



TEXAS
Health and Human
Services

**Texas Department of State
Health Services**

COVID-19 Health Equity Funding

CDC Funding

DSHS will administer **\$45.2M** in CDC funds to **authentically engage** targeted communities disproportionately impacted by COVID-19 and **build sustainable relationships** in those targeted communities leading to improved health among vulnerable populations.

- \$6.3M: Epidemiology and Laboratory Capacity (ELC) funds [6/1/21 – 7/31/23]
- \$38.9M: National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103) [6/1/21 – 5/31/23]



What is “health”?

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity

(Preamble to the Constitution of WHO as adopted by the International Health Conference, New York, 19 June - 22 July 1946)



Texas Department of State
Health Services

DSHS Health Equity Vision

DSHS believes that every Texan should be able to live life to the fullest. To achieve this, Texans must be healthy.

For DSHS, *health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.*

Currently, not all Texans enjoy the same level of health. Individuals belonging to several vulnerable populations are known to experience worse health and well-being outcomes when compared to the general population



Texas Department of State
Health Services

DSHS Health Equity Vision

These vulnerable populations are:

- Racial and ethnic minorities
- Low socioeconomic status
- Chronically ill
- Persons with disabilities
- Elderly
- Children
- Women
- LGBTQ+
- Rural communities
- Low-wage employment



Texas Department of State
Health Services

DSHS Health Equity Vision

To bring about its vision of a Healthy Texas, DSHS commits to the following principles:

Knowledge: DSHS commits to better understanding and addressing health disparities using data and training.

Representative Workforce: To mitigate bias and distrust, DSHS commits to recruitment, retention, promotion, and training policies that ensure the professional workforce, including sub-contractors, reflects the demographics of the populations we serve.

Community Engagement: In working with vulnerable populations, DSHS commits to listening to these populations to hear what they identify as their most pressing needs.

Prioritized Spending: Given its limited resources, DSHS commits to spending its time and money advancing health equity initiatives and addressing the needs of the most vulnerable among all vulnerable populations.



Texas Department of State
Health Services

DSHS Health Equity Activities

- The Office of Minority Health, Statistics, and Engagement closed at HHSC (August 31, 2018). This office had previously been known as the Center for the Elimination of Disproportionality and Disparities.
- DSHS took on the designation as the State Office of Minority Health (September 1, 2018)
- DSHS created and filled a Health Equity Policy Analyst position (August 1, 2019)
- Began looking at DSHS datasets to see what we could learn
- Conducted an informal health equity assessment of DSHS programs



DSHS Health Equity Activities

- Began travelling the state to discuss health equity in our Public Health Regions
- COVID hit
- Consulted with HHSC staff working on the COVID-19 Vulnerability Study
- Started hosting a health equity rotation for DSHS Preventive Medicine Residents. Working on a 7-week summer training program for the residents to begin Summer 2021.
- Began a monthly health equity webinar for staff. Started writing a monthly health equity column in the DSHS newsletter.
- Drafted the DSHS Health Equity Vision



Health Equity Funding

- Learned of the opportunity to secure some health equity funding as part of the ELC extension grant
- CDC released the **CDC-RFA-OT21-2103 National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities**
- These funds present an opportunity to carry out activities under all four principles of the Health Equity Vision



DSHS Office of Health Equity Policy and Performance

- The former DSHS Office of Public Health Policy and Performance renamed the Office of Health Equity Policy and Performance (OHEPP)
- OHEPP builds on an existing team of experienced public health professionals
- Creation of OHEPP part of a larger re-org, with the elimination of the Assistant Deputy Commissioner Division and its replacement with the Center for Public Health Policy and Practice
- This Center is comprised of the Office of Practice and Learning (OPL) and OHEPP



Office of Health Equity Policy and Performance (OHEPP)

- OHEPP charged with leading on these health equity grants
- OHEPP's plan is to use these grants as seed money to invest in a new way to approach health equity work
- Plan is based on developing the human infrastructure needed for authentic community engagement and building sustainable cross-sector partnerships
- By working together across public health, healthcare, and social services, health equity work will be positioned to live on post-grants



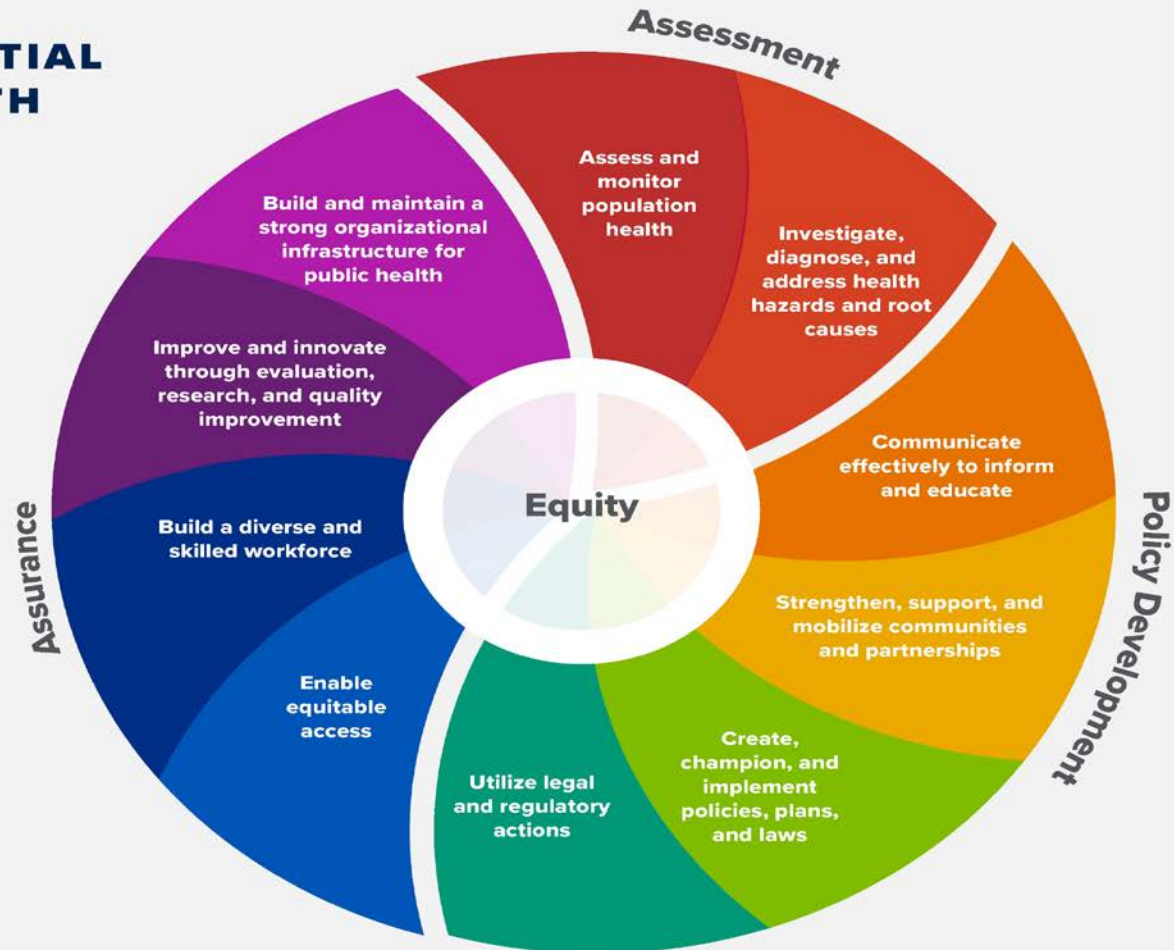
Essential Public Health Services

(revised September 2020)

THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

To protect and promote the health of all people in all communities

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



Created 2020



Texas Department of State
Health Services

CDC Funding

DSHS will administer **\$45.2M** in CDC funds to **authentically engage** targeted communities disproportionately impacted by COVID-19 and **build sustainable relationships** in those targeted communities leading to improved health among vulnerable populations.

- \$6.3M: Epidemiology and Laboratory Capacity (ELC) funds [6/1/21 – 7/31/23]
- \$38.9M: National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (CDC-RFA-OT21-2103) [6/1/21 – 5/31/23]



Grant Focus – 2 Major Criteria

1. Authentic community engagement

- Establishing rapport & developing relationships
- Spending time in the community & building trust
- Listening to community needs
 - ✓ Documenting voices in the community (town halls, listening sessions, interviews, focus groups)
- Staying engaged with community when funding dissipates

2. Building sustainable relationships

- Engaging community partners
 - ✓ Hospitals, clinics, FQHCs, community-based organizations, faith-based organizations, social service agencies
- Cross sectoral partnerships
 - ✓ Public health – healthcare – social services



Impact Statements

1. **Infrastructure:** Describe existing human infrastructure or proposed human infrastructure
 - A. Existing or new employees who could engage with community (i.e., community health workers, paid interns, health equity fellows, public health nurses)
 - B. Existing or new employees engage communities, hospitals, clinics, federally qualified health centers, community-based organizations, faith-based organizations, social service agencies to work together to holistically address community needs (e.g., sustainable volunteer networks)



Impact Statements

2. **Community Engagement:** Identify communities most impacted by COVID-19
 - A. Document community voices & listen to community needs (i.e., town halls, listening sessions, focus groups, interviews to gain community insight); community health assessments; working with trusted key community leaders
 - B. Work with interested entities to build cross sector partnerships (public health, healthcare, social services)



Impact Statements

3. **COVID Vaccinations:** Steps to maximize COVID vaccination rates in impacted communities

- A. Engage with community for ideas on how to increase vaccination rates (e.g., ideal locations for holding vaccination clinics; address barriers to vaccination such as vaccine hesitancy or for homebound individuals (i.e., individuals with disabilities); immunization clinics, health communication and literacy (materials, presentations, resources), transportation support))
- B. Work with interested entities to deliver vaccinations to the community (e.g., pop up vaccine clinics at local businesses, faith-based organizations; door-to-door vaccine administration)



Impact Statements

4. **Partnership Directory:** Document community partners engaged & build sustainable cross sectoral partnerships
 - A. Engage with community to develop contact information for entities & individuals (e.g., volunteers) interested in health equity work; document names and contacts for existing and new partnerships
 - B. Work with interested entities to develop network contact lists of individuals, businesses, and other organizations



Impact Statements

- 5. Health Equity Improvement Initiative:** Design intervention aimed at addressing an identified community need
- A. Engage with community to address an identified need (e.g., obesity, food insecurity, healthy mother initiatives, lactation services, community garden)
 - B. Work with community and community partners on how to address an identified community need



Impact Statements

- 6. Information Sharing & Learning:** Describe efforts to learn & share information on addressing COVID-19 health disparities among vulnerable populations
- A. Engage with community on ways to share health information between and among partners; sharing health equity progress and projects with local partners (e.g., monthly lunch & learn meetings)
 - B. Work with community and community partners on how best to ensure that information is shared between and among all entities



DSHS Infrastructure

Health Equity Community Engagement Specialist (HECES)

- Community engagement
- Documenting voices of targeted community
- Developing cross-sectoral partnerships
- Developing partnership directory for targeted community
- Documenting improvement opportunities prioritized by community

Health Equity Director, DeLawnia Comer-HaGans



Texas Department of State
Health Services

DSHS Infrastructure

Health Equity Evaluation & Performance Specialist (HEEPS)

- Documenting community-level quantitative data
- Developing/implementing/monitoring/reporting performance measures
- Monitoring performance of assigned funded LHDs
- Developing/implementing/monitoring/reporting on project plans
- Providing technical assistance on improvement and evaluation activities

Health Equity Evaluation & Performance Director, Mike Gilliam

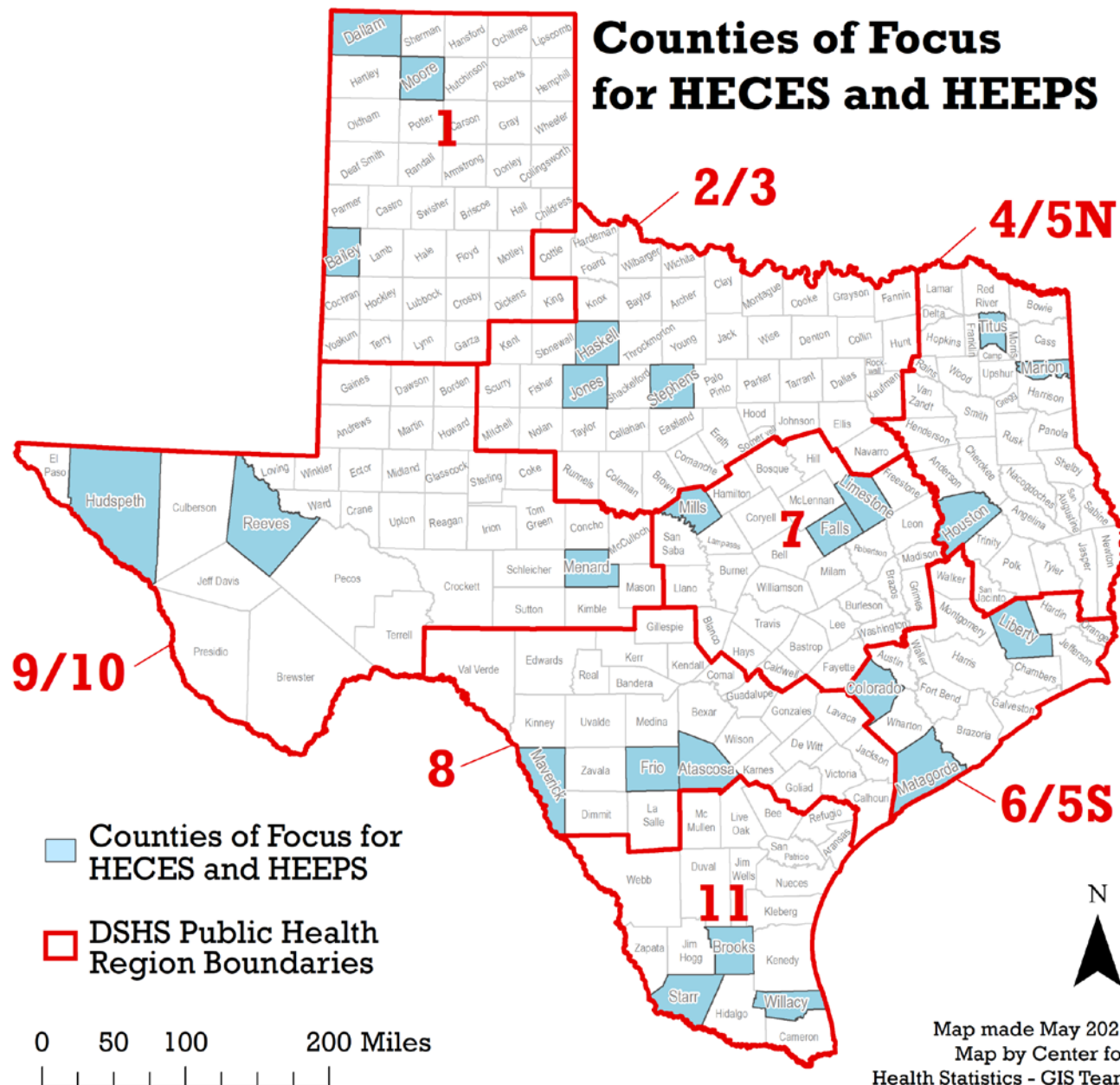


Texas Department of State
Health Services



TEXAS
Health and Human
Services

Texas Department of State
Health Services



54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

\$19,550,000 will be available for 54 local health departments (LHDs) to support authentic community engagement in targeted communities disproportionately impacted by COVID-19 and the building of sustainable relationships in those targeted communities.



Texas Department of State
Health Services

54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

The 54 LHDs would be eligible to apply for a maximum contract amount based on these county/jurisdiction population thresholds:

- up to \$152,000 for a population less than 25,000;
- up to \$290,000 for a population 25,000 to 99,999;
- up to \$400,000 for a population 100,000 to 249,999; and
- up to \$500,000 for a population of 250,000 or more.

The project period would be 21 months (09/01/21 – 05/31/23).

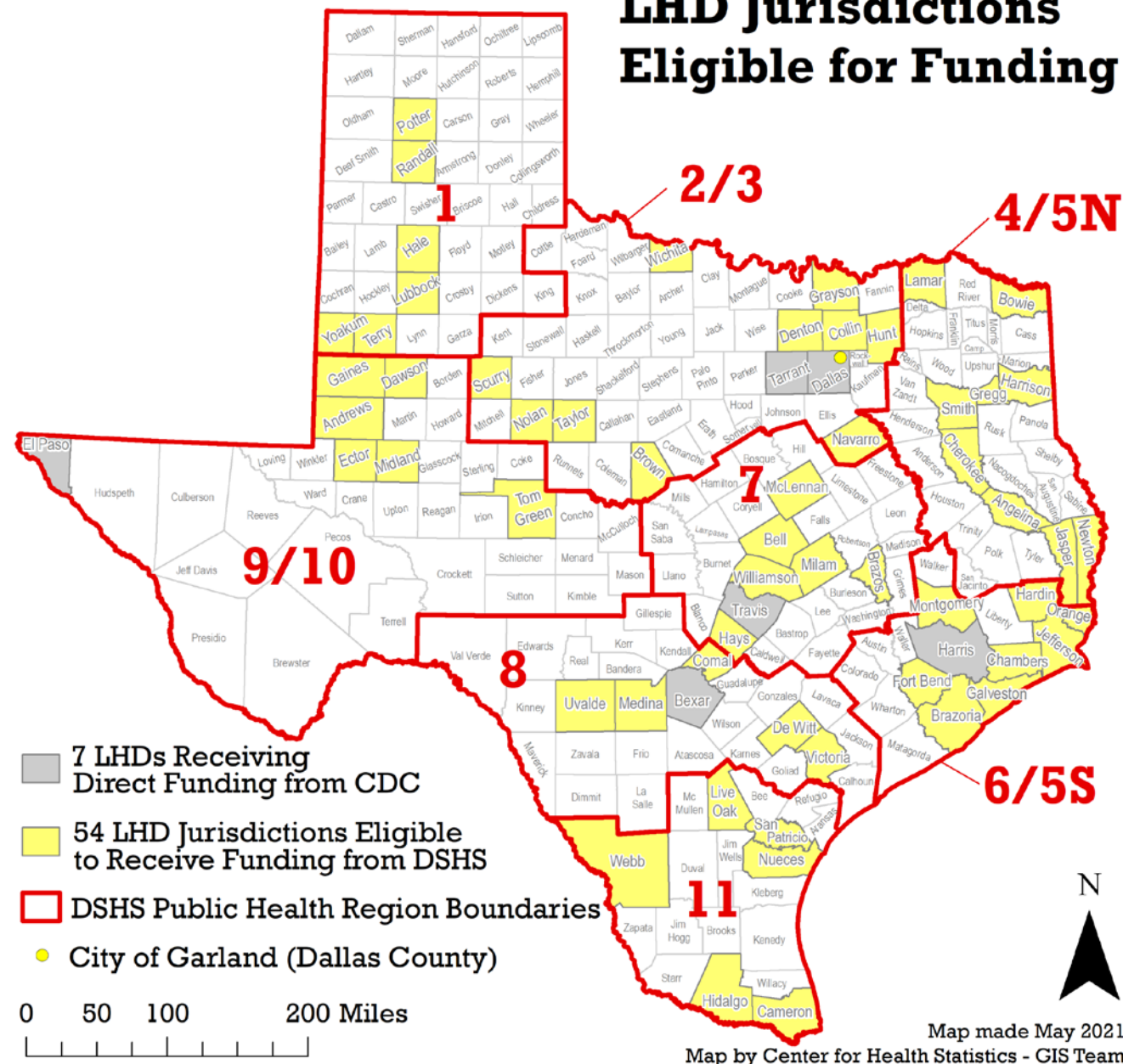




TEXAS
Health and Human
Services

Texas Department of State
Health Services

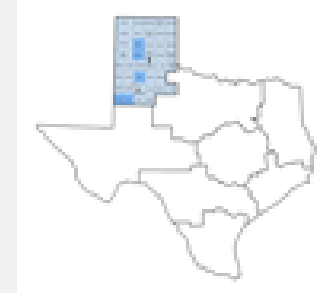
LHD Jurisdictions Eligible for Funding



54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

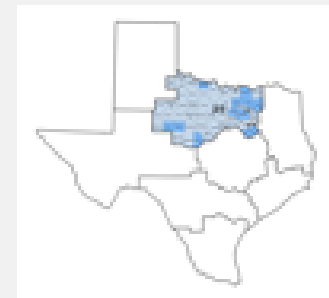
PHR 1 (4 LHDs are eligible):

- Amarillo Department of Public Health
- Lubbock (City of) Health Department
- Plainview – Hale County Health District
- South Plains Public Health District



PHR 2/3 (11 LHDs are eligible):

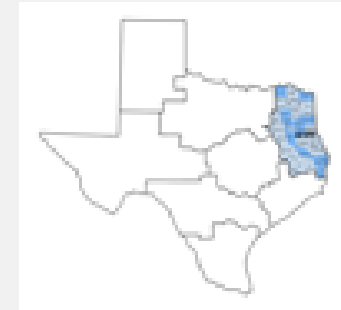
- Abilene – Taylor County Health Department
- Brown County – City of Brownwood Health Department
- Collin County Health Care
- Corsicana – Navarro County Public Health District
- Denton County Health Department
- City of Garland Health Department
- Grayson County Health Department
- Greenville – Hunt County Health Department
- Scurry County Health Unit
- Sweetwater – Nolan County Health Department
- Wichita Falls – Wichita County Health Department



54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

PHR 4/5N (8 LHDs are eligible):

- Angelina County and Cities Health District
- Cherokee County Health Department
- Gregg County Health Department
- Jasper – Newton County Public Health District
- Marshall – Harrison County Health District
- Northeast Texas Public Health District
- Paris – Lamar County Health Department
- Texarkana – Bowie County Health Department

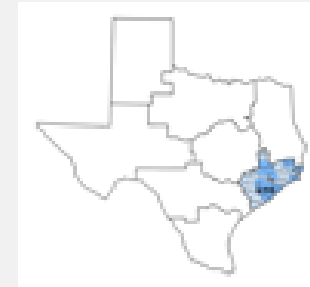


Texas Department of State
Health Services

54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

PHR 6/5S (10 LHDs are eligible):

- Beaumont Public Health Department
- Brazoria County Health Department
- Chambers County Health Department
- Fort Bend County Health Department
- Galveston County Health District
- Hardin County Health Department
- Jefferson County Public Health Department
- Montgomery County Public Health District
- Orange County Health Department
- Port Arthur City Health Department

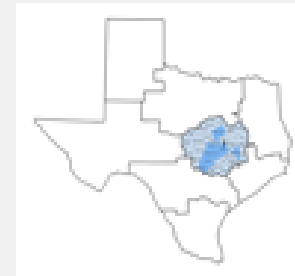


Texas Department of State
Health Services

54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

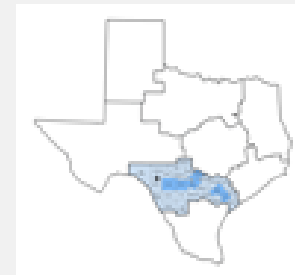
PHR 7 (6 LHDs are eligible):

- Bell County Health Department
- Brazos County Health Department
- Hays County Health Department
- Milam County Health Department
- Waco – McLennan County Health Department
- Williamson County and Cities Health District



PHR 8 (5 LHDs are eligible):

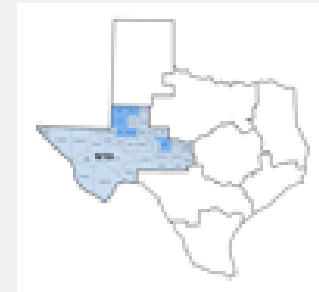
- Comal County Health Department
- Cuero – DeWitt County Health Department
- Medina County Health Unit
- Uvalde County Health Department
- Victoria County Public Health Department



54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

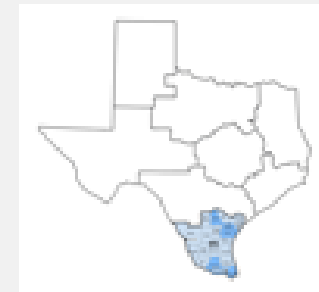
PHR 9/10 (4 LHDs are eligible):

- Andrews City – County Health Department
- Ector County Health Department
- Midland Health Department
- San Angelo – Tom Green County Health Department



PHR 11 (6 LHDs are eligible):

- Cameron County Health Department
- Corpus Christi – Nueces County Public Health District
- Hidalgo County Health Department
- Laredo (City of) Health Department
- Live Oak County Health Department
- San Patricio County Health Department



7 LHDs Receiving Separate CDC Funding

The following 7 LHDs are not eligible to receive COVID-19 Health Equity Funding from DSHS because they will receive direct funding from CDC:

- Austin Public Health
- City of El Paso Department of Public Health
- Dallas County Health and Human Services
- Harris County Public Health
- Houston Health Department
- San Antonio Metropolitan Health District
- Tarrant County Public Health



54 LHDs Eligible for DSHS COVID-19 Health Equity Funding

Two webinars will be held June 15th to provide more information to the 54 eligible LHDs. These webinars will also be an opportunity for the 54 LHDs to ask questions.

- Tuesday, June 15th 10am – 11am (CT)
- Tuesday, June 15th 2:30pm – 3:30pm (CT)

The information DSHS presents at both webinars will be the same. However, questions from the LHDs may be different.

Webinar registration web-links will be sent to the 54 LHDs.

Both webinars will be recorded and sent to the 54 LHDs.



Texas Department of State
Health Services

54 LHDs Eligible Funding – Next Steps

- OHEPP will send instructions on how to request funding by **06/21/21**
- Submission of requests to OHEPP by **07/01/21**
- Finalized proposed budget by **07/29/21**
- LHD contracts begin going out through DocuSign on **08/19/21**



Texas Health Equity Fellowship

What is the Texas Health Equity Fellowship?

- A paid training program with the goal to expand diversity in the public health workforce & to address health disparities among underserved and higher risk populations

Who's Eligible?

- 54 eligible local health departments

How will this work?

- DSHS will match host sites with Fellows who will work on public health, COVID response, and/or health equity initiatives
- Fellows will be matched based on geography, subject matter interest, and relevant skills
- DSHS and host sites will provide a mentorship component to all Fellows to supplement their experience



Texas Department of State
Health Services

Texas Health Equity Fellowship

How do I become a host site?

- LHDs must complete an application which details the ability to supervise and support the Fellow as well as develop the job assignments, activities, and deliverables for the Fellow

What type of folks can apply?

- Recent graduates from community and technical colleges, non-four-year academic institutions, historically black colleges and universities, or graduates from public health programs with diverse backgrounds and experiences
- Fellows should have a strong interest in public health and health equity
- Examples of degrees and certifications may include GIS, social work, emergency management, nursing, vocational nursing, business, government, communications, public health, health education, community health, and community health workers

How many Health Equity Fellowships are available?

- Up to 16



Texas Department of State
Health Services

8 DSHS PHRs Eligible for DSHS COVID-19 Health Equity Funding

\$3,800,000 will be available for 8 DSHS administrative Public Health Regions (PHRs) to support **authentic community engagement** in targeted communities, without an LHD, disproportionately impacted by COVID-19 and the **building of sustainable relationships** in those targeted communities.



8 DSHS PHRs Eligible for DSHS COVID-19 Health Equity Funding

Each of the 8 DSHS administrative PHRs would be eligible to receive up to \$475,000.

- PHR 1 (Headquarters – Lubbock)
- PHR 2/3 (Headquarters – Arlington)
- PHR 4/5N (Headquarters – Tyler)
- PHR 6/5S (Headquarters – Houston)
- PHR 7 (Headquarters – Temple)
- PHR 8 (Headquarters – San Antonio)
- PHR 9/10 (Headquarters – El Paso)
- PHR 11 (Headquarters – Harlingen)

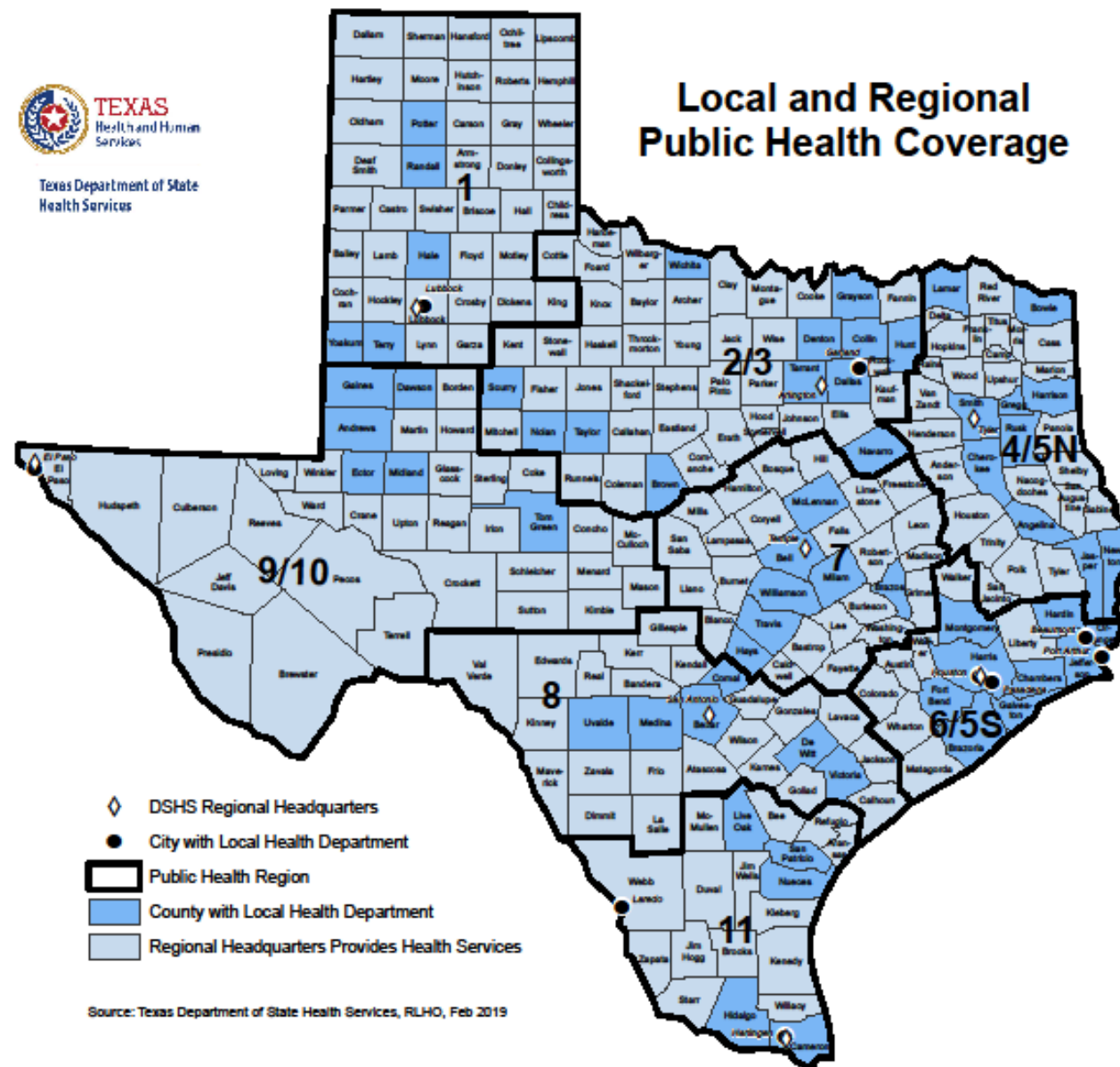
The project period would be 21 months (09/01/21 – 05/31/23).





Texas Department of State Health Services

Local and Regional Public Health Coverage



Source: Texas Department of State Health Services, RLHO, Feb 2019



TEXAS Health and Human Services

Texas Department of State Health Services

8 DSHS PHRs Funding – Next Steps

One webinar will be held June 16th to provide more information to the 8 DSHS administrative PHRs. This webinar will also be an opportunity for the DSHS PHRs to ask questions.

- Wednesday, June 16th 2:30pm – 3:30pm (CT)

Webinar registration web-link will be sent to the 8 DSHS PHRs.

The webinar will be recorded and sent to the 8 DSHS PHRs.



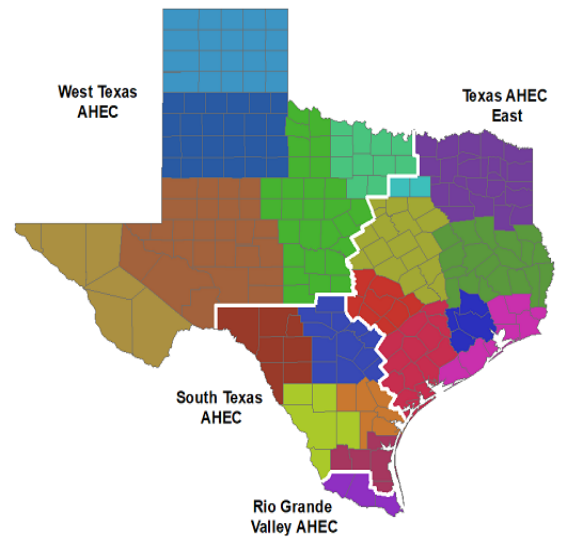
Texas Department of State
Health Services

8 DSHS PHRs Eligible for DSHS COVID-19 Health Equity Funding

- OHEPP will send instructions on how to request funding by **06/21/21**
- Submission of requests to OHEPP by **07/01/21**
- Finalized proposed budget by **07/29/21**
- DSHS PHR funding available by **09/01/21**



Our Additional Texas Partners



Texas Department of State
Health Services



Texas Parks & Wildlife

TEXAS
PARKS &
WILDLIFE

- Increase diversity of state park and greenspace users
- Hire TPWD Community Health and Nature Liaison
- Improve access to nature and outdoor programs for vulnerable populations

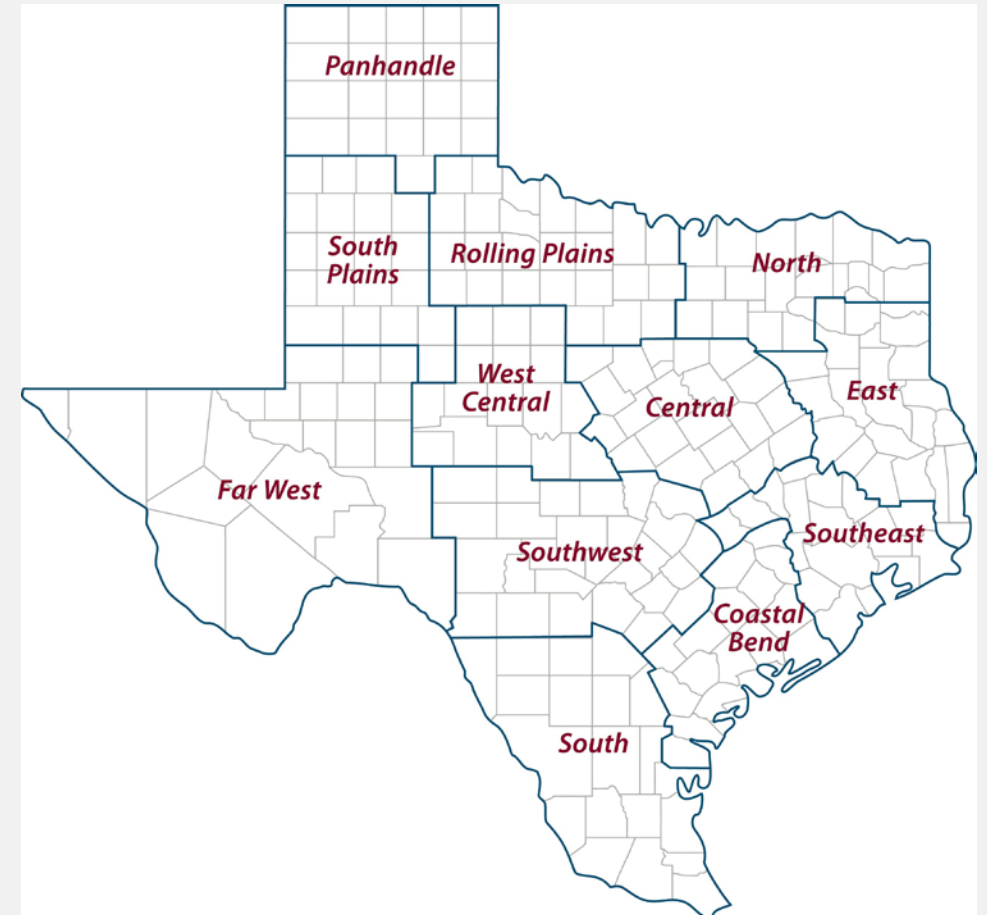


Texas Department of State
Health Services

Texas A&M AgriLife

TEXAS A&M
AGRI LIFE
EXTENSION

- Existing expertise, community partners, and infrastructure across TX
- Hire 8 AgriLife Health Equity Specialists



Texas Department of State
Health Services

Texas State Office of Rural Health



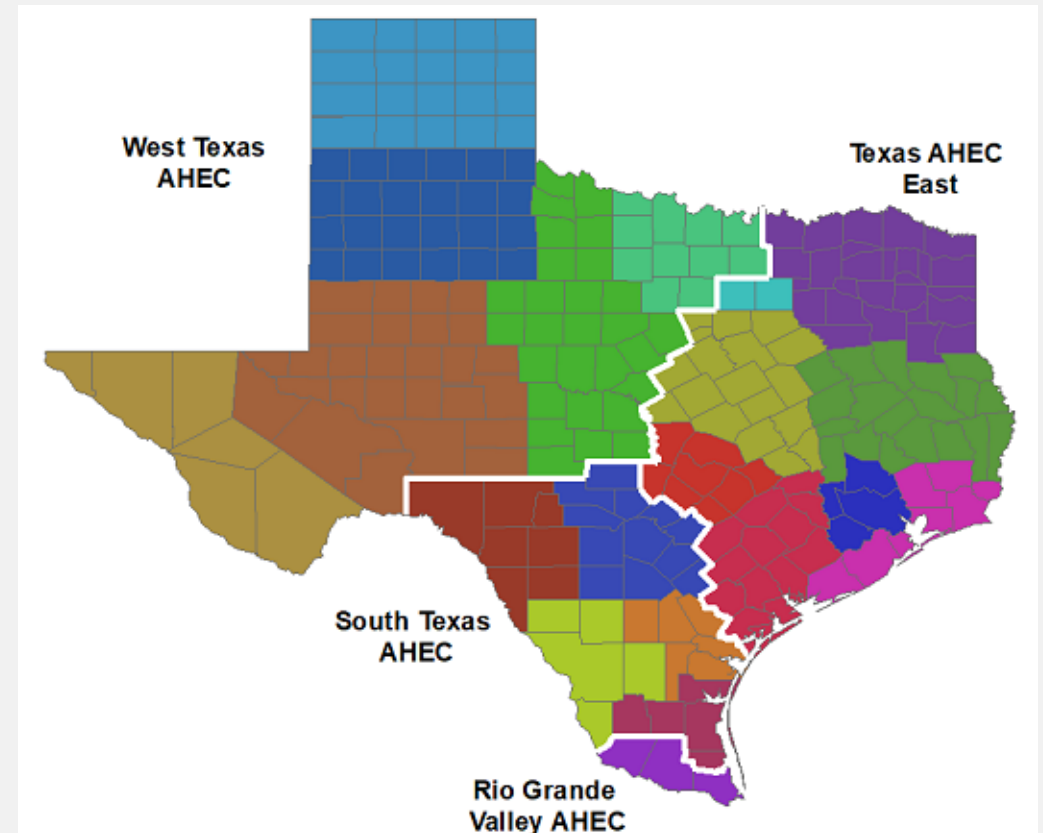
- Pilot Community Paramedicine Program
 - Improve primary care services to rural communities



Texas Department of State
Health Services

Area Health Education Centers

- Investment in the public health workforce (i.e., community health workers)
- Improve access to primary and preventive health care services
- Focus on underserved, highly impoverished, and rural areas



Texas Department of State
Health Services

DSHS COVID-19 Health Equity Funding Contacts

DSHS Points of Contact	Area of Responsibility
Dr. DeLawnia Comer-HaGans (DeLawnia.ComerHagans@dshs.texas.gov) Director, Health Equity – Office of Health Equity Policy and Performance (OHEPP)	Principal Investigator (COVID-19 Health Equity Funding) and Health Equity Lead
Mike Gilliam (Mike.Gilliam@dshs.texas.gov) Director, Health Equity Evaluation and Performance – OHEPP	54 LHDs and 8 DSHS PHRs
Courtney Dezendorf (Courtney.Dezendorf@dshs.texas.gov) Director, Office of Practice and Learning	Area Health Education Centers, Texas Health Equity Fellows
Jessica Hyde (Jessica.Hyde@dshs.Texas.gov) Partnership Lead, Center for Public Health Policy and Practice	Texas AgriLife, Texas Parks and Wildlife Department
Colin Crocker (Colin.Crocker@dshs.texas.gov) Public Health System Improvement Lead, OHEPP	State Office of Rural Health
Peter Hajmasy (Peter.Hajmasy@dshs.texas.gov) Director, OHEPP	Health Equity Policy and Performance
Dr. Stephen Pont (Stephen.Pont@dshs.texas.gov) Medical Director, Center for Public Health Policy and Practice	Executive Sponsor for COVID-19 Health Equity Funding



Texas Department of State
Health Services

Thank you!