

## Executive Summary Form

### Agenda Number: 5983 Scheduled for the 8/10/2021

#### **Recommendation:**

Approve Contract number CTR055990 COVID-19 Health Disparities between the AZ Dept. of Health Services and Cochise Health and Social Services in the amount of \$3,169,013.00 for the period of 6/1/2021 – 5/31/2023.

#### **Background (Brief):**

The purpose of this intergovernmental agreement (IGA) is to leverage partnerships between ADHS, Local Health Departments and Statewide Partners by providing **CDC COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities** funding to support the implementation of the four (4) overarching strategies identified in the CDC grant.

- 1) Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that are underserved,
- 2) Increase/improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic,
- 3) Build, leverage, and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved, and
- 4) Mobilize partners and collaborators to advance health equity and address social determinants of health as they related to COVID-19 health disparities among populations at higher risk and that are underserved.

One third (33%) of Cochise County residents are Hispanic/Latino. Many are first- or second-generation Mexican Americans, and many are farmworkers from México who are attracted to the area. Douglas and Willcox residents are 74% and 35% Hispanic/Latino respectively. Nearly one third of county residents speak a language other than English at home, meaning that they lack English Language Proficiency. In the Douglas and Willcox areas, 26% to 16% of the target population lives in poverty, and 38% to 19% of children under age 12 live in poverty. Limited education is a social determinant of health in the Douglas, Willcox and Bisbee/Naco areas, where 14% to 7% of adults have less than a 9th grade education. Unemployment is high across the board, ranging from 30% in Douglas to a low of 11% in Bisbee, which is the county government seat and major source of employment. In Cochise County 37% of COVID-19 Cases have been among individuals of Hispanic/Latino origin. This initiative targets rural communities in these four areas of Cochise County but will also improve access in the more urban areas. The initiative will be accomplished through the following activities:

#### Rural Telehealth Care Center:

Access to care, especially culturally competent behavioral health, and specialty care, is limited in rural Cochise County. Life-saving healthcare is disproportionately harder for residents in Cochise County. This activity aims to develop a community telehealth facility, available to all providers, to allow their patients to access specialty and behavioral health care. CHSS will contract with Arizona Regional Economic Development Foundation (AREDF) to implement this activity.

#### Socially Vulnerable Cochise County Homeless Residents:

CHSS will partner with the Good Neighbor Alliance in Sierra Vista and the Bisbee Coalition for the Homeless to develop and implement the second part of this initiative. The goal of the Initiative is to reduce covid-19 impacts among socially vulnerable Cochise County homeless residents. Two Community Health Workers/CHWs (Promotores de Salud) will be trained to provide education to promote and support members of the target population. The CHWs will each be assigned to work directly with each partner organization. A statewide CHW Association will be contracted to train and mobilize the CHWs to help the homeless to access and understand health information to mitigate

## Executive Summary Form

### **Agenda Number: 5983 Scheduled for the 8/10/2021**

covide-19 and its social impacts. The local AHEC will promote understanding of and application of the National CLAS Standards through best practice and system/policy change with partner organizations.

#### **Salud para Nuestra Gente (Health for Our People):**

The third component of this initiative is to enhance personal and organizational health literacy and achieve system and policy change that reduces covid-19 impacts among socially vulnerable Cochise County Hispanic/Latino residents. The project goal will be collaboratively achieved through seven objectives that are outlined in the IGA. In brief they are:

- 1) Develop a Disparity Impact Statement,
- 2) Develop a Health Literacy and Sustainability Plan as a road map for implementation,
- 3) Community Health Workers will be training to provide education and support,
- 4) Health care providers will be trained to embrace the National CLAS Standards and relevant Healthy People 2030 Objectives,
- 5) CHWs will be incorporated into care teams,
- 6) Achieve at least three system or policy changes in Cochise County that will sustain organizational health literacy, and
- 7) Apply monitoring for quality improvement and sustainability of health literacy efforts among the target population.

CHSS will contract with the following organizations: the Arizona CHW Association (AzCHOW), Chiricahua Community Health Centers, Inc. (CCHCI), Winchester Heights Health Organization (WHHO), Pinal Hispanic Council (PHC), SE Arizona Area Health Education Center (SEAHEC), UA Prevention Research Center (AzPRC), and Susan Kunz an independent contractor.

This IGA will include hiring 6 new staff and funding a portion of the Deputy Director of Operations position. Two of the staff will be housed at the homeless shelters, and two will be housed at the Rural Telehealth Care Center.

#### **Fiscal Impact & Funding Sources :**

<b>Account Classification</b>	<b>Total Budget</b>
Personnel	\$ 475,650.00
ERE	\$ 171,234.00
Professional & Outside Services	\$ 2,244,940.00
Travel	\$ 8,370.00
Occupancy	\$ -
Other Operating	\$ 61,500.00
Capital Outlay	\$ -
Indirect	\$ 207,319.00
<b>TOTALS</b>	<b>\$ 3,169,013.00</b>

The Center for Disease Control (CDC) recently awarded ADHS a two (2)-year, non-competitive grant titled: **National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Populations and Rural Communities**. Funding was made available through the Consolidated Appropriations Act and the Coronavirus Response and Relief Supplement Appropriations Act, 2021 (P.L. 116-260, Section 2, Division M).

#### **Next Steps/Action Items/Follow-up:**

- Send signed approved IGA back to ADHS
- Receive notification that IGA has been fully executed and ready for approval in ADHS Portal
- Budget Amendment (BA) prepared by Program Manager/Coordinator

## Executive Summary Form

### **Agenda Number: 5983 Scheduled for the 8/10/2021**

- Once Purchase Order is released from ADHS, send --> BA, Fully Executed Contract, minutes of BOS meeting where IGA/Contract was approved, P.O. and Fillable Grant Form to County Finance for entry into New World System
- IGA & BA are processed by County Finance

Your approvals are respectfully requested.

#### **Impact of Not Approving:**

CHSS would not be able to address health disparities to this extent