



Oregon

Theodore R. Kulongoski, Governor

Oregon Health Authority

Office of the Director

500 Summer St. NE E20

Salem, OR 97301

Voice: 503-947-2340

Fax: 503-947-2341

TTY: 503-947-5080

August 30, 2010

The Honorable Peter Courtney, Co-Chair
The Honorable Dave Hunt, Co-Chair
State Emergency Board
900 Court Street NE
H-178 State Capitol
Salem, OR 97301-4048

Re: Retroactive Request to Apply – Competitive Grant – State Partnership Grant
Program to Improve Minority Health (CFDA 93.296) (OHA-OMHS-19)

Dear Co-Chairpersons:

Nature of the Request

The Department of Human Services/Oregon Health Authority (DHS/OHA), Office of Multicultural Health & Services (OMHS), requests retroactive approval to apply for a U.S. Department of Human Services – Office of Minority Health (DHHS-OMH) State Partnership Grant to Improve Minority Health, a non-ARRA funded grant. OMHS learned of the availability of funds on July 16, 2010 and the application was due on August 13, 2010. The duration of the DHHS-OMH grant is three years and funding of up to \$420,000 is expected to be distributed in September 2010. OMHS requested the full amount of \$420,000 (\$140,000 annually for three years).

Agency Action

The purpose of this grant is to promote local projects that facilitate the improvement of minority health and the elimination of health disparities experienced by people who have systematically faced greater obstacles to health and/or the social determinants of health as a result of characteristics historically linked to discrimination or exclusion. These include their racial or ethnic group, socioeconomic status, gender, mental health, physical disability, sexual orientation, or geographic location.

These projects will learn from and build upon successful activities conducted by local health departments (ex: Benton County Health Equity Alliance), state-funded community partnerships (ex: Healthy Communities Initiative) and private foundations (ex: Northwest Health Foundation). Over the next three years, the funds will be used to:

- Establish regional health equity coalitions, particularly focused on communities where diversity is concentrated and/or increasing, by identifying and engaging

- community leaders, health care providers, local public health and non-traditional community-based partners to collaborate to end health disparities in their regions.
- Provide infrastructure support and technical assistance to regional coalitions to develop regional blueprints for action to address health disparities and improve health services to vulnerable communities.
- Create and support routine communication opportunities for sharing data and best practices information across regions and with other stakeholders and state and local agencies to improve strategies for addressing health disparities.
- Foster improved collaboration between community partners and DHS/OHA. For example, OMHS will identify and train local community members participating in regional coalitions to serve on state-level boards, advisory councils and committees.

The activities described above align with DHHS-OMH priorities for funding, outlined in the document *Changing Outcomes – Achieving Health Equity, the National Plan for Action*, published in 2009. This document serves as a framework for state planning to address health disparities. The OMHS Community Advisory Council, which represents communities most at-risk for health disparities, has recommended this approach for the grant request, and the Northwest Health Foundation has expressed interest in leveraging its resources for this effort. The grant activities also align with several DHS and OHA Key Performance Indicators related to increased access to and utilization of DHS/OHA services by communities experiencing health disparities. In addition, we anticipate significant alignment with the Oregon Health Policy Board State Health Improvement Plan that is currently being developed.

OMHS was a recipient of DHHS-OMH funding during the 2005-10 funding cycle. If awarded, initial funding from this grant will enable regional coalitions to develop strong programs and compete for additional private and federal dollars. Ending health disparities is a key focus of health care reform, the Oregon Health Policy Board, and local programs and funders focused on health and human services. We anticipate continuation of this work after the end of this grant period.

Although DHHS-OMH does not require matching funds, OMHS has set aside funds to support this project and is in discussion with the Northwest Health Foundation to consider a funding partnership. Without DHHS-OMH funding, the project will be implemented as a pilot project that is smaller in scope and geographic reach to build capacity for future activities of this nature.

OMHS staff positions are funded by cost allocation. We do not anticipate requiring additional FTE as a result of this grant.

The timeline for this project is as follows:

- Year 1: Grants distributed in October 2010 for formation of regional equity councils, planning (assessment and development of strategic priorities and

initiatives) to address community level issues, and research (baseline evaluation activities).

- Year 2: Grants distributed in October 2011 for implementation of regional plans.
- Year 3: Grants distributed in October 2012 to disseminate findings, share successful strategies across regions, and conduct evaluation to inform future efforts.

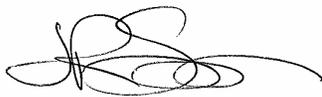
Action Requested

OMHS requests retroactive approval to apply for the State Partnership Grant to Improve Minority Health from the federal Department of Health & Human Services – Office of Minority Health. No state general or matching funds are required. If funds are awarded, DHS/OHA will review the need for Federal Fund expenditure limitation, and will return to an Emergency Board, if necessary.

Legislation Affected

None

Sincerely,



Jim Scherzinger
Deputy Director of Finance

CC: Sheila Baker, Legislative Fiscal Office
Linda Ames, Legislative Fiscal Office
Blake Johnson, Department of Administrative Services