782 television commercials that encouraged viewers to eat healthy, exercise, and know their numbers to lower or prevent high blood pressure.



MHI Performance Indicators and Progress



Indicator

The MHI will maintain the number of health screenings and educational encounters related to heart disease awareness for minority Arkansans within a 10% variation of the previous fiscal year.

● **Activity: On Track; Influenced COVID-19**

This indicator is on track to meet the annual goal. During this quarter, 30 cholesterol screenings were provided at two sponsored health events. The MHI also tallied 645 paid and bonus television commercials that focused on heart disease prevention by encouraging healthier eating habits and regular physical activity.



Indicator

The MHI will maintain the number of health screenings and educational encounters related to diabetes awareness for minority Arkansans within a 10% variation of the previous fiscal year.

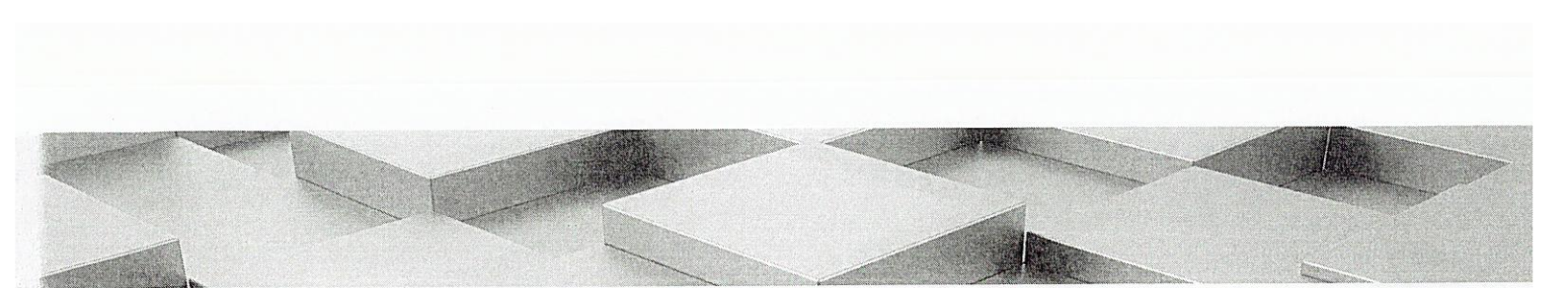
● **Activity: On Track; Influenced by COVID-19**

This indicator is on track to meet the annual goal. During this quarter, 173 glucose screenings were provided to Arkansans. The MHI also ran 203 paid television commercials and bonuses about eating healthy to help prevent diabetes. Also, MHI used social media to encourage people to eat healthy and join their Southern Ain't Fried Sundays (SAFS) program to track glucose, blood pressure, and cholesterol numbers. At present, the SAFS Facebook page has 258 followers. The SAFS program also delivered 23 toolkits and 11 cookbooks, impacting seven different counties.



Indicator

The MHI will conduct ongoing needs assessments to determine the most critical minority health needs to target, including implementation of a comprehensive survey of racial and ethnic minority disparities in health and healthcare every five years.



MHI Performance Indicators and Progress

● **Activity: On Track; Influenced by COVID-19**

The indicator is on track to meet the long-term goal. The most recent survey of racial and ethnic health disparities study was completed in FY19. Findings from this survey, along with monthly health topics reviewed by the MHI, helps to guide specific outreach and messaging each quarter for the program. This quarter, the MHI used multimedia resources to focus on nutrition, physical fitness, tobacco, colorectal cancer, heart disease, cholesterol, the Mobile Health Unit, COVID-19, and the vaccine. More than 200 television and radio health promotion announcements encouraged youth to avoid tobacco and instead focus on more productive and fruitful activities. MHI's social media outreach alone received over 52,000 impressions and 285,000 over-the-top streaming impressions.

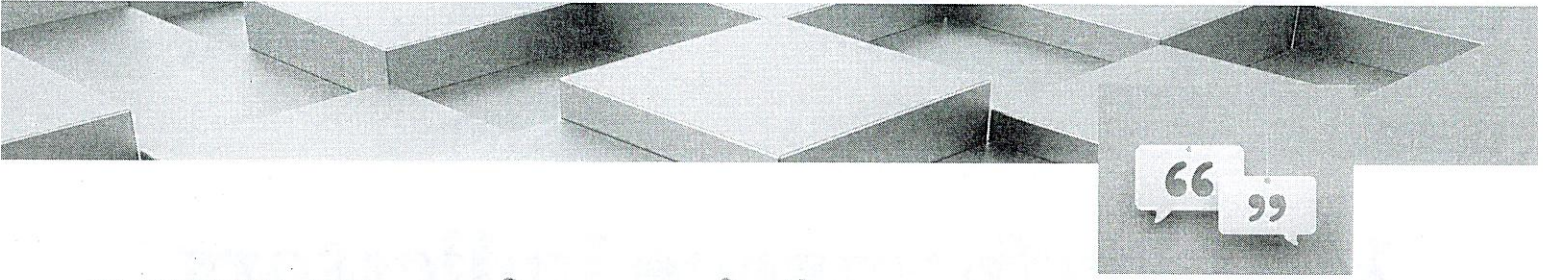


Indicator

The MHI will develop and implement at least one pilot project every five years to identify effective strategies to reduce health disparities among Arkansans.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track to meet the long-term goal. Planning for Camp iCAN is underway, however the plan had to be adapted due to the pandemic. Partners in Pulaski, Sebastian, Desha, and Lee counties will host the camp in 2021. Lee County is also participating in an adapted version of Camp iCAN entitled "Camp iCAN Recess." This adaption allows for the school district's virtual students to receive physical activity information and resources to keep students active as they miss physical education in school.



MHI Testimonial

Program Praise

- "The cancer summit was well organized. I loved the testimony and all the data. The summit overall was very informative and good food for thought and action." -- Joyce C., attendee at the Arkansas Cancer Summit
- "We really appreciate the Mobile Health Unit's services during this event, it will help save lives." -- Attendee at sponsored event at Second Baptist Church of England
- An organizer of this year's Kingian Minority Health Outreach event reported, "A resident said during her visit that she has not been to the doctor in a while because her numbers were good. After her screenings were done, she said she was going to the doctor because her numbers were higher than she thought. She was thankful for the new information." -- Angela W.



TPCP Evaluator Summary and Comments

Program Description

The Arkansas Department of Health (ADH) Tobacco Prevention and Cessation Program (TPCP) includes community and school education prevention programs, enforcement of youth tobacco control laws, tobacco cessation programs, health communications, and awareness campaigns. The TPCP also sponsors statewide tobacco control programs that involve youth to increase local coalition activities, tobacco-related disease prevention programs, minority initiatives and monitoring, and evaluation. The TPCP follows the Centers for Disease Control and Prevention Best Practices for Tobacco Control 2014 as a guide for program development. Outcomes achieved by Arkansas's TPCP include reducing disease, disability, and death related to tobacco use by preventing initial use of tobacco by young people, promoting quitting, eliminating exposure to secondhand smoke, and educating Arkansans about the deleterious health effects of tobacco use.

Overall Program Goal

The goal of the TPCP is to reduce the initiation of tobacco use and its resulting negative health and economic impact.



TPCP Evaluator Summary and Comments

Challenges

No new challenges were identified during the current quarter. However, ongoing COVID-19 restrictions mean the continuation of various virtual adaptations or the suspension of activities as discussed in previous evaluation reports.

Opportunities

Although Be Well Arkansas (BWA) tobacco cessation quit rates are provided under indicator activity on page 39, additional reporting of participation levels for this quarter are provided below.

- Intakes Completed by Phone: 754
- Intakes Completed by Online Signup: 258
- Individuals Enrolled in BWA Counseling: 692
- Count of Incoming Calls to BWA: 1,285
- Diabetes Information Requested: 103
- Hypertension Information Requested: 245

Project Prevent Youth Coalition (PPYC) and the Arkansas Cancer Coalition (AAC) have identified opportunities during the current quarter:

PPYC

- Project Prevent conducted six activities promoting PPYC presentations on the harms of tobacco use and JUUL presentations for teachers and parents. In addition, four chapter meetings were held to plan the *Ready. Set. Record. Film Festival*, *Taking Down Tobacco*, and *Threw with the Chew* activities.
- On February 19, Project Prevent held the annual *Ready. Set. Record. Film Festival*. The event was held virtually and can be viewed at the website <https://projectpreventar.org/what-we-do/ready-set-record.html> or go to <https://www.youtube.com/watch?v=XIjuqPG4Kfw>.

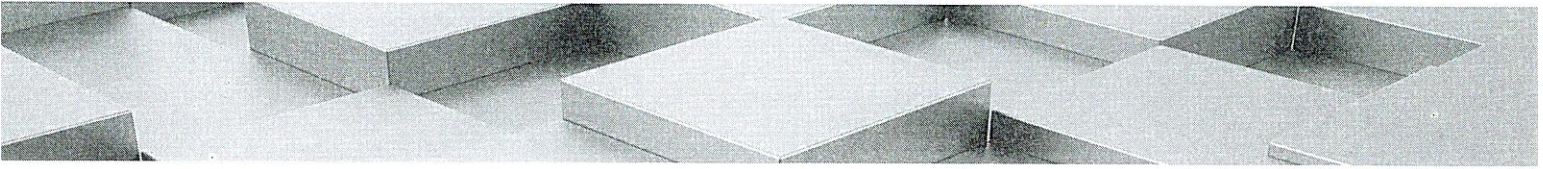


TPCP Evaluator Summary and Comments

Opportunities CONT'D

ACC

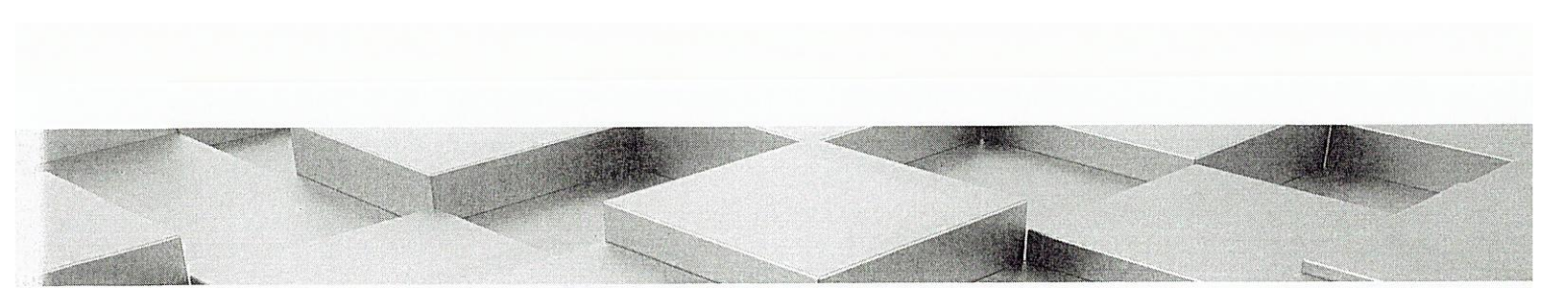
- ACC hosted the Brief Tobacco Intervention (BTI) Training during February 2-4. The training was held in two-hour sessions over the three-day period. The Pharmacotherapy session was held on February 2, the Low Dose CT (computed tomography) Screening on February 3, and the Motivational Interviewing session on February 4. Nine different provider organizations attended, representing healthcare providers (such as RNs, Pharmacists, and APRNs) as well as social workers and one minister. Approximately 18 individuals participated in the training. All sessions were held virtually.
- ACC hosted the 22nd Arkansas Cancer Summit in conjunction with the 18th Clearing the Air in Communities of Color on March 9 and 10. This year's theme was "Cancer in the COVID Era: Navigating Uncharted Waters." The 22nd Arkansas Cancer Summit was held virtually on March 9 with 184 attendees. The tobacco control breakout session topic was "Smoking, Vaping, and COVID-19: A Dangerous Mix." The presentation was conducted by Ritney Castine who has been a tobacco control advocate and served as Managing Director of Community and Youth Engagement at Truth Initiative, a Washington, DC-based public health organization as well as the Director of Youth Advocacy at the Campaign for Tobacco-Free Kids, overseeing youth advocacy efforts nationally and serving as a key subject matter expert on youth engagement.



TPCP Evaluator Summary and Comments

Evaluator Comments

Clearly, COVID-19 restrictions continue to limit programming and training opportunities for TPCP and its sub-grantees. The number of sales-to-minor compliance checks was greatly reduced this fiscal year; there have been limited presentations to educate the public and decision makers on the negative outcomes of tobacco, nicotine, and ENDS products use; and the introduction of the Be Well Baby program had to be delayed as its structure had to be reworked to fit within the protocols for COVID-19 restrictions. Responding to these challenges, TPCP and its sub-grantees have stepped forward with innovative modifications that allow them to reach their target audience. For example, Arkansas Tobacco Control implemented their Observational Survey pilot study; the joint Clearing the Air in Communities of Color Conference and the Arkansas Cancer Coalition's Cancer Summit were presented virtually; and the Be Well Baby program was launched utilizing telehealth counseling, Smartphone technology, and the iCOquit monitoring device. A year into this global pandemic, TPCP and its sub-grantees continue to effectively adapt to the COVID-19 restrictions.



TPCP Performance Indicators and Progress

Long-Term Objective

Survey data will demonstrate a reduction in numbers of Arkansans who smoke and/or use tobacco.



Indicator

By June 2025, the TPCP will work to decrease the current smoking/smokeless tobacco/Electronic Nicotine Delivery System (ENDS) use rate among youth (grades 9-12) from 13.7% to 11.7% for smoking, from 12.7% to 11.7% for smokeless tobacco, and from 13.9% to 12.9% for ENDS.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the long-term goal. Although current social distancing measures due to COVID-19 restrict the ability of TPCP and the sub-grantees to have direct contact with youth in grades 9-12, various social media, socially-distanced, and virtual activities were implemented this quarter. See the Opportunities section for additional information on Project Prevent Youth Coalition Chapter meetings and other virtual activities.

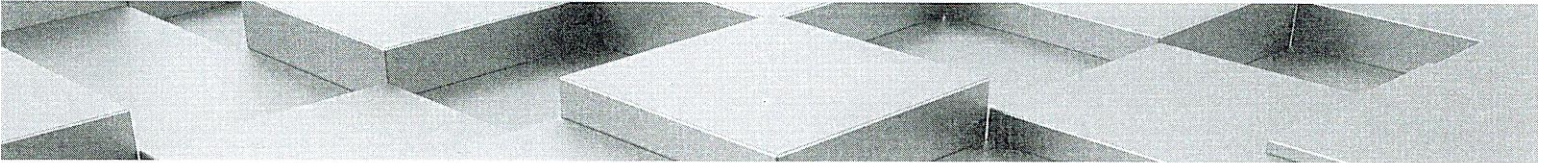


Indicator

By June 2025, 1) the TPCP will work to decrease smoking use among adults (18+) from 22.3% to 20.3%, 2) decrease ENDS use among adults (18+) from 5.7% to 3.7%, and 3) decrease the pregnancy smoking rate from 13.9% to 11.9%.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the long-term goal. Although current social distancing measures due to COVID-19 restrict the ability of TPCP and the sub-grantees to have direct contact with adults and pregnant women, virtual educational programming continued during the current quarter, as did support provided by the Be Well Arkansas Call Center. See the Opportunities section for additional information on various trainings that were held for adults, as well as activities of the Be Well Arkansas Call Center.



TPCP Performance Indicators and Progress

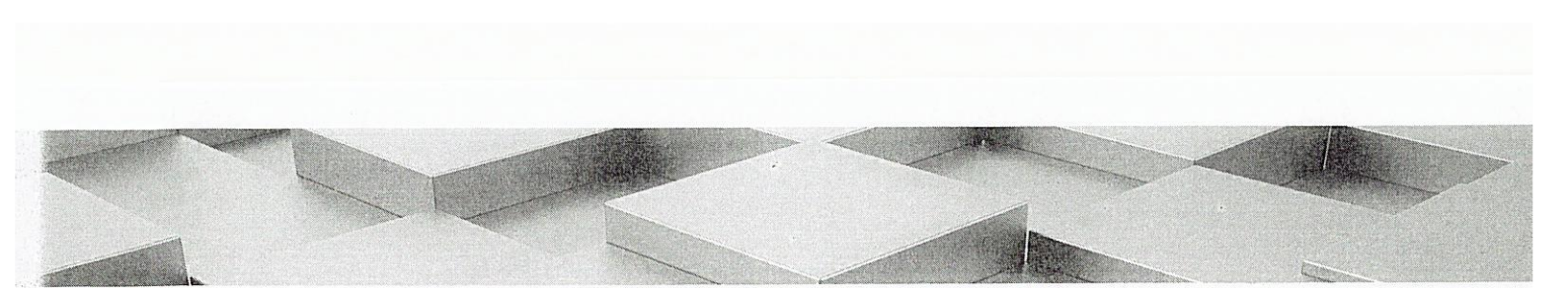


Indicator

By June 2025, the number of comprehensive smoke-free/tobacco-free policies will increase from 219 to 400.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track to meet the long-term goal. Although current social distancing measures due to COVID-19 restrict the ability of TPCP and the sub-grantees to have direct contact with community members and various policymakers, virtual trainings and conferences continued during the current quarter. See the Opportunities section for additional information on the training sessions provided by Project Prevent Youth Coalition and the Arkansas Cancer Coalition, as well as the joint Arkansas Cancer Summit and Clearing the Air in Communities of Color Conference.



TPCP Performance Indicators and Progress

Short-Term Objective

Communities shall establish local tobacco prevention initiatives.



Indicator

By June 2021, 500 presentations will be conducted to educate the public and decision makers on the economic burden of tobacco use, current and emerging tobacco/nicotine products, implementing smoke-free/tobacco-free policies, and dangers of exposure to secondhand smoke.

● Activity: In Need of Improvement; Influenced by COVID-19

This indicator is classified as in need of improvement since only 20 presentations of the targeted 500 have been conducted (all were completed this quarter). This indicator is directly impacted by the COVID-19 social distancing restrictions. During the 20 presentations conducted by TPCP sub-grantees, approximately 1,150 individuals were educated on such topics as the dangers of tobacco and e-cigarette use (including JUULing), emerging trends (of tobacco/nicotine products), the economic impact of tobacco use in Arkansas, and the Be Well Arkansas program.

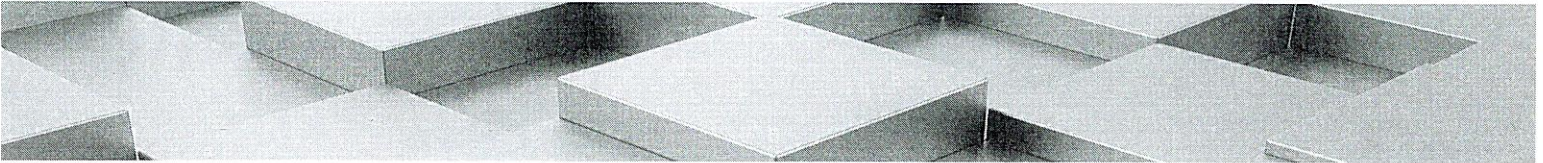


Indicator

By June 2021, maintain the sales to minor violations at 6.5% or below (Baseline in FY19 = 6.3%).

● Activity: On Track; Influenced by COVID-19

This indicator is on track. However, due to the COVID-19 restrictions, the number of sales-to-minor compliance checks and training sessions were greatly restricted this quarter. Arkansas Tobacco Control (ATC) received 21 complaints on stores selling tobacco/nicotine products to minors (18 complaints received through 1-877-ID TEENS and three through the online complaint form). Agents followed-up on the 18 valid complaints with seven retailers failing the recheck. During the last part of the quarter, ATC conducted eight additional compliance checks with two violations reported.



TPCP Performance Indicators and Progress

● Activity - CONT'D

Thus, this quarter, the sales to minor violations is 34.62%. During FY21 so far, there have been a total of 38 compliance checks and 14 violations resulting in a sales to minor violation level of 36.84%. Additionally, during this quarter the Observational Survey pilot project that was discussed in the previous report has begun. In this project, ATC agents work outside stores to confiscate tobacco/nicotine products when the stores sell to a youth and then cite the store for selling to a minor. During this quarter, 10 observational surveys were conducted with four encounters: one retailer received a citation for selling to a 17-year-old and three encounters led to the agents confiscating fake IDs. No training sessions were conducted for retailers in this quarter.



Indicator

By June 2021, Project Prevent will establish seven new school chapters within the Red Counties (Red Counties are those counties with low life expectancy).

● Activity: On Track; Influenced by COVID-19

This indicator is on track. While COVID-19 restrictions directly impact the programming provided by Project Prevent, during this quarter one new chapter was established in Little River County (classified as a Red County) at Foreman High School. See the Opportunities section for additional information on Project Prevent Chapter activities.



Indicator

By June 2021, ADH Health Communication will maintain a comprehensive, multiplatform media plan to prevent youth initiation, eliminate exposure to secondhand smoke, and promote cessation. (Report Annually)

● Activity: On Track

This indicator is on track. Because this indicator relates to various social media platforms, COVID-19 restrictions are not expected to directly influence this indicator. Data for this indicator will be reported annually in the fourth quarter of FY21.




TPCP Performance Indicators and Progress



Indicator

By June 2021, Be Well Arkansas will consistently maintain a tobacco cessation quit rate higher than the previous baseline level of 28% for those enrolled in the program. (Report Quarterly: # of callers requesting service; # of callers enrolled in tobacco cessation counseling {Reset Annually})




Activity: On Track

This indicator is on track. The annual quit rate will be provided in the fourth quarter. The number of calls received by the Be Well Arkansas program this quarter was 1,285 (3,936 year-to-date), while the number of eligible callers enrolled in tobacco cessation counseling this quarter was 692 (2,041 year-to-date). Additionally, hypertension and diabetes information was sent to 348 people (1,039 year-to-date).



Indicator

By June 2021, provide quarterly updates on the implementation of the Be Well Baby program.




Activity: On Track; Influenced by COVID-19

This indicator is on track. The Be Well Baby program officially launched this quarter. Three women enrolled with nine counseling sessions conducted. TPCP plans to heavily promote this program during the fourth quarter, so enrollment numbers are expected to increase prior to the end of FY21.



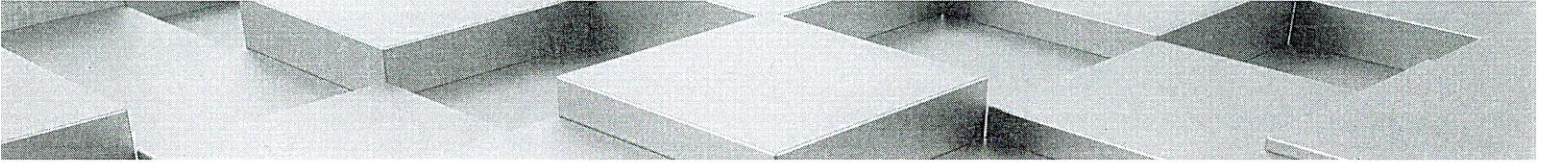
Indicator

By June 2021, the MISRGO will work with five new faith-based churches/organizations to implement No Menthol Sunday (NMS) activities.



Activity: On Track; Influenced by COVID-19

This indicator is on track. While this activity will occur in the fourth quarter, the toolkit has been released and MISRGO is offering mini-grant program support for implementation of No Menthol Sunday activities.



TPCP Performance Indicators and Progress



Indicator

By June 2021, the MISRGO will execute an annual event that supports the mission of the program and report on funded and non-funded attendees.

● **Activity: Met, Complete; Influenced by COVID-19**

This indicator has been met. The 18th Clearing the Air in Communities of Color Conference was held in conjunction with the Arkansas Cancer Coalition's Cancer Summit on March 9 and 10. A total of 206 individuals registered for the conference with 113 completing the survey for the Clearing the Air in Communities of Color on March 10. Over 80% of the respondents were very satisfied with the virtual platform and approximately 95% of the respondents were able to identify a tobacco control best practice to use in their community education efforts. See the Testimonials section for additional comments on the conference.



Indicator

By June 2021, the MISRGO will provide and report on technical assistance through direct stakeholders and property owners regarding reducing tobacco related disparities in Arkansas.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track. While no data are provided this quarter, one technical assistance workshop (via Zoom) was held for 18 community stakeholders during the first quarter of FY21.

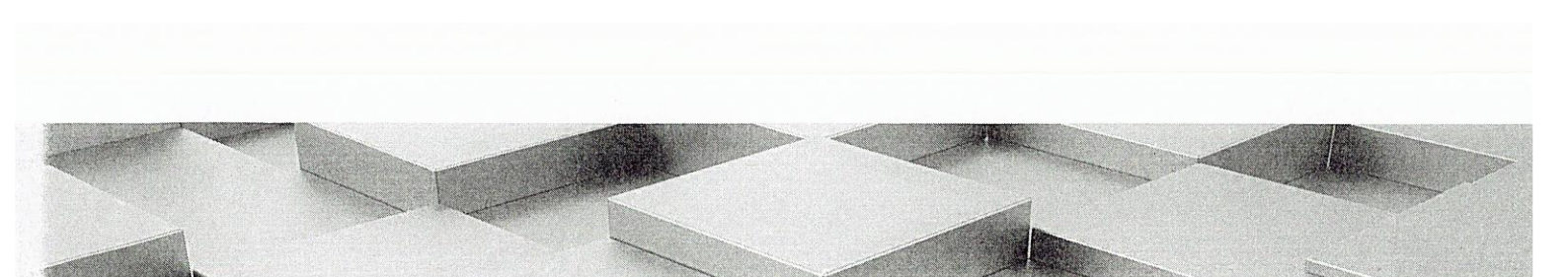


Indicator

By June 2021, the MRC will develop and implement an intervention on emerging tobacco products targeting minority students at 12 middle schools around the state.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track. It is expected that data for this indicator will be provided in the fourth quarter. COVID-19 restrictions will impact the ability to work with minority students at middle schools around the state.



TPCP Performance Indicators and Progress



Indicator

By June 2021, the MRC will distribute requests for proposals (RFP) to fund research studies focused on: 1. Tobacco cessation among African-American women tobacco users, 2. Tobacco cessation among Hispanic women tobacco users, 3. Tobacco and opioid use among minority youth and young adults.

● **Activity: On Track**

This indicator is on track. While no data are provided this quarter, during the first quarter the MRC funded two continuous RFPs for the first and third research topics.



Indicator

By June 2021, the MRC will work with African-American male college students to understand and compare knowledge, attitudes, behaviors, and risk perceptions associated with tobacco use.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track. It is expected that data for this indicator will be provided in the fourth quarter. COVID-19 restrictions are expected to impact interventions with African-American male college students.

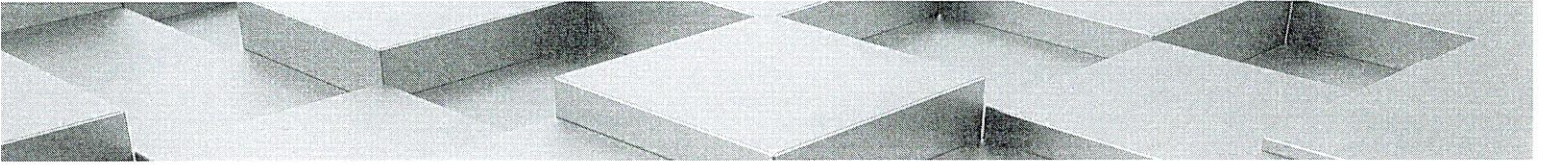


Indicator

By June 2021, the MRC will conduct six face-to-face meetings in minority communities to discuss tobacco usage among minority groups.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track. It is expected that data for this indicator will be provided in the fourth quarter. COVID-19 restrictions are expected to impact face-to-face interventions within minority communities.



TPCP Performance Indicators and Progress



Indicator

By June 2021, the MRC will submit six open editorials to small town newspapers focusing on tobacco-related issues in rural communities in Arkansas.

● Activity: On Track

This indicator is on track. It is expected that data for this indicator will be provided in the fourth quarter. COVID-19 restrictions are not expected to impact submission of the newspaper editorials.



Indicator

By June 30, 2021, GASP faculty and staff will report the number of new students recruited into their program, the number of students who have graduated from the program, and the number of students who have been provided a stipend.

● Activity: On Track; Influenced by COVID-19

This indicator is on track. As reported this quarter, three new students were admitted to the GASP, beginning their program of study in spring semester 2021. One student graduated in the second quarter of FY21. Finally, five students received stipends in the amount of \$950. These students will work on their assigned project under GASP faculty supervision. COVID-19 restrictions are expected to impact student recruitment and retention.

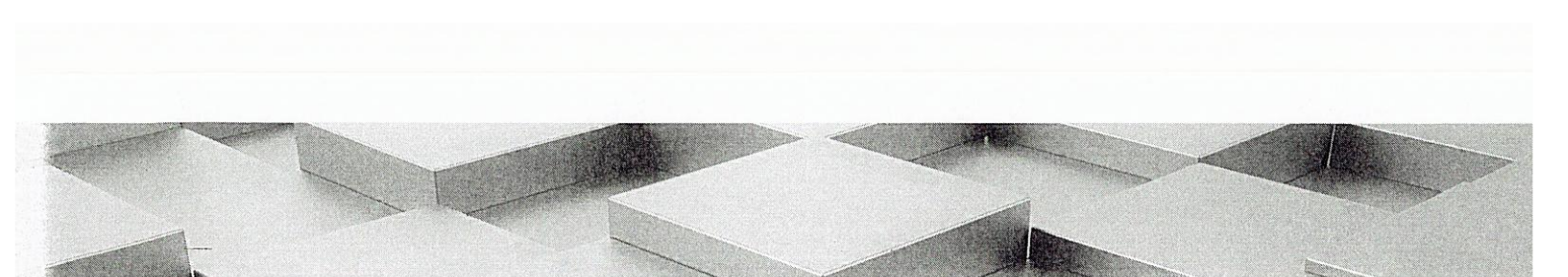


Indicator

By June 30, 2021, GASP faculty will identify programs interested in initiating tobacco prevention curriculum for juvenile justice programs in Jefferson County, Arkansas.

● Activity: On Track; Influenced by COVID-19

This indicator is on track. The Jefferson County Juvenile Justice Program has expressed interest in working with the GASP to initiate a tobacco prevention curriculum. With the noted interest, the GASP will request a FY22 Work Plan approval to develop the curriculum.



TPCP Performance Indicators and Progress



Indicator

By June 30, 2021, GASP faculty will explore the possibility of a learning partnership between Be Well Arkansas Quit Tobacco Program and the GASP students.



Activity: On Track; Influenced by COVID-19

This indicator is on track. The GASP Interim Chair and the Branch Chief for the Tobacco Prevention and Cessation Program scheduled a meeting during this quarter to discuss the partnership, but it had to be postponed until the fourth quarter.



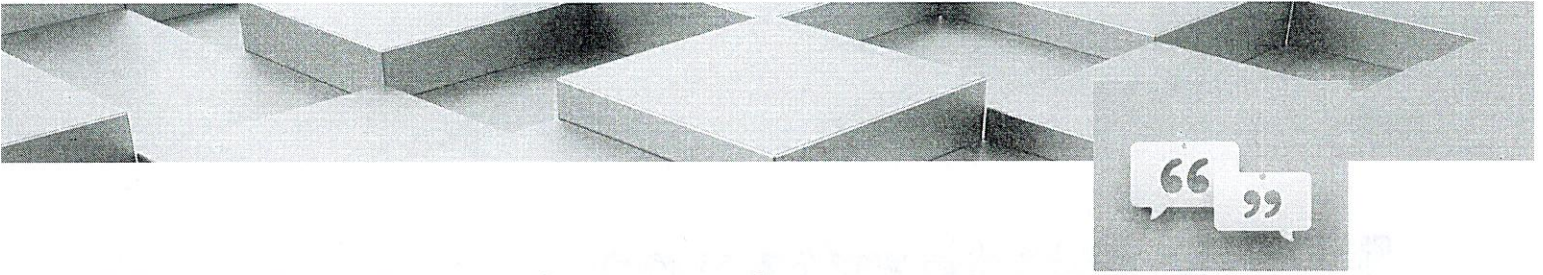
Indicator

By June 2021, GASP faculty and staff will develop an alumni survey addressing employment and credentials earned since graduation as well as GASP strengths, weaknesses, and areas for potential growth in substance use workforce development. Quarterly reports will highlight progress on the creation, administration, and evaluation of this survey.



Activity: On Track

This indicator is on track. The GASP faculty and staff developed an alumni survey and posted it on Survey Monkey in the FY21 second quarter. To date, 24 alumni have completed the survey. Survey results will be reported in the fourth quarter.



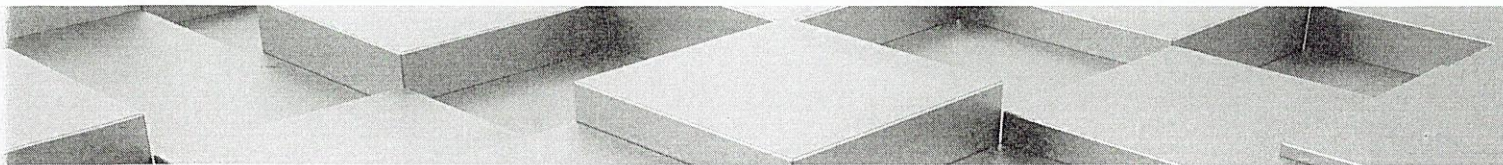
TPCP Testimonial

Praise for Joint Conference

The 22nd Arkansas Cancer Summit was held in conjunction with the 18th Clearing the Air in Communities of Color Conference on March 9-10. The conference theme was "Cancer in the COVID Era: Navigating Uncharted Waters." The conference featured key presenters from local and national organizations like American Cancer Society, CARTI, Arkansas Center for Health Improvement, Hope Cancer Resources, and others. A breakout session was also held, giving attendees three options for smaller group discussion and activity. The tobacco control breakout session topic was "Smoking, Vaping, and COVID-19: A Dangerous Mix."

Attendees reported that the conference, planning committee, facilitators, and presenters were "awesome" and "very informative."

One conference attendee stated, "I liked the usage of local talent and programs in the conference." Another attendee, and TPCP sub-grantee, reflected, "In spite of the pandemic, you keep pushing. You provide excellent support to sub-grantees."



TS-MEP Evaluator Summary and Comments

Program Description

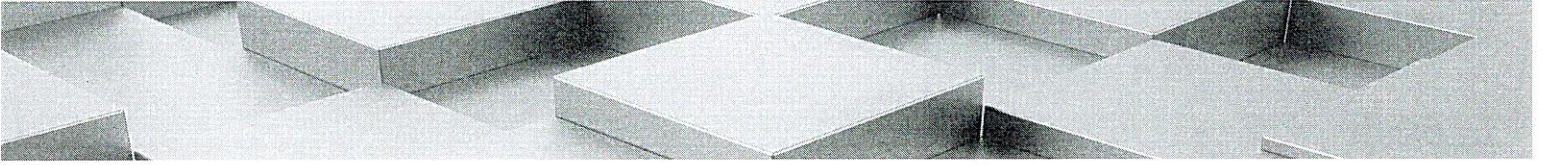
The Tobacco Settlement Medicaid Expansion Program (TS-MEP) is a separate and distinct component of the Arkansas Medicaid Program that improves the health of Arkansans by expanding healthcare coverage and benefits to targeted populations. The program works to expand Medicaid coverage and benefits in four populations:

- Population one expands Medicaid coverage and benefits to pregnant women with incomes ranging from 138–200% of the Federal Poverty Level (FPL);
- Population two expands inpatient and outpatient hospital reimbursements and benefits to adults aged 19–64;
- Population three expands non-institutional coverage and benefits to seniors age 65 and over;
- Population four expands medical assistance, home and community-based services, and employment supports for eligible adults with intellectual and developmental disabilities and children with intellectual and developmental disabilities.

The Tobacco Settlement funds are also used to pay the state share required to leverage federal Medicaid matching funds.

Overall Program Goal

The goal of the TS-MEP is to expand access to healthcare through targeted Medicaid expansions, thereby improving the health of eligible Arkansans.



TS-MEP Evaluator Summary and Comments

Challenges

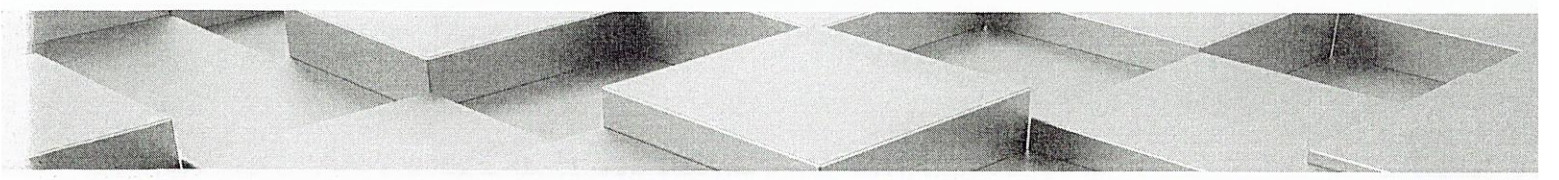
As a result of the implementation of the Arkansas Works program, traditional Medicaid expenditures have decreased. Many Medicaid-eligible adults aged 19-64 are covered by the Arkansas Works program and receive their coverage through Qualified Health Plans in the individual insurance market. Arkansas Medicaid pays the monthly insurance premiums for the majority of these individuals. For the TS-MEP populations, Pregnant Women Expansion was expected to significantly decline as individuals are provided health coverage outside of the TS-MEP. As of now, successful performance has been measured by growth in the number of participants in the TS-MEP initiatives. The Arkansas Department of Human Services (DHS) may need to continue to explore new performance measurements for the TS-MEP initiatives as individuals are transitioning into new coverage groups.

Opportunities

With the TS-MEP program, the DHS provides support for the four TS-MEP populations as well as the state's overall Medicaid efforts. The DHS has had the legislative authority for over fifteen years to use any savings in the TS-MEP programs to provide funding for traditional Medicaid. These savings are not used to provide any funding for the Arkansas Works program. As the state of Arkansas continues to explore opportunities for Medicaid reform, new possibilities for using TS-MEP funds may emerge.

Evaluator Comments

The TS-MEP has been impacted by the significant changes in the healthcare system. During this quarter, the Pregnant Women Expansion, the ARSeniors, and the Hospital Benefit Coverage populations had notable decreases in the number of persons being served while the persons with developmental disabilities had a slight increase. The COVID-19 pandemic has influenced all populations served through TS-MEP. With many elective medical procedures being placed on temporary hold at the beginning of the pandemic, there was a decrease in claims as individuals delayed seeking treatment.



TS-MEP Performance Indicators and Progress

Long-Term Objective

Demonstrate improved health and reduce long-term health costs of Medicaid eligible persons participating in the expanded programs.



Indicator

The TS-MEP will demonstrate improved health and reduced long-term health costs of Medicaid eligible persons participating in the expanded programs.

Activity: In Need of Improvement; Influenced by COVID-19

This indicator is in need of improvement to meet the annual goal. With the implementation of the Arkansas Works program, more individuals will have health coverage beyond the TS-MEP initiatives. Therefore, the TS-MEP long-term impact will be limited compared to the influences outside of the TS-MEP. During this quarter, the TS-MEP provided expanded access to health benefits and services for 12,283 eligible pregnant women, seniors, qualified adults, and persons with developmental disabilities. This is a decrease of 1,481 persons served over the previous quarter. Total claims paid for the TS-MEP populations this reporting period were \$21.9 million. Additionally, TS-MEP funds are also used to pay the state share required to leverage approximately 70% federal Medicaid matching funds. This amounted to more than \$15.9 million in federal matching Medicaid funds during this quarter, which has a significant impact on health costs and health outcomes for the state of Arkansas.



TS-MEP Performance Indicators and Progress

Short-Term Objective

The Arkansas Department of Human Services will demonstrate an increase in the number of new Medicaid eligible persons participating in the expanded programs.



Indicator

The TS-MEP will increase the number of pregnant women with incomes ranging from 138-200% of the FPL enrolled in the Pregnant Women Expansion.

Activity: In Need of Improvement; Influenced by COVID-19

This indicator is in need of improvement to meet the annual goal. During this quarter, there were 1,357 participants in the TS-MEP initiative Pregnant Women Expansion program. This is a decrease of 165 women being served from the previous quarter. This program provides prenatal health services for pregnant women with incomes ranging from 138-200% FPL. In this quarter, the TS-MEP funds for the Pregnant Women Expansion program totaled \$1,220,732.



Indicator

The TS-MEP will increase the average number of adults aged 19-64 years receiving inpatient and outpatient hospital reimbursements and benefits through the Hospital Benefit Coverage.

Activity: In Need of Improvement; Influenced by COVID-19

This indicator is in need of improvement to meet the annual goal. During this quarter, the TS-MEP initiative Hospital Benefit Coverage provided inpatient and outpatient hospital reimbursements and benefits to 5,155 adults aged 19-64 by increasing the number of benefit days from 20 to 24 and decreasing the co-pay on the first day of hospitalization from 22% to 10%. This is a decrease of 1,055 in the number of adults served over the previous quarter. Funds for the Hospital Benefit Coverage totaled \$6,168,157.



TS-MEP Performance Indicators and Progress



Indicator

The TS-MEP will increase the average number of persons enrolled in the ARSeniors program, which expands non-institutional coverage and benefits for seniors aged 65 and over.




Activity: In Need of Improvement; Influenced by COVID-19

- This indicator is in need of improvement to meet the annual goal. The ARSeniors program expanded Medicaid coverage to 5,307 seniors during this quarter. This is a decrease of 267 persons from the previous quarter. Qualified Medicare Beneficiary recipients below 80% FPL automatically qualify for ARSeniors coverage. Medicaid benefits that are not covered by Medicare are available to ARSeniors. Examples of these benefits are non-emergency medical transportation and personal care services. Funds for the ARSeniors program totaled \$3,529,670 during this quarter.



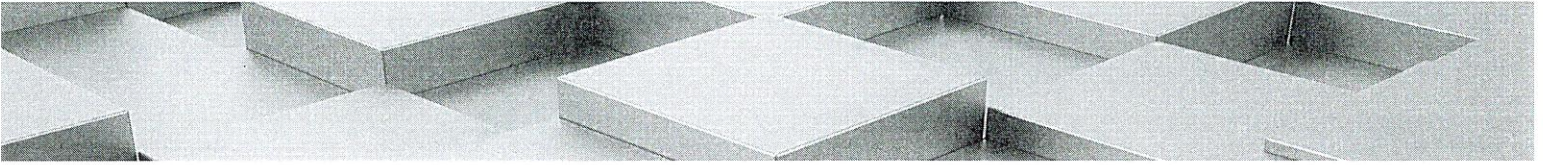
Indicator

The TS-MEP will increase the average number of persons enrolled in the Developmental Disabilities Services, Community and Employment Supports (CES) Waiver and note the number of adults and children receiving services each quarter by county.



Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the annual goal. During this quarter, 464 individuals were provided services through TS-MEP funds. This is a slight increase of six in the number of persons served from the previous quarter. In this quarter, a total of 215 children (18 and under) and 249 adults (19 and over) in 66 counties were provided services. Funds for the CES waiver program totaled \$11,015,886 in this quarter.



UAMS-COA Evaluator Summary and Comments

Program Description

The purpose of the UAMS Centers on Aging is 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 overall goal is to improve the quality of life for older adults and their families through two primary missions: an infrastructure that provides quality interdisciplinary clinical care and innovative education programs.

Overall Program Goal

The goal of the UAMS-COA is to improve the health of older Arkansans through interdisciplinary geriatric care and innovative education programs and to influence health policy affecting older adults.



UAMS-COA Evaluator Summary and Comments

Challenges

The overall aging of the state's population coupled with an unstable national healthcare model continues to be the primary challenge to the clinical aspects of this agency's mission. The UAMS-COA remains committed to ensuring that seniors in Arkansas have the best possible access to healthcare services in places where Senior Health Clinic access is unavailable. However, the elevated vulnerability of seniors with regard to the COVID-19 pandemic has imposed a number of new barriers to clinic access. Additional challenges this quarter are described below.

- The COVID-19 pandemic disrupted the standard modes of service delivery throughout this quarter. For example, the COVID-19 pandemic abruptly halted all Certified Nursing Assistant (CNA) classes in the spring due to lack of clinical access in long-term care facilities and limited PPE supplies. While these classes have started again, they remain limited through this quarter due to safety-related CDC restrictions.
- Due to the vulnerabilities present in UAMS-COA client populations as the pandemic spikes, innovating service design and delivery remains a priority. While online alternatives have been provided, these alternatives cannot fully replace traditional programming (for example, exercise activities are limited by safety concerns for remote participants).
- Reprioritizing training efforts in some areas is needed as funding shifts occur. Of main concern is the end of the Schmieding Home Caregiver Training Grant funding (this grant ended in September 2020). The CNA training through UAMS-COA may no longer be sustainable without additional funding.
- Staffing issues continue to threaten the flow of services throughout the state. This impacts both COA staffing and clinic access. At the time of this report, only one site leader position in the state remained vacant but the increased demand for healthcare professionals persistently poses problems for hiring and retention.
- Adequate supervision of COAs in more remote regions of Arkansas has always been a concern of this agency. Efforts have been made to address some of the issues. However, keeping staff trained and monitoring activity across the COAs remains challenging.



UAMS-COA Evaluator Summary and Comments

Challenges - CONT'D

- Changes in healthcare delivery models continue to negatively impact the capacity of Senior Health Clinics across the state. The UAMS-COA must continue to adjust the referral process to ensure that seniors receive the specialized geriatric care they need.
- Due to underdeveloped infrastructure, poverty, and small and decentralized populations, the basic UAMS-COA model is more difficult to employ in some areas of the state. More effort is needed to find effective modes of delivery for serving seniors in impoverished, hard-to-reach communities. These concerns escalated during the pandemic as an increasing volume of COA client services have, out of necessity, shifted to an internet-based model. Client services are unavailable to many as substantial portions of the state lack reliable broadband access.
- Changing racial and ethnic demographics of seniors in some areas of the state necessitate planning for more inclusive communication and the development of bilingual or multilingual materials and programs.
- Many of the best evidence-based programs require smaller groups and one-on-one caregiver coaching. Shifting to these types of programs threatens to decrease the quantity of encounters.
- The agency continues developing the data collection and data processing capacity needed to fully assess program outcomes. Much progress has been made on developing a new monitoring system, but challenges remain. New efforts are underway to develop a more standardized measure of health improvement that can be associated with program participation.
- It may be time to explore and introduce new evidence-based exercise options offered to seniors in the state. Participants are beginning to demand more variety. Some of the current options are hard to monitor for quality and safety using online interaction formats.
- Many of the programs and services offered through UAMS-COA have an indirect effect on senior health in Arkansas. The UAMS-COA continues efforts aimed at demonstrating the net positive impact (including the economic impact) of services provided by the agency. However, the return-on-investment models have not yet been sufficiently developed. Disruptions created by COVID-19 have altered key variables and have stalled development of these return-on-investment models.



UAMS-COA Evaluator Summary and Comments

Challenges - CONT'D

- As state and federal funding continues to evaporate, and as older funding commitments end (e.g., Schmieding), maintaining external funding streams is more important than ever. The UAMS-COA is currently finding funds through grants, service contracts, donations, and volunteer support. However, these tend to be short-term solutions. Ensuring necessary levels of support over the long-term remains a challenge.
- Finding time and other resources necessary to keep current with best practices in geriatric care is an enduring challenge. The UAMS-COA must continue to secure professional development opportunities for staff to ensure high quality programming.

Overall, the UAMS-COA recognizes its key challenges and is in the process of formulating strategies to address them.

Opportunities

The UAMS-COA continues to seek and find ways to cope with changes in healthcare systems and changes in the needs of the population served. Some of the most encouraging opportunities are described below.

- *Distribution of services:* The UAMS-COA ordinarily offers at least minimal services to residents in most of the 75 counties in Arkansas. However, the COVID-19 pandemic has limited the typical reach of the agency to approximately 40 counties during this quarter. While many traditional client-based services have been interrupted, the pandemic has compelled COA directors and clients to embrace new forms of communication. Some of these new tools and techniques may eventually help the COAs provide a richer set of services to a broader base of clients.



UAMS-COA Evaluator Summary and Comments

Opportunities - CONT'D

- *Technology:* The agency continues to advance its approach to technology to expand public access to information and educational programming. This includes the expansion of online support groups for caregiving and disease management. If not for earlier investments in online technology, the COVID-19 pandemic would have more severely truncated services this quarter. The pandemic forced both the staff and clients of COAs to develop new skills that enabled them to stay connected. These new technologies are likely to continue being employed after the pandemic and will enable a broader audience than was possible before.
- *Enhanced attention to the Delta region:* The UAMS-COA continues expanding relationships with UAMS East Regional Campus combining resources to better serve Crittenden, Monroe, Lee, St. Francis, and Phillips counties by implementing Walk with Ease, the Diabetes Empowerment Education Program, Cooking Matters, and opioid events. Further, the UAMS-COA has started training an Advanced Practice Nurse Practitioner for the opening of the new Delta Center on Aging.
- *Raising awareness:* The UAMS-COA continues raising awareness about the challenges of aging in Arkansas. Representatives from the agency continually pursue public relations opportunities to combat ageism, encourage successful aging practices, and generally celebrate the contributions of older adults in the state. In particular, the UAMS-COA worked this quarter to raise awareness of dementia in the state. The agency educated the Arkansas legislature in relation to developing a state-wide dementia care plan.
- *Partnerships:* The UAMS-COA continues to be effective at establishing partnerships to lead the state with respect to mitigating opiate abuse, expanding geriatric caregiver training, reducing hunger among seniors, and increasing awareness of chronic disease. Partnerships this quarter include interfaith organizations, Alzheimer's Arkansas, SHIPP (Senior Health Insurance Information Program), rural health clinics, elder law resources, senior housing, workforce development, AR Rehab, long-term care facilities, Veteran's Administration, CASA (Committee Against Spousal Abuse) Women's Shelter, Assisted Living, Senior Home Caregiver agencies, Alzheimer's Association, Senior Olympics, Crystal Bridges Museum, Department of Aging Services, local businesses, and parks and recreation departments.



UAMS-COA Evaluator Summary and Comments

Opportunities - CONT'D

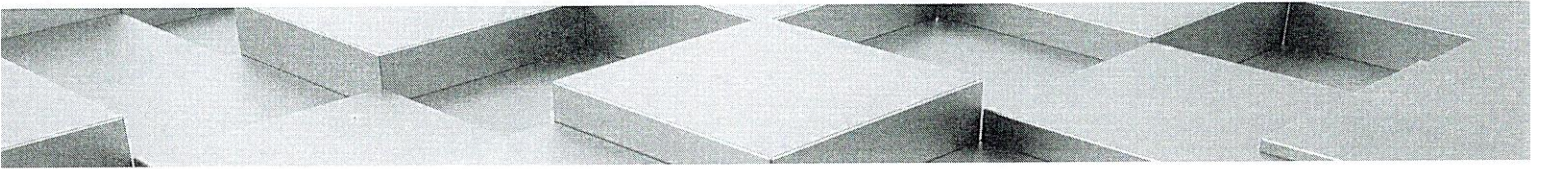
Overall, despite new challenges created by the pandemic, the UAMS-COA is open to innovation and actively seeking opportunities that contribute positively to the health of older Arkansans.

Evaluator Comments

Although key services have been modified to keep clients safe during the COVID-19 pandemic, prevailing evidence suggests that the UAMS-COA continues fulfilling its mission to advance the state's agenda for successful senior health services, knowledge, and programming in Arkansas. Despite declines in external funding and strains on conventional service modalities, the UAMS-COA has enhanced senior health this quarter through the following activities:

- Maintaining alliances between nonprofit, for-profit, and state-funded agencies to better address the needs of older adults in Arkansas;
- Helping to educate the community about the special needs of older adults;
- Providing exercise opportunities to seniors in the state (through digital platforms);
- Recognizing the necessity of fall prevention education for seniors and mobilizing resources to meet the need;
- Leading efforts to address the opiate crisis among seniors and develop alternative therapies for pain management;
- Working to develop better models of long-term care in Arkansas;
- Working to educate caregivers and increase the capacity for quality in-home senior healthcare;
- Focusing on dementia care and building dementia-friendly communities; and
- Addressing needs exacerbated by the pandemic such as social isolation and hunger among older adults.

Although COVID-19 continued to disrupt daily operations throughout the quarter, the UAMS-COA is on a reasonable pace to meet most of its annual goals.



UAMS-COA Performance Indicators and Progress

Long-Term Objective

Improve the health status and decrease death rates of elderly Arkansans as well as obtain federal and philanthropic grant funding.



Indicator

The UAMS Centers on Aging will provide multiple exercise activities to maximize the number of exercise encounters for older adults throughout the state.

Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the annual goal, although the effort has been substantially altered due to COVID-19 concerns. A total of 4,605 exercise encounters with aging Arkansans were counted during this reporting period. Note that these are not the same types of “in-person” exercise encounters as counted in quarters prior to the COVID-19 outbreak. Exercise was facilitated (and proper technique was demonstrated) using online tools such as Facebook Live and Zoom because COVID-19 vaccinations did not become widely available until after this quarter. Despite the challenges created by shifting exercise online, the UAMS-COA was able to provide approximately 163 hours of exercise programming to seniors this quarter.

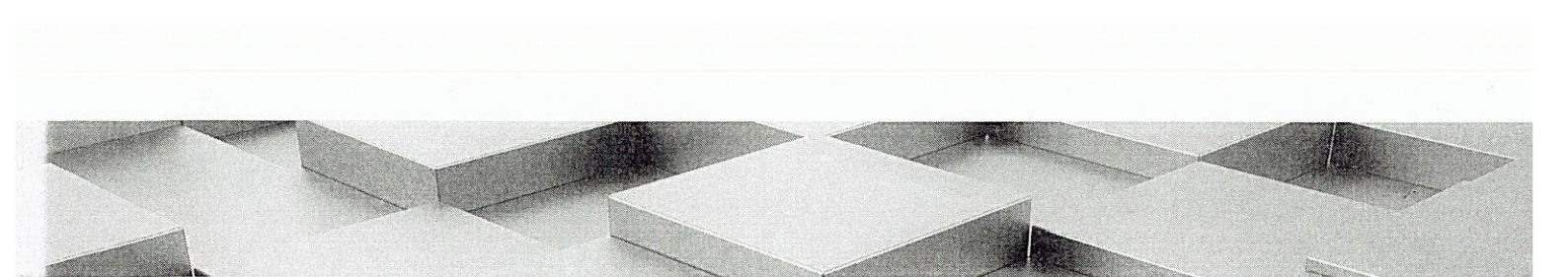


Indicator

The UAMS Centers on Aging will implement at least two educational offerings (annually) for evidence-based disease management programs.

Activity: Exceeding Expectations; Influenced by COVID-19

This indicator is exceeding expectations to meet the annual goal. The agency report 3,119 educational encounters with Arkansans. Note that these are not the same types of “in-person” encounters as counted in quarters prior COVID-19. A majority of sessions were conducted using online tools such as Facebook Live and Zoom because COVID-19 vaccinations did not become widely available until after this quarter.



UAMS-COA Performance Indicators and Progress

● **Activity - CONT'D**

Despite limitations imposed by COVID-19, the UAMS-COA continued to offer evidence-based educational programs that address a range of health priorities related to aging. This quarter, UAMS-COA staff provided 523 hours of educational offerings in three focal areas: caregiving/dementia training, fall prevention, and opioid addiction/pain management.

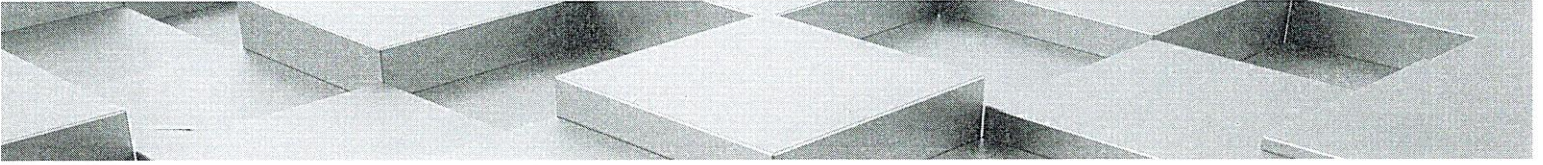


Indicator

On an annual basis, the UAMS Centers on Aging will obtain external funding to support programs in amounts equivalent to ATSC funding for that year.

● **Activity: In Need of Improvement; Influenced by COVID-19**

This indicator is in need of improvement. In this quarter, the UAMS-COA developed external support from various sources valued at approximately \$283,131. While this is a substantial amount, it falls \$154,629 short of the figure needed to stay on track to meet the annual goal. The UAMS-COA and its affiliates continued to be productive in securing external funding but failed to meet its quarterly goal due in large part to disruptions associated with the pandemic. During this quarter, \$16,786 was raised from four different grants to support programming. The Walk with Ease grant designated to support a fall prevention program and valued at \$11,503 was the most substantial grant. The agency also received \$17,735 through contractual service agreements. Another large stream of external funding was derived from community foundations (Schmieding), which provided \$115,257 to support Schmieding Center operations. Additional extramural funding included community partner donations (\$12,386), UAMS core support (\$114,000), and the value of volunteer hours supplied to the COAs (\$294). The fact that most of these amounts are lower than in previous quarters might indicate a temporary impact created by the pandemic (for example, volunteer hours are significantly reduced). However, the expiration of the Schmieding Home Caregiver Training Grant has had the greatest overall impact this quarter. Overall, the UAMS-COA leveraged \$283,131 above the \$437,759 in quarterly funding provided through the ATSC.



UAMS-COA Performance Indicators and Progress

Short-Term Objective

Prioritize the list of health problems and planned interventions for elderly Arkansans and increase the number of Arkansans participating in health improvement programs.



Indicator

The UAMS Centers on Aging will assist local healthcare providers in maintaining the maximum number of Senior Health Clinic encounters through a continued positive relationship.

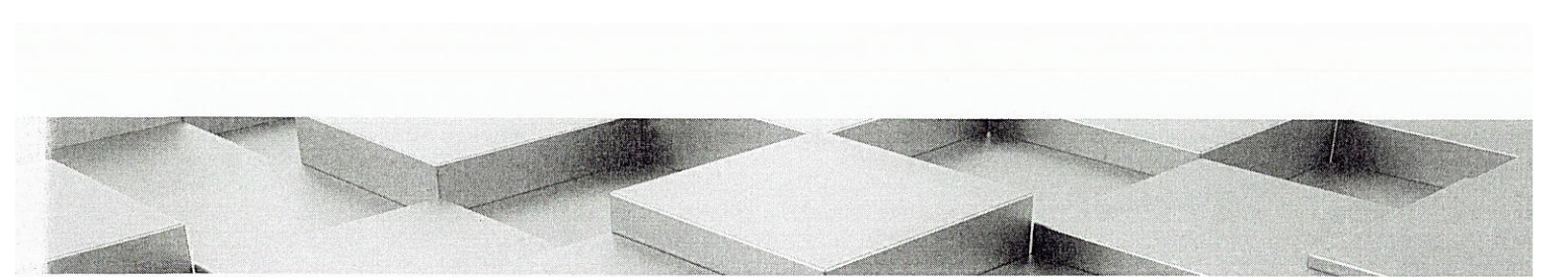
Activity: On Track; Influenced by COVID-19

This indicator is on track to meet the annual goal. The UAMS-COA recorded 7,656 Senior Health Clinic encounters during this reporting period. The UAMS-COA also added 390 nursing home encounters and 315 inpatient encounters during the quarter. Clinic numbers are higher than reported in the previous quarter and these numbers appear to be on pace to equal counts from 2018 and 2019. However, several COAs (South Arkansas, South Central, and Delta were not able to safely engage in clinic-related activity during this period). Given the diminished capacity of clinics during the quarter, UAMS-COA is doing the best it can do to broker clinical services. Clinic encounters are expected to increase again when the dangers of COVID-19 become more manageable.



Indicator

The UAMS Centers on Aging will provide education programming to healthcare practitioners and students of the healthcare disciplines to provide specialized training in geriatrics.



UAMS-COA Performance Indicators and Progress

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track to meet the annual goal, although opportunities to train healthcare workers and students were severely restricted due to COVID-19. The UAMS-COA produced 10 hours of educational presentations and in-service training opportunities attended by 47 healthcare workers during this reporting period (some encounters were conducted via video conference). The UAMS-COA was also responsible for providing instruction to 80 students in training for healthcare occupations (half of these encounters were conducted via video conference).



Indicator

The UAMS Centers on Aging will provide educational opportunities for the community annually.

● **Activity: On Track; Influenced by COVID-19**

This indicator is on track to meet the annual goal. Many conventional in-person educational opportunities during this quarter were blocked by COVID-19 restrictions. However, using social media and other digital means of communication, the UAMS-COA generated 10,285 community education encounters during this reporting period. A large number of these encounters (8,344) were conducted via Facebook.



Indicator

On an annual basis, the UAMS Centers on Aging will develop a list of health problems that should be prioritized and education-related interventions that will be implemented for older Arkansans.

● **Activity: Met, Complete**

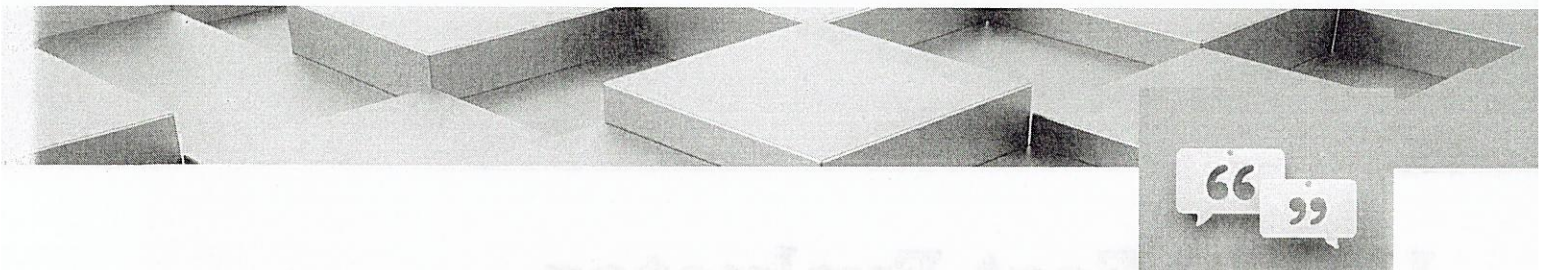
This indicator has been met for the calendar year and no further progress is needed. Planning for FY21 was completed in June 2020 with a virtual meeting of COA directors who were asked to consider the specific health problems of the region served by their agencies.



UAMS-COA Performance Indicators and Progress

● Activity - CONT'D

A list of prioritized problems and interventions was generated. The list is similar to the FY20 priorities and includes a continued emphasis on fall prevention, an emphasis on opioid addiction/pain management, and an emphasis on caregiving/dementia training. The UAMS-COA will continue to monitor the current and emerging needs of older Arkansans throughout the year. The COA directors will meet again in the fourth quarter of FY21 to share experiences, review health indicators, and develop a list of priorities for FY22.



UAMS-COA Testimonial

Program Praise

- "The information I obtained was very informative. I didn't realize so many COVID-19 vaccine scams were out there, and I didn't know where to report them. Great job on getting the information to the public." -- Attendee at COVID-19 vaccine scams presentation, South Central COA
- "Until I retired five years ago, I was very active. Although I intended to stay just as active and pursue multiple hobbies and special projects as before I retired, I became a couch potato. Suddenly I stopped exercising altogether and only let the dogs out in the front yard. By March 1, 2020, I was so weak, stiff, and sore when I woke up, went to sleep, or tried to sleep that I had to support myself by leaning on furniture and going upstairs/downstairs by clinging to the rail. So these Schmieding Center exercise programs have literally been a lifesaver for me." -- Attendee at exercise programs, Schmieding Center
- "This course has taught me how to give proper care and how formal training can help you prevent negligent mistakes. Being misinformed can actually do more harm than help, but when you know how to do something better as well as have proper training, you become your patient's advocate and first line of defense." -- Healthcare student, Texarkana COA



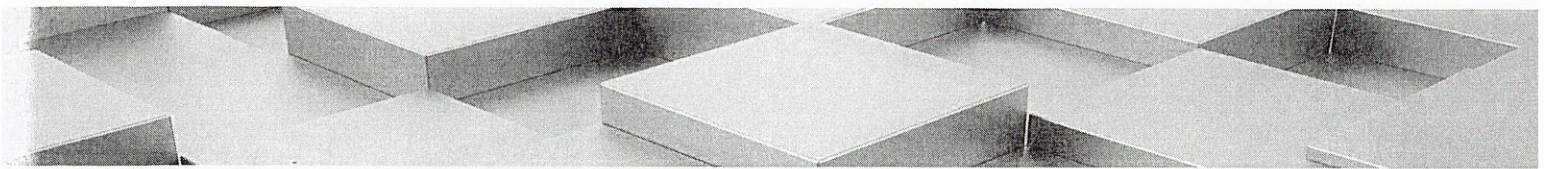
UAMS East Evaluator Summary and Comments

Program Description

The University of Arkansas Medical Sciences East Regional Campus provides healthcare outreach services to seven counties including St. Francis, Lee, Phillips, Chicot, Desha, Monroe, and Crittenden counties. The UAMS East Regional Campus, formerly known as the Delta Area Health Education Center and UAMS East, was established in 1990 with the purpose of providing health education to underserved populations in the Arkansas Delta region. The counties and populations served by the UAMS East Regional Campus are some of the unhealthiest in the state with limited access to healthcare services being one of the challenges. As a result of limited access and health challenges, the UAMS East Regional Campus has become a full-service health education center with a focus on wellness and prevention for this region. The program has shown a steady increase in encounters with the resident population and produced a positive impact on the health and wellness of the region. Programs to address local health needs of residents are being implemented in partnership with more than 100 different agencies. The overall mission of the UAMS East Regional Campus is to improve the health of the Delta's population. Goals include increasing the number of communities and clients served and increasing access to primary care providers in underserved counties.

Overall Program Goal

The goal of the UAMS East Regional Campus is to recruit and retain healthcare professionals and to provide community-based healthcare and education to improve the health of the people residing in the Delta region.



UAMS East Evaluator Summary and Comments

Challenges

One of the major challenges continues to be increasing the patient population in the Family Medical Center. This challenge is confounded by the difficulty of maintaining clinical staff.

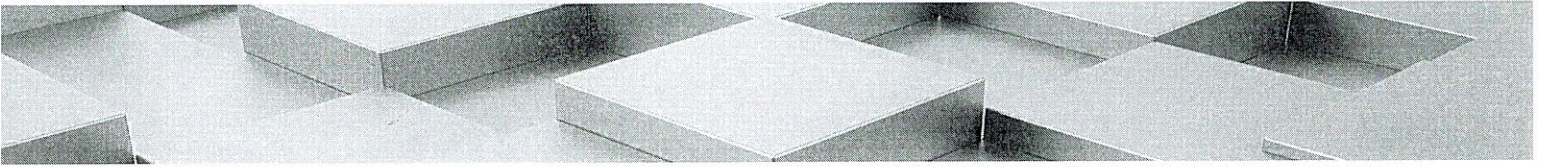
The mitigation efforts to control the COVID-19 virus continue to impact the outreach efforts of UAMS East as many of the schools and businesses have not returned to normal operations.

Opportunities

UAMS East Regional Campus at Lake Village is trying to reach more junior/senior high school students using Instagram @chicotdeshahealthcareers. Different healthcare workers in Chicot and Desha counties will be spotlighted every other week. This opportunity is a great way for students to learn about local healthcare professionals and their careers.

The UAMS Rural Research Network just hired an associate director of research that will be physically located at UAMS East Regional Campus. This position will serve research activities for the statewide Regional Programs network.

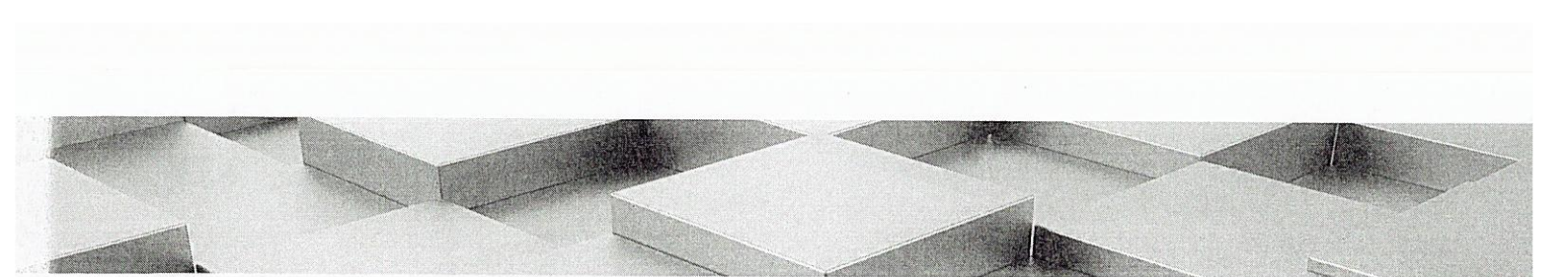
Dr. Becky Hall, UAMS East Regional Campus director, has been included as a principal investigator in a HRSA grant written for Phillips County. The grant involves utilizing community health workers to work with underserved and minority populations to provide education related to COVID-19 vaccinations and COVID-19 prevention strategies including wearing masks, hand washing, and social distancing.



UAMS East Evaluator Summary and Comments

Evaluator Comments

The mitigation efforts to control the COVID-19 virus continue to impact the outreach efforts of UAMS East to schools and businesses. Many of the screening, education, and recruitment efforts could not be conducted as usual due to limited access to schools and businesses. Much of the work that would normally be done with screenings and health promotion education has been redirected to COVID-19 education and vaccination promotion and delivery. Education and counseling regarding smoking cessation was increased this quarter. Additionally, the new diabetes education program began offering its first class to Delta residents. The UAMS Fitness Center has not fully reopened but is operating at reduced capacity to maintain social distancing. Group exercise programs are now being offered at UAMS East in Helena and Lake Village. Staffing issues at the Family Medical Center continue to delay progress on meeting the requirements for establishing a Rural Residency Training Program. The lack of a full-time primary care physician has impacted the ability of the clinic to attract new patients and to increase the overall patient population. In spite of these difficulties, UAMS East Family Medical Center is providing quality healthcare services in innovative ways such as telehealth, home visits, and specialty clinics.



UAMS East Performance Indicators and Progress

Long-Term Objective

Increase the number of health professionals practicing in the UAMS East Regional Campus service areas.



Indicator

The UAMS East Regional Campus will maintain the number of students participating in pre-health professions recruitment activities.

Activity: Cannot Determine Progress due to COVID-19

Influence on Program Activity

Progress toward the annual goal cannot be determined this quarter due to COVID-19's influence on program activities. Progress will be reevaluated in upcoming quarters. UAMS East's efforts for recruitment activities are detailed below.

- UAMS East Regional Campus Recruiting Specialist has had to adapt to COVID-19 pandemic as others have. UAMS recruiting specialists have not been allowed to enter a school or host a community event. Therefore, the primary focus has been to help facilitate AHEC (Arkansas Health Education Center) Scholars, which is a required program by HRSA (Health Resources and Services Administration) and the POSME (Point of Service Maintenance and Enhancement) Grant. AHEC Scholars is a national program for health professions students interested in rural or community-based practice. Eligible students should have an interest in rural or underserved healthcare and be enrolled in an approved health professions program. Approved degree programs include medical, pharmacy, and physician assistant programs. The program duration is a two-year commitment and includes a \$1,000 award during the student's third year. Each year includes instruction in the following core topic areas for a total of 160 hours: Interprofessional Education, Behavioral Health Integration, Social Determinants of Health, Cultural Competency, Practice Transformation, and Current and Emerging Health Issues.



UAMS East Performance Indicators and Progress

● Activity - CONT'D

- This quarter, the eight recruiters from each campus have succeeded in recruiting over 120 students, which was the requirement from HRSA. Four of these students are from the UAMS East service region. The recruiters will follow their students they advise through graduation for at least one year during their first year of residency.
- Another program, MD Mentors, continues to connect pre-med students to UAMS College of Medicine students through Zoom meetings, emails, and phone calls. This has proved to be very successful and will continue through the summer months.
- The Regional Campus recruiters are working on a summer virtual camp called "Find Your Future in Health Care." Recruiters have over 150 students from around the state, 12 of which are from the UAMS East Regional Campus counties. These 12 students all are from underserved, rural communities. Each camp will be a three-day experience, one in June and one in July. The purpose is to focus on the underserved, minority, and rural students of Arkansas.
- Lastly, UAMS East Regional Campus at Lake Village provided Hands on Healthcare via Zoom to 88 students.

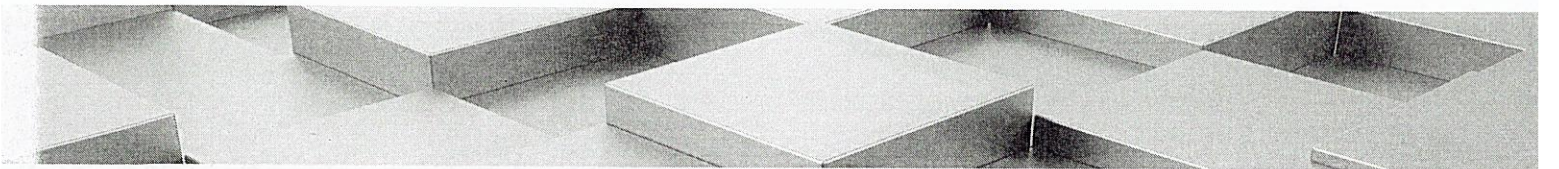


Indicator

The UAMS East Regional Campus will continue to provide assistance to health professions students and residents, including RN to BSN and BSN to MSN students, medical students and other interns.

● Activity: On Track

This indicator is on track to meet the annual goal. UAMS East Regional Campus continues to provide support to local nursing students enrolled at PCC/UA (Phillips Community College at the University of Arkansas). This quarter, UAMS East provided support to 42 nursing students. UAMS East Regional Campus currently does not have any students in the RN to BSN or in the FNP (Family Nurse Practitioner) with UAMS.



UAMS East Performance Indicators and Progress

Short-Term Objective

Increase the number of communities and clients served through UAMS East Regional Campus.



Indicator

The UAMS East Regional Campus will maintain the number of clients receiving health screenings, referrals to primary care physicians, and education on chronic disease prevention and management within 10% of the previous year.

Activity: Cannot Determine Progress due to COVID-19

Influence on Program Activity

Progress toward the annual goal cannot be determined this quarter due to COVID-19's influence on program activities. Progress will be reevaluated in upcoming quarters. UAMS East's efforts related to this indicator are detailed below.

- UAMS East Regional Campus in Helena conducted a Mobile Vaccine Clinic with additional staff from UAMS. Working collectively, the group administered 234 vaccines for residents in Helena and surrounding communities. UAMS East staff advertised, provided patient reminders, and worked the mobile clinic. Also, UAMS East Regional Campus at Lake Village helped facilitate a COVID-19 drive-thru vaccination clinic for 300 residents in Chicot County. UAMS East at Lake Village provided blood pressure monitoring for members of the Community Outreach Center. Seventy-two blood pressure screenings were provided with 24 abnormal readings.



Indicator

The UAMS East Regional Campus will maintain a robust health education promotion and prevention program for area youth and adults.



UAMS East Performance Indicators and Progress

● **Activity: Cannot Determine Progress due to COVID-19**

Influence on Program Activity

Progress toward the annual goal cannot be determined this quarter due to COVID-19's influence on program activities. Progress will be reevaluated in upcoming quarters. UAMS East's efforts related to health education are detailed below.

- This quarter, UAMS East Regional Campus provided health education promotion and prevention programs for a total of 7,539 youth and adults. There were 6,080 youth and 1,459 adults that participated in or received health education services this quarter. UAMS East Regional Campus at West Memphis provided the Kids for Health program for three Crittenden County schools. There were 4,555 youth in K-6th grade, both in class and online, who received the health lessons.
- UAMS East at West Memphis provided nutrition education to 18 clients and provided parenting classes via Zoom to DHS parents who are court mandated to attend parenting. This quarter, 48 parents were trained.
- UAMS East Regional Campus at Lake Village held virtual Baby Safety Showers for 20 women. These showers are now held on the 2nd Tuesday of each month.
- UAMS East provided American Heart Association HeartSaver® CPR for 15 consumers.
- UAMS East at Lake Village continues to provide assistance at a local food bank to help meet the food insecurity needs of its community.
- UAMS East staff provided CPR and First Aid training as part of a worksite wellness program with 10 employees at local industries/businesses. Also, Basic Life Support was held for 10 practicing healthcare providers.
- UAMS East Regional Campus provided dental hygiene educational materials to 200 youth in programs through the Boys, Girls, Adults Community Development Center in Marvell.



UAMS East Performance Indicators and Progress

◆ Activity - CONT'D

- UAMS East also participated in the Founders' Day Observance: A Virtual Celebration of 113 Years of Service, Leadership, and Sisterhood with the Alpha Kappa Alpha Sorority, Inc., Mu Chi Omega Chapter. During the program UAMS East staff members were recognized for their community service.
- Finally, UAMS East Regional Campus provided health education information to 56 women participating in Healthy Living classes at a local church.



Indicator

The UAMS East Regional Campus will maintain the number of clients participating in exercise programs offered by UAMS East Regional Campus within 10% of the previous year.

◆ Activity: Cannot Determine Progress due to COVID-19

Influence on Program Activity

Progress toward the annual goal cannot be determined this quarter due to COVID-19's influence on program activities. Progress will be reevaluated in upcoming quarters. UAMS East's efforts related to exercise programs are detailed below.

- This quarter, UAMS East Regional Campus Fitness Center and walking track encounters totaled 5,511. The Fitness Center has been significantly impacted by the COVID-19 restrictions. Attendance numbers are low due to limited capacity and continued fear of the virus. The Fitness Center is continuing the practice of screening all staff and patrons before entering the building and requiring masks and social distancing. In February, the Fitness Center was impacted by the inclement weather, requiring the facility to be closed for seven days.
- UAMS East Regional Campus began teaching two group exercise classes. The yoga class has reported 328 encounters this quarter while Silver Sneakers classes had 103 encounters.



UAMS East Performance Indicators and Progress

● Activity - CONT'D

- UAMS East Regional Campus at Lake Village helps provide support and education to members of the Community Outreach Center. This quarter, there were over 1,400 encounters at the center. This number includes members who participate in group classes and individual workouts. Classes offered include Pilates, Line Dancing, Senior Fitness, and newly added Lunchtime Workout and Spin.
- UAMS East Regional Campus at Lake Village submitted the Southeast Arkansas Community Foundation Giving grant application for Chicot Memorial Medical Center and was awarded \$3,500 to assist in purchasing a multi-gym station for the center.



Indicator

The UAMS East Regional Campus will provide medical library services to consumers, students, and health professionals.

● Activity: On Track

This indicator is on track to meet the annual goal. UAMS East Regional Campus Medical Resource Library provided support to healthcare professionals and students through literature searches and teaching materials. This quarter, 42 nursing students and eight other healthcare professionals utilized the library. The library also provided support to 1,217 consumers. The library helped provide an instructor of nursing with information on nutrition for diabetes to 21 PCC/UA nursing students. UAMS East Library also provided educational models and teaching materials to be utilized in patient education for the Lee County Cooperative Clinic.



Indicator

The UAMS East Regional Campus will plan and implement a Rural Residency Training Track for Family Medicine in Helena, in partnership with the UAMS South Central residency program.



UAMS East Performance Indicators and Progress

◆ **Activity: In Need of Improvement**

This indicator is in need of improvement to meet the annual goal. UAMS East Family Medical Center is slowly trying to build the foundation for the Rural Residency Track. UAMS East has secured one family physician and is in the process of trying to get another physician to practice part-time. Until clinic staffing issues have been resolved, the application process cannot move forward. Also, the clinic needs to increase patient volume before applying.



Indicator

The UAMS East Regional Campus will increase the number of patient encounters by 5% annually at the UAMS Family Medical Center in Helena.

◆ **Activity: In Need of Improvement**

- This indicator is in need of improvement to meet the annual goal. The UAMS East Family Medical Center continues to serve the area as a patient-centered medical home clinic, where patients can be referred to two health coaches for smoking cessation, weight loss, and chronic disease management; a registered dietician for diabetes education and nutritional counseling; and an APRN-certified diabetes educator for diabetes counseling. The UAMS East Family Medical Center had a total of 385 patient visits in 46 days of clinic this quarter. There were 37 new patients. Also, 46 patients were provided onsite lab work.
- The Family Medical Center welcomed Dr. Amber Norris to the staff in March. Dr. Norris completed her Doctor of Medicine from UAMS in 2017. She completed her Family Medicine Residency at John Peter Smith Hospital in Fort Worth, Texas. She joined UAMS in 2020 where she practices in the UAMS Neighborhood Clinic's Capitol Mall location and the UAMS East Regional Campus. Currently, Dr. Norris is practicing onsite in Helena one day a week but is available for telehealth visits throughout the week. UAMS East Family Medical Center staff also includes two APRNs, and one full-time RN.



UAMS East Performance Indicators and Progress

● Activity - CONT'D

- UAMS East Family Medical Center began offering home visits in March. A total of five visits have been completed. These visits were provided for patients that have difficulty leaving their home but need assessment for chronic conditions. This program has provided quality healthcare for patients in the Delta that have limited transportation or who are homebound.
- Also, this quarter the clinic offered a teddy bear clinic for children in the community. Children were encouraged to bring their favorite stuffed animal or doll in for a checkup in our clinic. This was designed as an effort to have children understand the importance of wellness exams and decrease their fear of coming to the doctor's office.
- UAMS East Family Medical Clinic passed the Vaccines for Children (VCF) audit with no deficiencies. The clinic enjoys participating in this Centers for Disease Control and Prevention primary care prevention program that helps the poverty stricken and uninsured children in the delta.
- Smoking Cessation referrals have increased dramatically over the quarter. Every patient is assessed for tobacco dependence and referrals are made to health coaches so patients can receive quality smoking cessation education. This quarter, 22 patients have been contacted for smoking cessation counseling. All 22 received counseling on the phone and four of the 22 are scheduled for one-on-one counseling.
- The Family Medical Center offers access to specialists via telehealth. These specialties include cardiology, endocrinology, and neurology.
- The UAMS East Family Medical Center has improved many metrics this quarter. These metrics are reviewed as part of a provider scorecard for all regional family medical clinics. The percentage of patients 18 years or older with a diagnosis of diabetes who are compliant with having their A1c checked every six months has increased from 55% in January 2021 to 78.18% in March 2021. The percentage of patients 18 years of older with diagnosis of hypertension whose blood pressure was less than 140/90 increased as well (46% to 50%). Also, the percentage of patients 18 and older with a diagnosis of diabetes whose most recent A1c was less than 9 increased from 30% to 51%.

UAMS East Performance Indicators and Progress

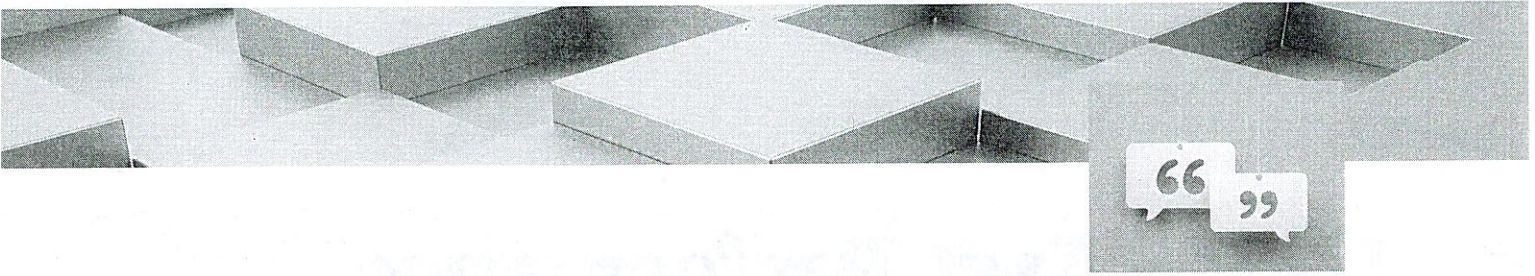


Indicator

The UAMS East Regional Campus will provide diabetes education to community members and increase the proportion of patients in the diabetes clinic who maintain an A1C below seven.

Activity: On Track; Influenced by COVID-19

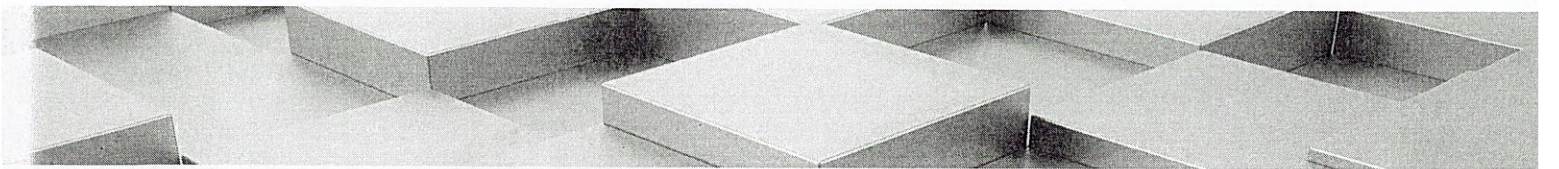
This indicator is on track to meet the annual goal. UAMS East Regional Campus has held the first of diabetes education classes via Zoom to four participants. The program will be a multi-session group class continuing into next quarter. UAMS East will begin offering more diabetes education classes weekly and are in the process of working with a local provider on referrals for a gestational diabetes class.



UAMS East Testimonial

Praise and Pride

- "I have been coming to this gym for quite some time now. I really enjoy working out and tracking my improvements from week to week. Being conscious of your health and wellness is one of the most important things a person can do!" -- Fitness Center member, male, age 22
- "I started coming to the gym because it was a part of my weight loss goal and I fell in love with it. I enjoy the different classes, the people, and the encouragement they provide me. Exercising became about more than maintaining my figure, it became about being healthy and fulfilled." Fitness Center member, female, age 31
- "After being diagnosed with Type II diabetes, I began a quest to heal myself. I was determined to not have to take insulin or prick my finger five times a day. I also have extensive arthritis. This center is single handedly responsible for me no longer being diabetic, and I now have good mobility." -- UAMS East Patron, female, age 50
- A representative of the Family Medical Center in Helena reported the following:
"The clinic also picked up two sisters that are six and eight years old. The younger sister felt a little under the weather on her first visit as a new patient. Her big sister was quick to tell us that she was the big sister and told us to take care of our patient. It was so cute to see the bond these sisters had. When our pediatric patients leave, they get to pick something from the treasure chest, a sucker and stickers. The sisters were very excited, and the big sister started to smile and said we were nice. The next day the big sister came into the office after her little sister shared her love and her germs. When the girls got ready to leave they went back for their end-of-visit goodies. As they were leaving, the big sister turned back and said, 'These people really are nice and I never want to go anywhere but my doctor here.' The kids in our area do not always get suckers, stickers, or small toys due to a life of poverty that some of these children are brought into. Those sisters had a bond that transcended wealth or social status. We became part of that family with kindness and respect. Those two girls are ours now and we would never want them to go anywhere else!"

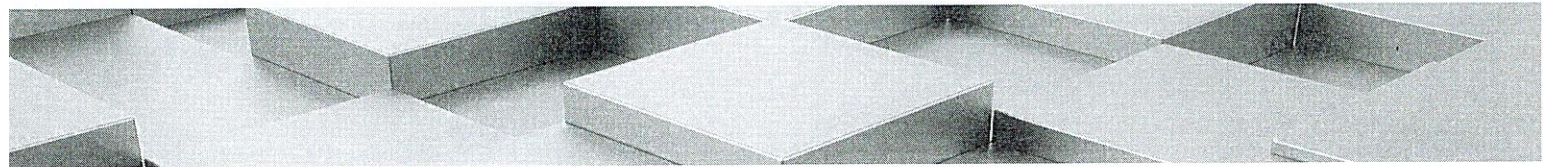


Summary of Indicator Progress Across Programs

Across all programs in the January-March 2021 period, 82% of indicators were on track or better to meet their annual goals, 12% of indicators were in need of improvement, and 6% of indicators' progress could not be determined due to impacts from COVID-19 (see Table 1). In all, 60% of indicators were influenced by COVID-19.

The eight indicators in need of improvement fell under the TPCP (1), TS-MEP (4), UAMS-COA (1), and UAMS East Regional Campus (2).

- For TPCP, the pandemic has significantly limited the agency and their sub-grantees' ability to deliver presentations to the public and decision makers on vital tobacco-related topics. This quarter, TPCP and sub-grantees offered 20 presentations toward the goal of 500 presentations for the fiscal year that ends in June. It should be noted that these 20 presentations were all delivered during January-March, which is an improvement over the two previous quarters.
- Four of five TS-MEP indicators were reported as in need of improvement as the overall number of Arkansans served compared to the previous quarter decreased, including for three of the four populations served--seniors, pregnant women, and Arkansans requiring extended hospital stays. These decreases were influenced by COVID-19 as individuals have delayed seeking medical treatment and as elective procedures have been placed on hold.
- The UAMS-COA leveraged approximately \$280,000 during the quarter, which equates to 65% of ATSC monies for the quarter. For the indicator to be met at the end of the 2021 calendar year, UAMS-COA must leverage funds that match or exceed ATSC funds for the year. The expiration of the Schmieding Home Caregiver Training Grant had a significant impact this quarter. Other factors included lower numbers of volunteer hours, likely related to COVID-19 restrictions.
- For UAMS East, progress to build a Rural Residency Track at the Family Medical Center (FMC) has been slow. Issues related to clinic staffing have been the biggest barrier thus far. However, this quarter UAMS East secured one family physician and is in the process of getting another physician to practice part-time. Also related to the FMC, UAMS East reported fewer patient visits compared to previous quarters, possibly as a result of residents avoiding COVID-19 exposure in medical facilities. Two ways UAMS East is addressing this challenge are a continued focus on offering telehealth as well as a new initiative to offer home visits to homebound residents.



Summary of Indicator Progress Across Programs

Progress on four indicators under the UAMS East Regional Campus could not be determined due to COVID-19's heavy influence on program activities which rely on outreach in schools, workplaces, and the community. These indicators were related to (1) pre-health professions recruitment; (2) health screenings, referrals to PCPs, and education on chronic disease prevention and management; (3) health education for area youth and adults; and (4) exercise programs.

UAMS East will continue to find ways to provide virtual programs and services and adjust to the constraints of the pandemic on outreach efforts. Progress for this program will be reassessed in the April-June 2021 Quarterly Report.

Although a number of indicators were evaluated as in need of improvement or were unable to be evaluated due to COVID-19's influence on program activities, ATSC-funded programs continued to prove adaptable, creative, and resilient in their efforts to meet annual targets. Evaluators also reported that programs continued to serve vulnerable populations, support the growing body of public health practitioners, create new partnerships and modes of service delivery to broaden reach, and promote strong scientific rigor in understanding health and well-being (including vital research related to COVID-19). ATSC-funded programs continued to tackle important health challenges and enhance quality of life for Arkansans through education, service, research, and economic impact.

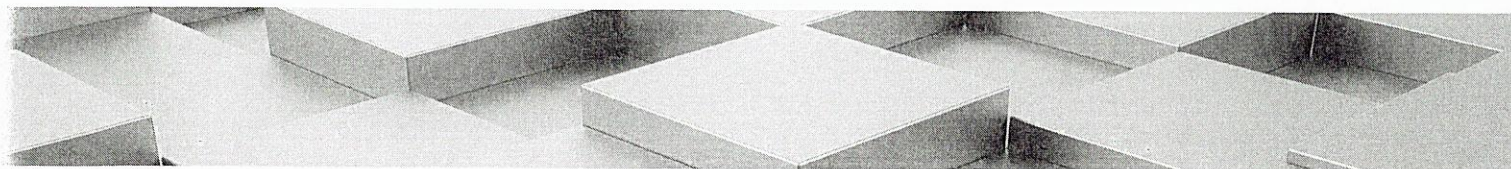


Table 1. Indicator progress across programs

Program	Total Indicators	Met	Exceeding Expectations	On Track	In Need of Improvement	Cannot Determine due to COVID-19	COVID-19 Influenced	Overall Progress
ABI	7	--	--	7	--	--	1	100% On Track
COPH	9	--	1	8	--	--	--	100% On Track or Better
MHI	7	--	--	7	--	--	7	100% On Track
TPCP	21	1	--	19	1	--	16	95% On Track or Better
TS-MEP	5	--	--	1	4	--	5	20% On Track
UAMS-COA	7	1	1	4	1	--	6	86% On Track or Better
UAMS East Regional Campus	9	--	--	3	2	4	4	33% On Track
Total	65	2	2	49	8	4	39	82% On Track or Better
							Total COVID-19 Influenced	60% COVID-19 Influenced

