

TSET RURAL HEALTH PROJECT — LISTENING SESSION EXECUTIVE SUMMARY

Overview:

To understand health improvement needs in rural Oklahoma, TSET worked with a consultant to conduct several listening sessions across the state.

MetaFund: Impact Investing conducted a series of in-person and virtual listening sessions, ideation sessions and surveys with a diverse group of rural Oklahoma stakeholders in the fall of 2022. In-person sessions were conducted in Guymon, Woodward, Elk City, McAlester, Idabel and Pawhuska. The resulting feedback can be used to inform the development of funding opportunities that meet local needs, achieve desired results and maximize resources.

What we learned:

The top health priorities cited were the reduction of diabetes, heart disease and cancer. Stakeholders identified their top three priorities for rural health:

- · Accessibility related to health care
- · Social drivers of health (e.g. transportation, affordable housing and food security)
- · Services that allow individuals to receive care locally and/or age in place without moving to assisted living or a nursing home

All six communities identified these as significant challenges affecting rural health:

- Insufficient access to health care
- · Social drivers of health, which are the conditions in which people are born, live, work and play.
- · Inability to sustain effective programs and services
- · Gaps in health literacy, meaning the ability for people to find, understand and use information to make health decisions
- · Limited public health workforce

Future strategies:

Stakeholders identified four strategies as being critical to building or growing community engagement:

- · Improving health literacy
- Developing strategic partnerships
- · Providing financial incentives for healthier behaviors
- · Increasing health-related community events or activities

MetaFund provided seven recommendations focused on enhancing local engagement and strengthening community and regional partnerships for maximum impact:

- · Transparent, two-way communication should be used to communicate with rural health stakeholders about TSET priorities and how those priorities will be addressed.
- · Community agency should be central to the planning, design, implementation and performance monitoring and evaluation processes.
- · A stakeholder advisory structure should be created to provide continuous local feedback and ensure that implementation challenges and stakeholder needs are met.
- · Project findings should be shared with other public health organizations and professionals with the goal of driving collaborative planning and collective impact.
- · Additional public-private partnerships should be explored with the stakeholder groups participating in this project.





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- TSET may consider funding structures such as Pay for Success, which provides communities/programs with flexible, private capital to implement programs, while TSET funds could be used to pay only for successful outcomes aligned with their mission.
 - [Note: MetaFund's Impact Accelerator is a Pay for Success investor and intermediary.]
- Rural health stakeholders should be connected to the health care workforce planning and funding discussions at the state level.

Additional findings:

Half of participants noted the importance of aligning strategies and resources with local values. Most reported that public health professionals do not adequately engage local communities in the decision-making process.

Eighty-three percent identified a lack of community engagement as a challenge, and 67% noted that a lack of resources and the ways in which funding is made available result in competition rather than collaboration. Stakeholders found the grantmaking process is often an "all or nothing" approach in which they must have policies, matching funds or other prerequisites in place before they can receive funding. It was suggested that grantors consider funding projects while also providing technical support to assist in meeting other desired community requirements.

Stakeholders indicated that a lack of community capacity was the greatest barrier to applying for or executing grants. They noted the grant period was sometimes too short or that requirements to gather data in the initial phase delayed implementation and hindered their ability to achieve desired outcomes. Stakeholders also noted the need for ongoing assistance for workforce recruitment, training and technical support after grants are awarded to enhance capacity.

Specific to TSET, half indicated the grant process was challenging, citing a complicated application process as their biggest barrier. Stakeholders were split about if they would apply for a TSET grant in the future based on what they know of the current process. Still, a majority of previous applicants reported being satisfied with the process overall.





