

Health Disparities and Community Grant Program

Fiscal Year 24-27 Lifecycle FY24 BOH Rule Changes

To: Members of the State Board of Health

From: Office of Health Equity: Health Disparities and Community Grant Program (HDGCP)

- Rob McComb, Health Disparities and Community Grant Specialist;
- Lynda Saignaphone, Health Disparities and Community Grant Specialist;
- Jesus Rodriguez-Serrano, Health Disparities and Community Grant Specialist;
- Arlen Zamula, Director

Through: Jill Hunsaker-Ryan, Executive Director

Date: 9/20/23

Subject: November Agenda Request

The Office of Health Equity is requesting to be placed on the November agenda to discuss making a technical language change to Colorado State Board of Health Rule 6 CCR 1014-5, Office of Health Equity Rules for the Health Disparities and Community Grant Program. We are seeking this change to:

- a. To clarify the process to procure a training and technical assistance provider to support all Senate Bill 181 and Amendment 35 grantees.
- b. To clarify that the program evaluation under section 1.5(1) Grant Program Effectiveness is submitted by grantee's once per grant cycle and not once per year.

SB21-181 Background:

In 2021, the Colorado Legislature passed Senate Bill 21-181 (SB181), which renamed the existing Health Disparities Grant Program to the Health Disparities and Community Grant Program (HDCGP). The HDCGP is funded through SB181 and A35. SB21-181 funding is provided for community and grassroots organizations, to develop local plans that increase capacity toward achieving health equity, and to improve social infrastructure and health outcomes that eventually lead to the reduction of health inequities and disparities. Funding is specifically for the following categories: strategic planning, capacity building, and technical assistance. The SB181 Grant concluded its first cycle on June 30, 2023, beginning its second on July 1.

Proposed Changes: 20220214 BOH Rules 6 CCR 1014-5.pdf

Per statute technical training and assistance as well as evaluation regarding impact on the community are required to be provided to grantees. The proposed language changes are technical, in order to align with the language in the statute and to help prevent misinterpretation for operations. The following changes are being requested and will be discussed further in November's meeting.

1. Under 1.2(1)(a)(ii)(A)(2)(b)(iii)

a. Current Language: "Technical training and assistance within the community organization;"



- b. Proposed Change: "Technical training and assistance within the community organizations;"
 - i. Justification: This is to correct a typo and align with the language in the statute, page 3 Senate Bill 21-181, C.R.S. 25-4-2203(2)(d)(III).

2. <u>Under 1.2(1)(a)(ii)(A)(2)(b)(iii)</u>

- a. Current Language: "Technical training and assistance within the community organization;".
- Additional Proposed Change: Include a bullet point that states "This could include a single applicant working with multiple, eligible community organizations".
 - i. Justification: This is to correct a typo and align with the language in the statute, page 3 Senate Bill 21-181, C.R.S. 25-4-2203(2)(d)(III).

3. <u>Under 1.5(1)</u>

- a. Current Language: "The Office of Health Equity and the State Board shall determine the criteria for evaluating the effectiveness of the programs that receive grants."
- b. Additional Proposed Change: "The Office of Health Equity and the State Board shall determine the criteria for evaluating the effectiveness of the programs that receive grants to be submitted by each grantee at the end of each grant cycle.
 - i. Justification: This change serves to clarify that Grantee led-evaluations are to be submitted once per grant cycle and not per year.

Summary and Timeline: Community Engagement for Rule Change

The Office of Health Equity (OHE) conducted a multi-prong approach for engagement for this proposed rule change. The main method of collecting the information was through the linked survey which was available in English and Spanish. It was shared widely with various parties, including current grantees, state offices and grants programs, and our professional networks. Means of sharing included sending out emails, the OHE monthly newsletter, developing and sharing a flier, and publishing the survey on the HDCGP website. We requested suggestions, concerns, and/or questions about the proposed changes, and any other related feedback. The survey took roughly 5 minutes to complete, was anonymous, and gathered demographic information about the individual completing it, such as their organization, location, and area of work. It ran from 6/1/23 - 7/31/23.

In the survey, the current Board of Health (BOH) Rules (<u>6 CCR 1014-5</u>), which were adopted on December 15, 2021, effective February 14, 2022, were included for reference. Each change was provided with an explanation of why the change was suggested. Each proposed change was formed as its own question for approval/disapproval, with an option to provide feedback if the change was not approved. At the Health Equity Commission (HEC) meeting in June 2023, preliminary results were shared and input was requested.



An additional update and request for input was completed in July 2023 to the Health Equity Commission (HEC). All survey responses except 1 were in favor of the rule changes, and the explanation for the no response indicated that the individual completing the survey did not understand that the rules are for the HDCGP. The survey closed at the end of July with 34 responses. In July, the HEC approved moving forward to the Board of Health.

In August 2023, we began preparing the materials to present to the Board of Health for both the request in September 2023 and full presentation in November 2023. We are now formally requesting a public comment period for these changes through the Board of Health.

Throughout October 2023, we will work with the Board of Health Administrator Michael Nicolette and our legal team to finalize the hearing packet and ensure that we have everything prepared. We will also engage in the public comment period as needed. In November 2023, we will finalize all documents and the presentation of the changes and feedback in order to formally request the rule changes.

Closing:

We are requesting to be added to the agenda for the November 2023 Board of Health meeting in order to finalize the aforementioned rule changes. The changes are for clarity and minor corrections, and have not received substantive pushback or disagreement thus far. For additional information, please contact the Office of Health Equity (OHE) Director, Arlen Zamula. She can be reached by email, arlen.zamula@state.co.us or by phone, 917-612-8924.