

**INDEPENDENT EVALUATION OF THE ARKANSAS TOBACCO
SETTLEMENT COMMISSION FUNDED PROGRAMS**

April - June 2019 Quarterly Report

Indicator Activity

Prepared by

**Arkansas Tobacco Settlement Commission Evaluation Team at the
University of Central Arkansas**

Presented to

Arkansas Tobacco Settlement Commission

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SPECIAL THANKS

The evaluation team at the University of Central Arkansas would like to thank all who participated in this evaluation, including commission members, program directors, and coordinators. We appreciate the time and effort each program has made in improving the health of Arkansans.

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- **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:** All five ABI institutions continue to invest the resources to support personnel, equipment, and collaborations necessary to obtain extramural funding. Steps toward the accomplishment of this indicator are in progress. Data will be provided 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:** Patent activity for FY 2019 is currently in progress. The number of patents filed and patents awarded will be reported at the end of the fiscal year.

- **INDICATOR:** ABI-funded research will result in new technologies that generate business opportunities, as measured by the number of start-up enterprises and public-private partnerships with the ABI and member institutions to conduct research.
 - **ACTIVITY:** Member institutions continue to participate in research that has the potential to produce opportunities for business. This indicator is in progress. Data for this indicator will be reported at the end of FY 2019.

- **INDICATOR:** The ABI will promote its activities through various media outlets to broaden the scope of impact of its research.
 - **ACTIVITY:** Efforts to promote investigative successes in the scientific community through newspaper articles, press releases, news conferences, and radio/television contacts are ongoing. This indicator is in progress. Data regarding these efforts will be reported at the end of the current fiscal year.

- **INDICATOR:** The ABI will facilitate and increase research collaboration among member institutions, as measured by both ABI and extramural funding of research projects that involve researchers at more than one member institution.
 - **ACTIVITY:** The ABI continues to provide support and to facilitate research collaboration in order to solve the multifaceted health problems that affect the health of Arkansans. This indicator is in progress. Specific data regarding the building and success of these interdisciplinary collaborations will be reported at the end of the current fiscal year.

CHALLENGES: Research scientists supported in part with ABI funding continue to receive outside funding; however, the funding agencies' budgets are often flat or declining. These budgets result in lower grant funding for Arkansas. Instead of relying on just one or two funding sources, ABI research scientists also seek support from nonprofit foundations or industry groups. The ABI is committed to helping researchers successfully compete for extramural grants.

OPPORTUNITIES: ABI-supported research investigators continue to mentor students who work in the research arena. Undergraduate, graduate, and professional school students from around Arkansas are experiencing practical, hands-on laboratory research in a hospital or university setting. ABI researchers help students at all levels expand their biomedical or agricultural understanding, while at the same time the ABI helps to build a science-based workforce for our state.

TESTIMONIALS:

A Catalyst for Chemistry

“We’ve learned to leave our credit cards outside the door before we walk in,” said Roger E. Koeppel II, PhD, distinguished professor of chemistry and biochemistry in the J. William Fulbright College of Arts and Sciences at the University of Arkansas, Fayetteville (UAF). Abandoning their wallets outside a core facility might seem like an odd practice for the team of researchers. But the Nuclear Magnetic Resonance (NMR) Lab they are entering, located on the UAF campus, contains seven giant magnets ranging from four to nine tesla (T) each, any one of which might make short work of the scientists’ digital information.

“Not only are we doing basic research to help improve medical understanding, but we’re also focused on helping to build a workforce as we educate students,” said Koeppe, whose role as honors advisor for his department helps foster even more connections for promising young investigators.

Koeppe’s collaborations offer students unprecedented opportunities to do publication-worthy research, even at the undergraduate level. For example, Kelsey Sparks, now at UAMS, published an influential paper in 2014 in *Biochemistry* with Koeppe on the molecular processes that drive the nervous system. Armen Mortazavi, currently at Georgetown Medical School, landed his undergraduate work on the cover of *Chem/Biochem*. Jordana Thibado, now studying physiology at Weill-Cornell Medical Center, published a paper in *Biochemistry* in 2016 based on her work on cholesterol. Vasupradha Kumar, also currently at UAMS, is getting ready to publish in that journal as well. “That students gravitate to his lab, that they seek out his mentorship, is the true measure of the respect that Roger Koeppe has as an educator,” said McGehee. “It is the ultimate endorsement.”

EVALUATOR COMMENTS: It was a pleasure to attend the annual board meeting, which provided insight into the diverse and important ways ABI funding promotes scientific research. During this meeting, a representative from each of the five member institutions presented an update on ongoing research endeavors and investigator awards. An additional focus on the Arkansas All-Payer Claims Database and related ABI support reinforced the ABI’s commitment to this tool that enables better understanding of healthcare delivery within the state. Despite the ongoing challenges in funding, the Arkansas Biosciences Institute is making progress on all indicators and is on target to meet its objectives.

- **INDICATOR:** Faculty productivity is maintained at a level of two publications in peer-reviewed journals to one FTE for primary research faculty.
 - **ACTIVITY:** The activities for this indicator are reported annually in the fourth quarter (October - December). This indicator is in 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:** Fifty-one grants and/or research projects are being carried out by faculty and students with 100% of the projects based in Arkansas or having an Arkansas focus. Examples of the topics being investigated include the following: breast cancer, hospital management projects, housing insecurity in pregnant mothers and their babies, hypertension and cardiovascular disease, community-based initiatives to impact HIV, providing scientifically valid guidelines to test tobacco products, evaluating colorectal cancer programs, hypertension and cardiovascular disease, and examining health disparities. This indicator has been met.

- **INDICATOR:** COPH faculty, staff, and students are engaged in research that is based in Arkansas.
 - **ACTIVITY:** In addition to the 51 projects cited above, students are engaged in a variety of applied practice research. Eight additional student research projects are based in Arkansas that cover important public health issues such as promoting health literacy, healthy home assessments, parental engagement to improve children's health, and mental wellness campaigns. This indicator has been met.

- **INDICATOR:** The COPH makes courses and presentations available statewide.
 - **ACTIVITY:** Fourteen distance-accessible courses were made available in this quarter on topics such as chronic disease, infectious disease, occupational health, health behavior/education, and the healthcare system. Ten other presentations were made remotely on topics such as the opioid epidemic, tobacco control, and healthcare at the end of life. This indicator has been met.

diplomas were awarded to students who finished their programs in the spring semester. Graduates were from the following programs: Graduate Certificate in Healthcare Analytics, Post Baccalaureate Certificate in Public Health, Master of Health Administration, Master of Public Health, Doctor of Public Health, Doctor of Philosophy in Epidemiology, Doctor of Philosophy in Health Promotion, Doctor of Philosophy in Disease Prevention, and Doctor of Philosophy in Health Systems and Services Research. At commencement, the college was recognized by Chancellor Cam Patterson, M.D., MBA, for graduating a record number of students (64) this year. Additionally, he gave recognition to Jim Raczynski, Ph.D., Professor, Inaugural M. Joycelyn Elders, M.D., Chair in Health Promotion and Disease Prevention, and Founding Dean of the COPH, for his leadership and successful work in getting the college to its current state prior to stepping down as Dean in December of 2018.

Robert Redfield, MD, Director of the Centers for Disease Control and Prevention, visited the UAMS in June of 2019, which provided an opportunity for COPH students and faculty to participate in a dialogue with the leader of the nation's health protection agency. Speaking on "Partnering for a Healthier Arkansas," Redfield addressed ending epidemics, eliminating diseases, and securing global health and ensuring domestic preparedness. Redfield presented to a room full of UAMS faculty, staff, and students in the Walton Auditorium. The two epidemics Redfield talked about were reducing opioid misuse and antimicrobial resistance.

"Addiction is a medical condition," said Redfield. "We need to approach it the same way we do other diseases." He emphasized creating a climate that allows people to get the medical care they need. He discussed the value of having real-time data solutions such as syndromic surveillance—gathering health-related data before a diagnosis to signal the likelihood of a public health issue—to help combat problems like the opioid epidemic. Arkansas is currently gathering such information from hospitals and clinics throughout the state.

Redfield also discussed how to eliminate HIV, saying "Fifteen percent of people with HIV in Arkansas have not been diagnosed yet." Arkansas has 291 new cases of HIV diagnosis each year, which is the 20th highest rate in the country. "We have the tools we need to end this epidemic in the U.S.," said Redfield. "We can diagnose and lay out a treatment plan for those

“The important thing to highlight here is that without a doubt, the biggest declines were in outcomes for African-American infants,” said Mick Tilford, Ph.D., Professor and Chair of the Department of Health Policy and Management in the COPH and co-author on the study.

“Medicaid expansion means continued health insurance for many low-income women. Insurance can lead to healthier mothers, and healthier mothers can lead to healthier babies.”

The study examined 15.6 million births from 2011 to 2016 in states that expanded Medicaid and states that did not expand Medicaid. Specifically, the study looked at the association between Medicaid expansion and rates of low birthweight and prematurity overall and among racial/ethnic minorities compared to non-Hispanic White infants.

The data came from 18 states that expanded Medicaid and 17 states that did not. Researchers looked at preterm birth (a baby born less than 37 weeks), very preterm birth (a baby born less than 32 weeks), low birthweight (weight less than five pounds, eight ounces), and very low birthweight (a baby weighing less than three pounds, five ounces). These evaluations were made among all births as well as among Medicaid-covered births and Medicaid-covered births to women with at most a high school diploma.

“We used women with at most a high school diploma as a proxy for income,” said Tilford. “We assume that education is linked to income, so these are likely the most vulnerable groups.”

There was an improvement in all four outcomes for African-American infants in expansion states. Among African-American infants of mothers with at most a high school diploma, rates of very low birthweight declined 14.8% in expansion states and increased 2.1% in non-expansion states. Rates of low birthweight declined 8.3% among expansion states and increased 5.6% in non-expansion states for this subgroup.

“Babies born with a low birthweight are at a much higher risk for developing chronic conditions, such as neurological, respiratory, behavioral, or educational deficits,” said Brown. “These not only lead to increased infant mortality, but they can also result in increased risk of chronic conditions throughout infancy and into adulthood, which can lead to increased medical costs and reduced proactivity.”

ARKANSAS MINORITY HEALTH INITIATIVE INDICATOR ACTIVITY

PROGRAM DESCRIPTION: The Arkansas Minority Health Initiative (MHI) was established in 2001 through *Initiated Act 1* 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: 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.

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

- **INDICATOR:** To increase stroke awareness by 1% annually among minority Arkansans through screenings and educational events as measured by previous comparison beginning in FY2015.
 - **ACTIVITY:** During this quarter, the MHI conducted and documented 719 blood pressure screenings. This is important because an increased blood pressure—hypertension—greatly increases the risk of both stroke and heart disease. The MHI is doing well to raise stroke awareness in minority populations in Arkansas. Data show that the number of blood pressure screenings has increased during FY19, which points to an increase in awareness. An increased number of respondents (3.4% more than last year) have reported that they have been told where to get screened and what their screening results mean. This indicator has been met.

- **ACTIVITY:** To increase diabetes awareness, the MHI conducted 600 blood glucose screenings this quarter. They also tallied 231 paid commercials and bonuses listing symptoms and early warning signs of diabetes. Awareness of diabetes is increasing in minority Arkansans because of these screenings. The number of blood glucose screenings in FY19 was 3,257, up from 1,062 in FY18. This indicator has been met.

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 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.
 - **ACTIVITY:** This indicator was met. The Arkansas Minority Health Commission (AMHC), of which the MHI is apart, commissioned the UALR Study Research Center (SRC) to conduct the five-year update of the Arkansas Racial and Ethnic Health Disparities Study. The scope of work included collecting data through surveys designed to gather data on the perceptions, opinions, attitudes, behaviors, and knowledge related to health and healthcare practices of Arkansans within specific racial and ethnic groups identified by the urban and rural county of residence. The sample included 2,330 respondents stratified by geo-racial groups classified as White Urban, Black Urban, White Rural, Black Rural, and Hispanic.
 - Notable findings in the executive summary include the following:
 - Significant Differences in Perceptions Regarding Racial Issues:
 - Almost half of the White Rural respondents reported "never" thinking about their race. Conversely, close to 45% of both the Black Urban and Black Rural groups think about race "constantly."
 - Different Attitudes towards Personal Health:
 - The White Urban group is significantly more likely to rate their health as "excellent" or "very good" compared to other groups.

- Arkansans throughout the state. During this quarter, the MHI partnered with six grassroots, nonprofit, government, and faith-based organizations in an effort to provide health education information and screenings. Events included tobacco education, medical equipment loan to utilize for screenings, all types of media programs (TV, radio, print, social media), and health programs with UAMS (e.g., Hypertension Project).
- The MHI also distributed over 1,500 fact cards, partnered with six new organizations to supply medical equipment for screenings where over 352 screenings were provided, and continued the Ask the Doctor Radio Show. In addition, the MHI's media campaigns skyrocketed yet another quarter with over 11,860—up from 2,070 during the same quarter in FY18. Print and television health promotion announcements went out. Of those, over 1,285 focused on tobacco cessation (an increase of over 1,000 from last year); over 6,778 focused on childhood obesity, BMI screenings, nutrition and exercise. They employed both Facebook and Twitter for three separate campaigns.
 - This quarter, the MHI's social media focused on drowning. A Twitter campaign reached 1,773 impressions. The Facebook campaign “Is that who you think it is?” received 3,309 impressions.
 - Jericho Way Resource Center continues to provide onsite medical care for 150 homeless people in Little Rock.
 - Together with the UAMS Hypertension Research Project for Desha County, the MHI screened 290 people at least twice.
 - Finally, the MHI provided a total of 5,960 health screenings this quarter.
- **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:** The MHI partnered with UAMS East Regional Campus in Helena, the Arkansas Department of Health, and the Cooperative Extension Service to provide “Camp I Can! Grow, Go and Glow” in June. Thirty-five area youth participated in the three-day camp designed to educate and empower young boys and girls in the Delta.

think this new generation needs that person to talk to. They need that boost because the age of social media and all these other things. It mentally taxes us.... So, this gives you an idea of what is needed [in the Delta], and what organizations may want to collaborate over.”

EVALUATOR COMMENTS: Heart disease remains the leading cause of death for our nation. Moreover, rates of heart disease in Arkansas rank as the 5th highest in the nation. Because of this, and the increased likelihood that minorities have poorer health, the MHI’s ongoing involvement in multiple partnerships to provide screenings and media coverage illustrate a sustainable commitment to improving the health of minority populations. Moreover, the collaboration between the MHI and the University of Central Arkansas evaluation team continues to strengthen and improve reporting practices. With this commitment to the health of all Arkansans, but specifically minority Arkansans, the MHI has met their goals through the specified activities above.

- **ACTIVITY:** This goal is still in progress. There are no new data for LGBT, Hispanic, or African-American populations. The 2014 LGBT survey indicated a smoking prevalence rate of 37% and smokeless rate of 24%. The 2016 Adult Tobacco Survey noted a smoking prevalence rate of 13% for Hispanics and 23.1% for African-Americans. New 2017 Vital Statistics data for pregnant women indicated that after a .8% increase in 2016 (from 13.1% in 2013 to 13.9% in 2016), the smoking prevalence rate has dropped to 13.5%.
- **INDICATOR:** By March 2020, decrease smoking prevalence among youth by 7% (a decrease from 19.1% to 17.8%) (Data Source: YRBSS 2017).
 - **ACTIVITY:** This goal has been met. Youth Risk Behavior Surveillance System (YRBSS) data for 2017 were released June 14, 2018. They indicated that youth smoking prevalence has decreased from 15.7% in 2015 to 13.7% in 2017. The baseline of 19.1% was set in 2013.
- **INDICATOR:** By March 2020, decrease the adult (18+) smoking prevalence by 8.5% (a decrease from 23.6% to 21.6%) (Data Source: 2016/2017 BRFSS).
 - **ACTIVITY:** This goal is still in progress. In 2016, the baseline rate for adult (18+) smoking prevalence was 23.6%. Data from the 2017 Behavioral Risk Factor Surveillance System (BRFSS) indicated a 1.3% reduction to 22.3% in adult (18+) smoking prevalence.

SHORT-TERM OBJECTIVE: Communities shall establish local tobacco prevention initiatives.

- **INDICATOR:** By June 2019, 100 new smoke-free/tobacco-free policies will be implemented across Arkansas (Data Source: TPCP Policy Tracker).
 - **ACTIVITY:** Although the goal of 100 new policies was not met, during FY19, 83 new smoke-free/tobacco-free policies were implemented across Arkansas (13 of which were developed during the current quarter). This quarter, the TPCP reported 10 new policies: five workplace (17 to date), two park/festival/farmer's markets (five to date), two faith-based (18 to date), and one Tobacco 21 (T-21) policy (two city and one

PPYC chapters participated in the Annual PPYC Conference. While no new PPYC chapter members were recruited for the current quarter, there were 1,234 youth who participated in the statewide youth intervention called “My Reason to Write.”

- **INDICATOR:** By June 2019, increase number of healthcare providers, traditional and nontraditional, by 550 who have been reached by TPCP trainings (Data Source: TPCP Healthcare Provider Training Tracker).
 - **ACTIVITY:** This goal has been met. During FY19, 549 healthcare providers (i.e., doctors, dentists, nurses, etc.) participated in nine separate trainings (Tobacco Treatment Specialist trainings and those through the Arkansas Cancer Coalition). Two trainings (for 259 healthcare providers) were held during the current quarter. During the 2019 MidSouth Conference, approximately 45 individuals attended the JUUL Phenomenon: Vaping Among Teens presentation. Additionally, in May, the Family Medicine Spring Review was held at UAMS. Topics ranged from Maladies of the Chest, COPD for PCPs, and a Be Well Arkansas informational presentation. Approximately 214 healthcare providers/professionals attended the conference.
- **INDICATOR:** By June 2019, the TPCP will collaborate with ten pharmacies to support tobacco cessation and treatment (Data Source: TPCP report).
 - **ACTIVITY:** This goal has been met. Although no collaborations were made during the current quarter, in FY19, 30 pharmacists enrolled in the tobacco cessation pharmacy pilot project resulting in the training of 29 pharmacists and nine pharmacy technicians.
- **INDICATOR:** By June 2019, the TPCP will develop a task force for investigating and making recommendations regarding tobacco use by pregnant women and their families (Data Source: TPCP report).
 - **ACTIVITY:** As mentioned in previous reports, after this indicator received approval, the Arkansas Department of Health developed a program regarding tobacco use by pregnant women and their families. Currently, the Be Well Baby request for

smoking (if they smoke), and reduce stress. The CDC has lots of tips to help.

[Click here to learn more.](#)

- **INDICATOR:** By June 2019, ADH's Healthy Active Arkansas program effort, in collaboration with the TPCP, will develop and share eight tobacco and obesity-related content and post on ADH social media accounts.
 - **ACTIVITY:** This goal has been met. During FY19, there were 55 posts on 24 different topics with 36,862 views. For this quarter, there were 30 posts made on the Arkansas Department of Health's Facebook page. The 11 different topics covered were as follows: general quitting (six posts), smoking and cancer (three posts), online help with quitting (two posts), e-cigs/JUULs (three posts), smoking and heart disease (five posts), smoking and teens (two posts), smoking and diabetes (three posts), No Menthol Sunday (two posts), smoking and dental disease (two posts), smoking and moms/babies (one post), and smoking and menopause/hip fractures (one post). All posts made reference to Be Well Arkansas. These posts garnered 17,995 views.
- **INDICATOR:** By June 2019, ADH's Healthy Active Arkansas program effort will report the number of tobacco-free policies at worksites, communities, and municipalities that have been secured through the ADH Arkansas Healthy Employee Lifestyle Program (A-HELP) and Community Healthy Employee Lifestyle Program (C-HELP) programs.
 - **ACTIVITY:** This goal has been met. While no new policies were reported this quarter, during FY19, a total of four worksites were assisted with tobacco cessation resources.
- **INDICATOR:** By June 2019, maintain and monitor referrals for those seeking tobacco cessation services ages 13+ identified through Vital Signs protocol (2As and R - Ask, Advise and Refer, the recommended model for a brief tobacco intervention commonly used by healthcare providers).
 - **ACTIVITY:** This goal has been met although it is an ongoing indicator. School-Based Health Clinic (SBHC) referrals are documented through Be Well Arkansas and reported by the Be Well Arkansas Call Center as part of the total number of referrals. For FY19, the number of fax referrals was 1,946, the number of online intakes was

chronicled MISRGO's tenure was presented. The conference continues to be a place for networking and learning about new tobacco-related trends. Additionally, this year MISRGO had the opportunity to partner with the Minority Health Commission for sponsorship.

- **INDICATOR:** By June 2019, the MISRGO will report technical assistance provided through direct efforts to Public Housing Authorities and other multi-unit housing establishments to implement smoke-free policies (Data Source: Minority Sub-Recipient Grant Office [MISRGO] report).
 - **ACTIVITY:** This goal has been met. During FY19, MISRGO provided technical assistance on four occasions. The meeting with property owners regarding smoke-free housing held this quarter resulted in the development of two policies—one by Brown and Brown Properties and the other by Hawkins Enterprise.
- **INDICATOR:** By December 2018, the MISRGO will continue to work with stakeholders to solidify a statewide plan for reducing tobacco related disparities in Arkansas (Data Source: Minority Sub-Recipient Grant Office [MISRGO] report).
 - **ACTIVITY:** This goal has been met. A statewide plan to achieve health equity and eliminate tobacco-related disparities was approved in April 2019. This quarter two request for proposals were written for implementation.
- **INDICATOR:** By June 2019, the MISRGO will present plans and suggestions for statewide implementation of programs to reduce tobacco related disparities (Data Source: Minority Sub-Recipient Grant Office [MISRGO] report).
 - **ACTIVITY:** This goal has been met. During the first half of FY19, MISRGO gave two presentations to 72 attendees. The feedback given this quarter was to use the request for proposals process for implementation. The request for proposals has been written and released.

and young adults; 2) tobacco cessation among minority pregnant women and/or minority women preparing for pregnancy, decreasing tobacco use among minority adults; and 3) decreasing minorities' exposure to secondhand smoke (Data Source: Minority Research Center [MRC] report).

- **ACTIVITY:** This goal was not met. No indicator information was provided during FY19.
- **INDICATOR:** By June 2019, the MRC will conduct four focus groups with African-American male college students to understand and compare knowledge, attitudes, behaviors, and risk perceptions associated with cigarettes, large cigars, small cigars, and dual use of cigarette and cigars of any kind (n=24). The MRC will collect biological samples (e.g., saliva) to examine levels of tobacco specific nitrosamines (e.g., NNK, NNAL, NNN, NAT, NAB), and nicotine metabolites among these different groups of smokers. The MRC expects that dual users will have higher levels of tobacco specific nitrosamines than single cigarette, little cigars, and large cigar users. The MRC will conduct a regional survey of male college students enrolled in four-year colleges to understand the prevalence of cigar use, patterns of use, nicotine dependence, and risk perceptions. The MRC will calculate the power calculations for this study. The MRC will correlate levels of nicotine dependence and the nicotine metabolite ratio among tobacco users (Data Source: Minority Research Center [MRC] report).
 - **ACTIVITY:** This goal was not met. No indicator information was provided during FY19.
- **INDICATOR:** By June 30, 2019, the GASP will recruit a minimum of six new students into their program (Data Source: Graduate Addiction Studies Program [GASP] report).
 - **ACTIVITY:** This goal has been met. During FY19, a total of seven students were recruited into the Graduate Addiction Studies Program. Corrected numbers reflect five new students in the first quarter and two in the second quarter (although due to Visa delays, the two will begin their program in fall 2019). No students were enrolled during the current quarter.

- **ACTIVITY:** Although the goal of ten community visits was not met, during FY19 there were seven visits to minority and high-risk communities resulting in 12 presentations before a total of 137 attendees. During this quarter specifically, ten presentations focusing on the health risks of tobacco and nicotine use were completed by GASP students within six communities and before a total of 113 attendees. Five presentations addressed high-risk youth incarcerated in juvenile detention centers in Jefferson County and five presentations addressed senior adults residing in senior living facilities in Jefferson County.

CHALLENGES:

- The TPCP staff, sub-grantees, and partners continue to report an epidemic of JUUL use among youth, and, as a result, the program is receiving a high amount of requests from schools to provide educational presentations as well as resource material. To assist with the high rate of requests for speakers and educational materials, the TPCP continues to develop PowerPoint presentations and handouts to assist in educating on JUUL and other Electronic Nicotine Delivery Systems (ENDS), as well as emerging tobacco/nicotine/ENDS products. JUUL is a brand name of an ENDS product (otherwise known as an e-cigarette) with one pod delivering as much nicotine as a pack of cigarettes. As an example of efforts to educate youth/young adults on the dangers of e-cigarettes (such as JUUL) and other nicotine products, the TPCP, in partnership with Conway Regional Health System, educated 255 University of Central Arkansas athletes regarding the dangers of JUUL and other nicotine products.
- The TPCP staff continues to address challenges with thoughtful consideration. During the reporting period, an individual submitted an online intake through Be Well Arkansas and received an email from one of the wellness specialists on scheduling his first session. He replied and stated that due to a number of physical and psychiatric disabilities, he was unable to do telephonic counseling. To address the concerns stated by the individual, the TPCP branch chief reached out to him and conducted a personal interview to gain an insight of what services from Be Well Arkansas might meet his needs. Based on the discussion, the branch chief provided the following options for consideration: conducting the counseling via live chat or having the Be Well nurse coordinator assist him in scheduling an appointment at

messaging. The theme for the current year was “Youth Led. Fact Fed.” A total of 1,234 entries were accepted through April 15, 2019, and awards were announced May 17, 2019.

- The HHI reported the Southwest Arkansas Prevention Taskforce and Harbor House, Inc. hosted the Community Leader Connection (CLC): A Call to Action Summit on June 6, 2019. The primary goal for the CLC Summit was to bring community leaders together to learn about critical issues regarding youth and families and to use the meeting as an opportunity for communities to develop a local strategic plan. One of HHI’s Community Health Nurse Specialists and a sub-grantee funded by the MISRGO presented “What are the Emerging Tobacco Products?” Summit attendees were educated about current tobacco/nicotine products such as JUUL, NicoWater, and other products that are marketed to and primarily used by youth. The presentation was an opportunity to educate community leaders on conventional and emerging tobacco products, including e-cigarettes, that are appealing to youth. Approximately 49 community leaders attended the summit.
- Partnering with the Student Well Advocacy Groups (SWAGs) continues to provide opportunities to educate school staff, school boards/wellness committees, and local communities about the current state of tobacco control issues in Arkansas and to engage youth in prevention activities to decrease tobacco/nicotine use. In addition, the partnership provides a mechanism for engaging youth in peer-to-peer education to address multiple topics on health such as physical activity, hydration, nutrition, and mental health.

Opportunities for this quarter were noted as follows:

- The SWAG held a conference on April 24, at Heifer Village. Students presented their youth tobacco prevention project as well as other outreach activities. Each SWAG provided a representative to participate in a student panel, "Listening to the Leaders of Tomorrow," that got the students’ perspectives on what deserves more attention and could be done more effectively when discussing health with youth. Approximately 160 youth and adults attended the conference.
- Several activities during the reporting period presented opportunities for SWAGs to partner with other groups within their schools or communities. Examples are as follows:

education on current issues facing minority communities and to facilitate an environment for networking. Additionally, the MISRGO noted the event was a great opportunity to partner with the Arkansas Minority Health Commission.

TESTIMONIALS:

Engaging Hispanic Populations

The TPCP continued efforts to partner with community members to reach and educate the Hispanic population in Arkansas about the harms of tobacco/nicotine use and to promote tobacco cessation. Staff from the TPCP attended the “Vestido Rojo” Red Dress event and delivered two presentations: “The New Epidemic – JUUL and other electronic cigarettes” and “Be Well Arkansas.” Approximately 347 people attended the event. Additionally, staff hosted an educational booth and conducted carbon monoxide monitoring screenings to assist with helping attendees to realize the harms of smoking (52 readings were collected) and disseminated materials (many took the materials to educate family members). From the one-on-one engagement at the educational booth, it is worth noting that a majority of the attendees were not aware of JUUL, and many stated they would be discussing this with their children. Many of the attendees relayed, “Your presentation was a teaching moment. Thank you.”

Engaging Youth

In April, the Madison County Health Coalition (MCHC) held a youth celebration to honor MCHC youth members who have worked to promote tobacco prevention and cessation, educating their peers and others in the community. At the event, MCHC youth members were awarded certificates and medals for their work. Leaders of MCHC also gave presentations on the topics of electronic cigarettes and the Tobacco-21 law.

Cassie Smith, Head of the MCHC, a MISRGO subgrantee, coordinates the MCHC youth team, made up of high school students from the area. The youth team engages regularly in leadership trainings, youth-led tobacco education at community events, and other forms of outreach with social media and local radio stations. Cassie explained why she invests so much in engaging youth in tobacco prevention. “My main focus is to prevent youth from starting the use of tobacco products. We all know the best way to say no to drugs, alcohol, or tobacco is to never start. It is

TOBACCO SETTLEMENT MEDICAID EXPANSION PROGRAM INDICATOR ACTIVITY

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: To expand access to healthcare through targeted Medicaid expansions, thereby improving the health of eligible Arkansans.

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

- **INDICATOR:** Demonstrate improved health and reduced long-term health costs of Medicaid eligible persons participating in the expanded programs.
 - **ACTIVITY:** 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

TS-MEP funds for the Hospital Benefit Coverage totaled \$1,530,596. This indicator has been met.

- **INDICATOR:** 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:** The ARSeniors program expanded Medicaid coverage to 5,539 seniors during this quarter. This is an increase of 238 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. TS-MEP funds for the ARSeniors program totaled \$3,584,292 during this quarter. This indicator has been met.

- **INDICATOR:** 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:** During this quarter, 440 individuals were allocated waiver slots with 108 individuals provided services through TS-MEP funds. This is an increase in the number of persons enrolled but a decrease in the number of persons served from the previous quarter. The decrease can be explained by the transitioning of these individuals into the Provider-led Arkansas Shared Savings Entity (PASSE) program. This program changes the way the claims will be processed. In this quarter, there were a total of 56 children (18 and under) and 52 adults (19 and over) in 39 counties that were provided services. TS-MEP funds for the CES waiver program totaled \$263,364 in this quarter. This indicator has not been met.

CHALLENGES: As a result of the implementation of the Arkansas Works program, traditional Medicaid expenditures have decreased. Many Medicaid-eligible adults aged 19-64 years old 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

“nice and friendly.” She also discussed how she enjoys the other employees she works alongside as well as the need for “more disabled people get help [through these kinds of opportunities].”

EVALUATOR COMMENTS: The TS-MEP has been impacted by the significant changes in the healthcare system. During this quarter, the three initial populations (Pregnant Women Expansion, ARSeniors, and the Hospital Benefit Coverage programs) have remained relatively stable in the number of individuals served by these programs with significant increases in the ARSeniors and Hospital Benefit Coverage populations. With the new population (persons with developmental disabilities), progress has been made and reductions are being made to the waiting list and community and home services are being provided for these individuals. As noted above for this population, the transition to the Provider-led Arkansas Shared Savings Entity (PASSE) system has led to a decrease in the number of individuals being served; however, future reports should provide better measures of this indicator.

There was an additional push this quarter to work with media outlets that might help promote evidence-based approaches for dealing with aging issues (e.g., KUAF radio and the Arkansas Business Publishing Group). This indicator has been met.

- **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:** The UAMS-COA and its affiliates continue to be productive in securing external funding. During this quarter, \$325,234 was raised from six grants to support UAMS-COA programming (the Schmieding Home Caregiver Training grant valued at \$305,129 was the most substantial grant). The agency also received \$27,395 through contractual service agreements. Another large stream of external funding this quarter was derived from community foundations (Oaklawn and Schmieding), which provided \$134,186 to support the Oaklawn COA and the Schmieding Center endowments. Additional extramural funding included hospital and community partner donations (\$140,400), UAMS core support (\$114,000), and the value of volunteer hours supplied to the COAs (\$3,928). Overall, the UAMS-COA leveraged \$821,293 above the \$452,294 in quarterly funding provided through the ATSC (nearly two times the initial ATSC funding). This indicator is on track for meeting or exceeding the annual goal.

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:** Assist local healthcare providers in maintaining the maximum number of Senior Health Clinic encounters through a continued positive relationship.
 - **ACTIVITY:** The UAMS-COA recorded 6,367 Senior Health Clinic encounters during this reporting period. The UAMS-COA also added 596 nursing home encounters and 315 inpatient encounters during the quarter. This indicator has been met.

effective delivery models for serving seniors in impoverished, hard-to-reach communities in the state.

- The agency is still developing the data collection and data processing capacity needed to fully assess program outcomes. Updating the agency's existing database was a necessary first step for monitoring routine COA activities. Training COA directors to use the new database and maintaining the system's functioning will be a challenge. The UAMS-COA is making progress toward more consistent data collection and they should begin implementing new data collection procedures for FY 2020.
- Many of the programs and services offered through the UAMS-COA have an indirect effect on senior health in Arkansas. The UAMS-COA needs to increase efforts aimed at demonstrating the net positive impact (including the economic impact) of services provided by the agency.
- Staffing issues at two COAs threaten the stability of services in those areas. The South Central COA has hired a new director, however training and adequate supervision remain a challenge.
- 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 the time and other resources necessary to keep current with best practices in geriatric care is another enduring challenge.
- Obstacles to senior clinic development and access continue to emerge. These are national concerns and the UAMS-COA must seek creative ways to encourage growth in medical resources specifically related to senior health in Arkansas.

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 keep pace with changes in healthcare systems and in the needs of the population served. Some of the most encouraging opportunities are described below:

how out of shape she was and as a result of the program has joined a gym. The students said they learned patience and were amazed at the positive attitudes of the participants. – COA Northeast

Family Caregiver Workshop: "I and my staff learned so much about dementia, especially Alzheimer's disease. I never knew there were different types of dementia from different causes. The visual aides really helped me gain a better understanding of how the brain is affected by Alzheimer's disease, and how communication is key to preventing negative behaviors whether it's verbal or non-verbal." One spouse-caregiver discovered that she was not taking care of herself because she was so busy taking care of her husband. The training also made an impact on the adult children attending as they became aware of the need to help their mother more and give her breaks from caregiving. – Texarkana COA

EVALUATOR COMMENTS: The evidence presented suggests that the UAMS-COA is fulfilling its mission to advance the state's agenda for successful senior health services, knowledge, and programming. During this reporting period, the agency enhanced senior health improvement efforts by:

- Maintaining alliances between nonprofit, for-profit, and state-funded agencies to better address the needs of older adults in Arkansas;
- Helping to educate future healthcare workers about the special needs of older adults;
- Providing a broad range of educational and exercise opportunities to seniors in the state (especially underserved portions of the state);
- Recognizing the necessity of fall prevention education for seniors and mobilizing resources to meet the need;
- Addressing the opiate crisis with informational campaigns, professional outreach, and drug take-back events;
- Working to develop better models of long-term care in Arkansas;
- Working to increase the capacity for quality in-home senior healthcare;
- Raising awareness of specialized senior health concerns among Arkansas healthcare providers;
- Focusing on dementia care and building dementia-friendly communities;

UAMS EAST REGIONAL CAMPUS INDICATOR ACTIVITY

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 (AHEC) 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: To recruit and retain health care professionals and to provide community-based healthcare and education to improve the health of the people residing in the Delta region.

LONG-TERM OBJECTIVE: Increase the number of health professionals practicing in the UAMS East Regional Campus service areas.

- **INDICATOR:** Increase the number of students participating in UAMS East Regional Campus pre-health professions recruitment activities.
 - **ACTIVITY:** The UAMS East Regional Campus Helena and Lake Village held M*A*S*H camps for 26 students. Students participated in various hands-on medical activities and shadowed health professionals from the community. All students

Memphis collaborated with Connie Roebuck of the Roebuck Project and Sherron Myles of Absolute Care to hold an HIV testing event in observance of HIV National Testing Day. There were 29 attendants at the event and nine consented to testing. One person tested positive and received confidential counseling and linkage to care. In addition, West Memphis staff attended the Arkansas State University Mid-South Annual Health Fair. Twenty-nine students received information on sexual health and tobacco prevention. The UAMS East Regional Campus Lake Village collaborated with University of Arkansas Cooperative Extension and the Arkansas Minority Health Commission to implement five events for round five of the Healing Hearts Worksite Wellness Initiative. Biometric health screenings and educational outreach occurred between February and May based on the employers' schedule, with three events taking place this quarter. Chicot Memorial Medical, Dermott School District and Superior Uniform hosted the events. Lake Village also facilitated the Chicot Memorial Medical Center Health and Wellness Expo. Opportunities and resources to engage in wellness behaviors and health risk reduction were a part of all events. Progress is being made on this indicator.

- See Table 1 for abnormal screenings results.

Table 1. Abnormal Screenings Results for Selected Tests

Anemia – 0	Blood Pressure – 118	HIV – 1
BMI – 3	Cholesterol – 64	Glucose – 7
HbA1c – 19	Waist Circumference – 5	Clinical Breast Exam – 1

- **INDICATOR:** Maintain a robust health education promotion and prevention program for area youth and adults.
 - **ACTIVITY:** This indicator is in progress. This quarter, the UAMS East Regional Campus provided health education promotion and prevention programs for a total of 16,829 youth and adults. There were 66 events held in eight cities for 2,904 adults. For youth, there were 115 events held in four cities with 13,925 youth attending.
 - The UAMS East Regional Campus in West Memphis continued to provide parenting classes for clients at the Crittenden County DHS and East Central Arkansas

- Program offered 59 youth in grades 5-6 the program “Yes You Can...Commit to Character.” This medically accurate curriculum focuses on empowering students at an early age to realize the importance of making healthy decisions, see the value in avoiding high-risk behaviors, and develop a positive vision for the future.
- The UAMS East Regional Campus offered American Heart Basic Life Support to 11 healthcare providers and conducted Heartsaver CPR for 57 people.
 - The UAMS East Regional Campus provided Baby Safety Showers to 20 caregivers. The UAMS East Regional Campus car seat technicians installed 19 car seats correctly for safety shower participants.
 - The UAMS East Regional Campus Helena participated in the Arkansas Drug Take Back Day organized with the Phillips County Opioid Task Force, Phillips County Police, and Sheriff’s Department. This community event provided a way for community members to dispose of unwanted, unused, and expired medications safely with no questions asked.
 - The UAMS East Regional Campus participated in the Helena Regional Medical Centers Living a Healthy Delta Lifestyle Health and Wellness Fair. Information on healthy eating, cooking, and exercise was distributed and staff promoted the resources available at the UAMS East Regional Campus.
 - Helena staff participated in the Second Baptist Church Annual Christian Block Party and the Community Wide Back to School Expo. Over 100 people received services including free blood pressure checks, upcoming program information, and wellness materials.
 - The Phillips County Opioid Awareness and Prevention Initiative held “The Opioid Crisis” community event. The program keynote speaker was Attorney General Leslie Rutledge. Also, that night, the community heard firsthand experience and testimony from a mother of a son addicted to opioids. Over fifty participants attended the event.
- **INDICATOR:** Maintain the number of clients participating in exercise programs offered by the UAMS East Regional Campus within 10% of the previous year.
 - **ACTIVITY:** The UAMS East Regional Campus Fitness Center encounters totaled 8,430. A total of 20,128 adults and youth participated in various exercise programs

- **INDICATOR:** Increase the number of patient encounters by 5% annually at the UAMS Family Medical Center in Helena
 - **ACTIVITY:** 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 866 patient visits in 64 days of clinic this quarter. In addition, 85 patients received onsite lab work by the phlebotomist. This quarter, the UAMS East Family Medical Center had 63 new patients. The UAMS East Family Medical Center health coaches have provided one-on-one counseling to four patients. This quarter, the smoking cessation program included seven clients. Clients attend weekly sessions for eight to ten weeks. Weekly sessions include education, helpful tips, motivation, and nicotine patches. Five of the seven clients have quit smoking. This quarter, health coaching for weight loss was conducted for four clinic patients. This indicator is making progress.
- **INDICATOR:** Provide diabetes education to community members and increase the proportion of patients in the diabetes clinic who maintain an A1C below seven.
 - **ACTIVITY:** The UAMS East Regional Campus provided 23 HbA1c tests to patients who are participating in the Diabetes Prevention Program. There were 18 elevated HbA1c tests, above the goal of seven. Diabetes Education and Nutrition Counseling occur on a monthly basis. Thirteen classes have met with 36 participants in either group sessions or one-on-one sessions. The UAMS East Regional Campus Diabetes Education Team was nominated for the 2018 UAMS Team Impact Award. Teams were nominated for making a significant impact in areas related to the UAMS Mission, Vision, and Goals through exceptional performance, excellent service, ingenuity, and high standards of leadership. The UAMS East Regional Campus team's commitment to diabetes education was instrumental in the nomination. The team works hard to schedule classes for their patients, working around transportation, availability, and socioeconomic factors. This program is the first Regional Program to

[who comes to the class] that has a caregiver. She's in her nineties. She never misses a beat with those [exercise] bands or anything. Of course, she still uses yellow. She loves being here and mentally it helps her. So there are a lot of benefits that come from this."

"I want to thank you so much for teaching and helping me with healthy choices! Even today was not disappointing. I am really going to set my goal and attain it this year. For four years in a row now I am still 15 pounds lighter than when I started. You are a great coach and friend!" – Cindy Sibley, Group Lifestyle Member

"We are so grateful for UAMS East offering this wonderful event here onsite for our employees. You have an amazing group and the employees always look forward to it every year. The employee that was sent to Mainline Clinic found out there were some over-the-counter medication he was taking that was causing his elevated blood pressure. They had him stop taking that and gave him a prescription for sinus medication and some blood pressure medication. He came in this morning telling us 'thanks' for having this event here because he didn't know why he was feeling the way he was until UAMS East told him how high his pressure was yesterday. He wanted me to tell you all. He said he slept so good last night and he has a follow-up appointment to continue to check his blood pressure. It was another successful event, and please tell your staff 'thanks'. I hope we are able to have this again next year." – Lois Ashley, HR at Superior Uniform Group

Corrine Bennett, 67 years old, joined the fitness center in April. When she first joined, she had to use a walker and could not raise her arms above shoulder level. She had very little mobility in most of her joints from lack of use and leading a sedentary lifestyle. She attends Silver Sneakers classes and uses some of the recommended fitness equipment. She now uses a cane for support and can raise her arms over her head. Corrine said, "I am much stronger now. I can even use light weights in the classes. Everything is becoming easier for me. I feel so much better than when I first started."

In June, the UAMS East Regional Campus along with other partners, including the MHI, hosted "Camp I Can! Grow, Go, and Glow" designed to teach area youth about making healthy choices

Indicator Progress across Programs

Across all ATSC-funded programs, 82% of indicators have been met or are in progress (see Table 1). A majority of ATSC-funded programs (ABI, COPH, MHI, UAMS-COA, UAMS East Regional Campus) reached their goals or made substantial progress towards goal achievement this quarter. The TPCP and TS-MEP, while meeting or making progress towards their goals, reported unmet goals or indicators that needed adjustment. For the TS-MEP, the number of Arkansans served overall has increased; however, the number of pregnant women served dropped by one person compared to the last quarter. The TS-MEP also saw a decrease in the number of individuals served under the CES waiver program, even though the number of allocated waiver slots increased. This decrease can be explained by the TS-MEP's transition to using the Provider-led Arkansas Shared Savings Entity (PASSE) program, which changes how waiver claims are processed. The TPCP reported 12 indicators as unmet, many of which were a result of the Minority Research Center's failure to report data to indicator assessment. The TPCP is working to identify why data was not reported and to rectify the situation. The remaining TPCP indicators, though unmet, still made moderate to significant progress in this quarter and throughout FY19 (i.e., 83 of 100 new smoke-free/tobacco-free policies, 11 of 24 PPYC minigrants implemented, one of three new internship agreements through the GASP, seven of 10 high-risk communities visited by GASP students). The TPCP plans to reassess indicator goals for FY2020, and any adjustments made to indicators will be discussed in future evaluation reports.

Despite some unmet goals, evaluators report consistent program participation by Arkansans, continued focus by programs on external partnerships and cross-sector collaborations, an unwavering commitment to serve vulnerable populations as well as supporting the growing body of public health practitioners that serve these populations. Programs also promote strong scientific rigor and innovation in understanding health and well-being in the state as well as create opportunities to influence and implement new policies that uplift overall quality of life. In all, ATSC-funded programs continue to tackle important health challenges and enhance quality of life for all Arkansans through education, service, research, and economic impact.