

Achieving a Healthy Oklahoma

Overview,
Action Guide, and
Recommendations



HUDSON COLLEGE OF PUBLIC HEALTH
CENTER FOR PUBLIC HEALTH PRACTICE
The UNIVERSITY of OKLAHOMA HEALTH SCIENCES CENTER

Achieving a Healthy Oklahoma

The primary goal of the Achieving a Health Oklahoma initiative was to ensure that the state of Oklahoma is prepared with a robust public health workforce and infrastructure, a strong health care system, and a strategic plan to monitor and reduce health disparities within the state in case of existing and emerging health threats. Findings and recommendations in this booklet are a culmination of feedback from members of the steering committee, workgroup members (business, education, health, and community engagement), and statewide listening session participants.

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Background

The Achieving a Healthy Oklahoma initiative was launched in 2021 by the Center for Public Health Practice in the University of Oklahoma's Hudson College of Public Health. The initiative, funded by private and philanthropic organizations, was a nonpartisan effort to bring people together from across Oklahoma, and from all sectors of society, to enhance and expand public health infrastructure in the state. The goal was to ensure that Oklahoma is well prepared for future public health emergencies and that Oklahoma citizens are healthier and less vulnerable to emerging diseases that may become the next pandemic. Our team assembled leaders and experts from the business, education, community engagement, and health sectors to share their experiences and ideas about achieving these outcomes and improving the overall health and well-being of Oklahomans. The initiative began in July 2021. We began by recruiting steering committee and workgroup members. By November 2021, there were 19 steering committee members and 85 workgroup members. From December 2021 through June 2022, we held four steering committee meetings, eight workgroup meetings, 23 key informant interviews with steering committee members and workgroup chairs, 22 responses from workgroup members to an online survey, and six community listening sessions. We recognized that strategic communication across each workgroup (business, education, community engagement, and health) was critical to recommendations around improving health through creating policy change, enhancing data driven preparedness practices, cultivating partnerships, and promoting health literacy within our state. The final results include six statewide policy recommendations and a multi-sector action guide to bolster public and private partnerships. These documents can be accessed through the Center for Public Health Practice website.



Assemble experts to develop solutions for protecting public health and preventing premature death, disability, and excessive demands on the health care system.

Steering Committee Overview

Leaders and advocates from across Oklahoma were recruited to participate in the Achieving a Healthy Oklahoma initiative. These individuals represented all sectors (e.g., business, philanthropic, health, community-based, public policy, civic, and others) and provided valuable input on the needs and opportunities associated with improving health in our state. The steering committee members formed the cornerstone of the initiative and helped to inform future activities in the Center for Public Health Practice.

Steering Committee Meeting Summaries

MEETING	THEME	ACTIONS
1	The role of the Achieving a Healthy Oklahoma initiative in improving preparedness and overall health in Oklahoma	<ul style="list-style-type: none"> Opening remarks by Dr. Judy Monroe, President and CEO of the CDC Foundation Distribution of the Achieving a Healthy Oklahoma Briefing Book to attendees Group reaction and discussion of challenges created by COVID-19
2	The changing workforce infrastructure	<ul style="list-style-type: none"> Opening remarks by Dr. Howard Koh, Harvard T.H. Chan School of Public Health and Harvard Kennedy School Statewide workforce poll update by Pat McFerron Workforce development discussion Key informant interviews and online survey results provided to the committee Updated environmental scan and workgroup SWOT tables provided to the committee
3	Data Modernization	<ul style="list-style-type: none"> Opening remarks by Dr. Jennifer Layden, CDC Associate Deputy Director for Public Health Science and Surveillance Panel discussion with Dr. Jennifer Layden, Dr. David Kendrick, and Dr. Derek Pate Policy recommendations distributed to the committee
4	The Achieving a Healthy Oklahoma final report and next steps	<ul style="list-style-type: none"> Remarks by Gary Cox, J.D., Associate Dean for Public Health Practice and Community Partnerships Final report provided to workgroup and steering committee members Group reaction and discussion on the completion of the Achieving a Healthy Oklahoma initiative Next steps for the Center for Public Health Practice

Workgroup Overviews

Public Health and Health Care

Chairs: Dr. John Zubialde, Executive Dean, University of Oklahoma College of Medicine
Faculty Advisors: Dale Bratzler, DO, MPH and Aaron Wendelboe, PhD

The public health and health care workgroup developed recommendations for the steering committee based on successes and weaknesses during the COVID-19 pandemic. This workgroup also provided input on what resources are necessary to prepare public health and health care sectors and practitioners for future outbreaks and pandemics. Members focused on policy changes and workforce development tools that are needed to strengthen and improve public health response and health care delivery across the state.

Business

Chair: Corey Phelps, PhD, Dean of the Michael F. Price College of Business, University of Oklahoma **Faculty Advisors:** Junying (June) Zhao, PhD, MPH and Daniel Boatright, PhD

The business workgroup addressed the wide range of public health issues impacting small, intermediate, and large businesses in Oklahoma and throughout the region. The members particularly focused on businesses that impact Oklahoma’s economy and ways in which the Center for Public Health Practice could partner with them to ensure the state has a sustainable, thriving, healthy workforce that can withstand future health crises.

Education

Chair: Jennifer Lepard, DrPH, Representative, State Department of Education
Faculty Advisors: Ann Chou, PhD, MPH, MA and Valerie Williams, PhD, MPA

The education workgroup assessed the impact of COVID-19 on the education pipeline, including pre-K through post-secondary, and developed specific recommendations for programmatic changes. The members specifically focused on ways to strengthen the education sector to ensure that students and educators have access to necessary resources during health crises.

Community Engagement

Chairs: Mike Fina, Executive Director, Oklahoma Municipal League and Julie Knutson, President and CEO, The Oklahoma Academy
Faculty Advisor: Kerstin Reinschmidt, PhD, MPH

The community engagement workgroup created recommendations to involve local communities in developing future health preparedness programs. Members also brainstormed ways to improve community health throughout Oklahoma by utilizing the Center for Public Health Practice to strengthen community engagement and build trust between community members and local health experts.

Statewide Listening Session Results

As of June 14, 2022, six regional listening sessions were held across Oklahoma. The goal was to learn more about the innovations, strengths, weaknesses, recommendations, and key stakeholders/partners in each community during their local pandemic response effort.

The common themes identified below are those that were mentioned by more than 50 percent of the participants in the community sessions. These are issues that transcended regional boundaries and highlight the pandemic response on a larger scale.

“I hope that we learn from this experience. We really have to step away from planning for people without planning with people. What you do for me, without me, you do to me.”



Strengths

- Communities coming together during the pandemic
- Strong volunteer presence
- Flexibility among common and secondary schools in education delivery, communication, and leadership
- Coordination and leadership efforts of emergency response systems at the local and county level
- Communication at the local level
- Businesses were flexible and looked for opportunities to engage in the local emergency response effort



Weaknesses

- Inadequate staffing levels at county health departments, hospitals, and schools
- Vaccine rollout presented various barriers in regard to scheduling, prioritizing local populations, weather, etc.
- Inconsistent messaging from the federal and state level
- Difficulties in partnering with tribes at the local level due to differing federal rules (e.g., vaccination, contact tracing, and testing)
- Politicization (science became politicized)
- Technology barriers
- Burnout among health care workers



Recommendations

- Develop real-time actionable communication strategies
- Establish and maintain strong partnerships at the local level before, during, and after emergencies
- Invest more in the health care workforce and have staff work at the highest level of licensure
- Provide additional community health resources (e.g., mental health, substance abuse services, Department of Human Services)
- Make real-time, decentralized, transparent data accessible
- Train policy makers and political leaders on disaster response and health emergency management
- Involve stakeholders (e.g., business, education, faith leaders, and the Department of Human Services)
- Avoid politicization of strictly health issues



Stakeholders and Partners

- Tribes
- Local businesses
- Education boards and schools
- Faith communities
- Department of Human Services
- Hospitals
- Emergency management
- Health departments
- Non-profit organizations
- Colleges/career technology centers
- Behavioral health providers
- Representatives from rural areas of the state
- Major employers
- Department of Corrections
- Oklahoma Health Care Authority

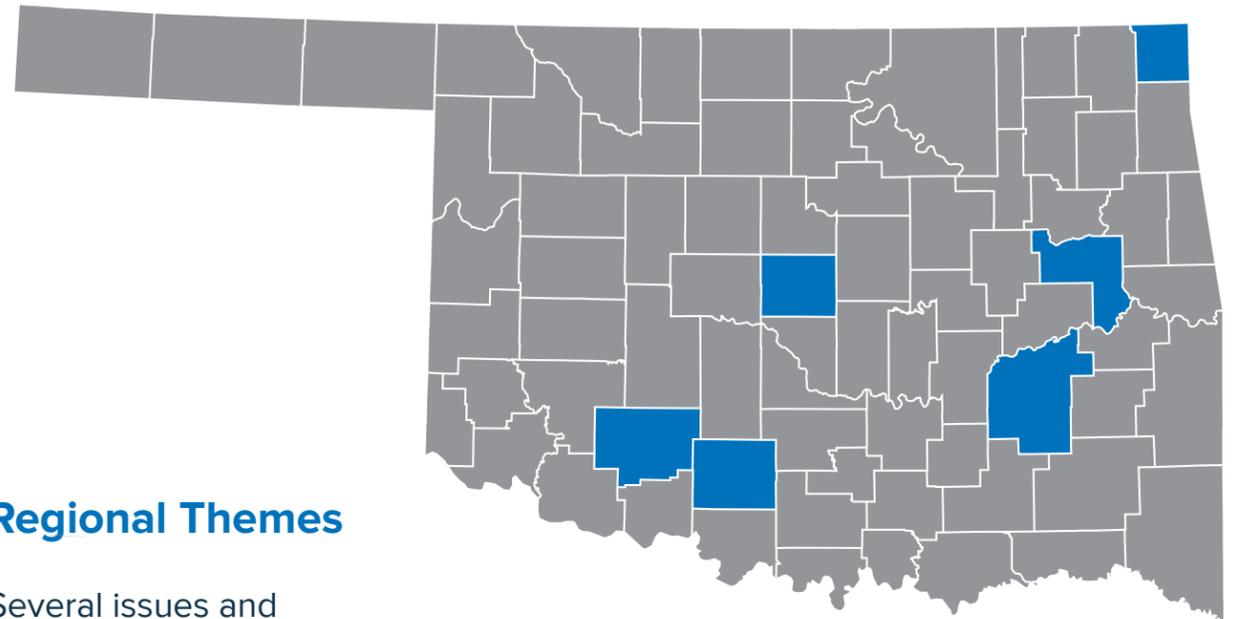
“Local, collaborative partnerships were key to the pandemic response.”

“It’s important to utilize trusted community leaders to disseminate information, especially during a crisis.”



Regional Themes

Several issues and recommendations emerged that were specific to each region. Regional themes include key recommendations (in addition to the common themes) that were unique to each listening session.



For a more detailed report of the strengths, weaknesses, recommendations, and stakeholders identified at the individual regional listening sessions, please visit the Center for Public Health Practice website.

<https://publichealth.ouhsc.edu/Departments-Centers/Center-for-Public-Health-Practice>





Duncan

Special Findings: Urgent health care clinics stepped up and played a critical role in diverting non-emergent care from hospitals. Duncan Regional Hospital retained all of their employees and cross-trained staff to adapt to changing needs.

Recommendations

Improve accessibility of resources at the community level, such as:

- Mental health and substance abuse resources
- Department of Human Services resources
- Financial resources

Improve outreach to schools and teachers, and increase the number of school liaisons throughout the state

Create a framework that helps establish relationships, strengthen trust, and foster reconciliation at the community level

Increase the financial resources and autonomy of the public health sector (e.g., data access, staffing, equipment, and laboratory resources)

Improve the workforce pipeline for all hospital professions by investing in health care workforce training programs



Miami

Special Findings: Leaders stepped up from many organizations and agencies (e.g., schools, county health departments, and first responders), helping to facilitate an increase in public trust and communication. Miami Hospital system (Integrus) and Indian Health Services banded together to manage the influx of cases.

Recommendations

Implement a system that tracks local resource levels for real-time monitoring and efficient allocation

Regularly hold conversations with local organizations and partners to maintain strong relationships and open communication regarding emergency preparedness

Increase the number of health care and public health professionals who:

- Provide consistent expertise regarding disease management
- Perform at the top of their licensure
- Can be cross-trained to provide additional services (e.g., testing and vaccination)

Improve the local transportation system so that it can meet community transportation needs in times of emergency

Improve communication to community members about what resources are available and how they can access those resources in times of emergency

Provide localities with financial support that is flexible and has clear spending guidelines



Muskogee

Special Findings: The City of Muskogee sent masks to every resident, and businesses were proactive in encouraging masking in stores. Technology was leveraged by law enforcement officers to continue service delivery.

Recommendations

Increase public health and health care education efforts in schools

Educate policy makers and political leaders on public health topics

Consider diverse social groups and cultures in health education and messaging efforts

Incorporate structured inequities and social determinants of health into emergency response plan development

Hire more school nurses to improve access to health care services for youth

Establish a unified and consistent message at the state level that emphasizes the credibility of science and data

Increase the number of telehealth resources available at the community level

Incorporate nurses into messaging efforts and decision making



McAlester

Special Findings: Hospitals diverted care to Federally Qualified Health Centers (FQHCs) which played a critical role in relieving local health care facilities that were overburdened by COVID-19. The Choctaw Nation provided flu vaccines to all local community members and were a key partner in contributing to the success of the local vaccination effort.

Recommendations

Set a unified goal and clear priority for the emergency response effort early on

Regularly gather and communicate with key stakeholders

Increase the health care workforce and health department staff levels

Establish incident command systems and regularly practice emergency scenarios to ensure that emergency response agencies and other key players are prepared

Work to identify communication breakdowns in the community to improve future messaging and more effectively reach vulnerable populations

Maintain an awareness of, and relationships with, key partners in neighboring regions

Establish one unified table where key partners convene

Improve coordination and cooperation with religious institutions

Develop a strategy to maintain chronic health care services

Streamline translation services to disseminate additional information more quickly



Lawton

Special Findings: Libraries served as central hubs to deliver IT access and community resource catalogs to community members. The vaccination effort was quickly organized and carried out by volunteers and community partners; pods delivered up to 1,500 vaccinations a day.

Recommendations

- Policies should be improved to allow for flexible resource procurement and use
- Improve IT services and internet access in rural areas
- Increase participation in community level efforts for social, political, and economic reconciliation and trust building (e.g., the Community Renewal Initiative)

- Increase the number of community level workers who are cross-trained in emergency communication and response
- Strengthen advocacy networks at local and state levels



Southern Plains Tribal Health Board

Special Findings: Tribal resources were extended to all residents in the local communities irrespective of tribal status. Tribes took a population-level approach to address COVID-19—related health needs rather than an individual approach. Contract tracers with the tribes served as comprehensive case managers and public health allies, providing resource recommendations and more to their communities.

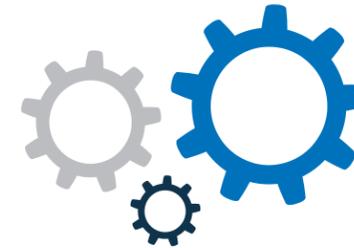
Recommendations:

- Develop a toolkit for contact tracers; provide them with health promotion training to address public health issues that surface during a pandemic or health crisis
- Provide mental health services to public health and health care workers
- Recognize technological literacy as a social determinant of health and work to improve health and technological literacy at the community level
- Develop a statewide pandemic playbook

- Convene key stakeholders regularly to coordinate emergency response plans and strategies
- Sustain ongoing health promotion efforts that began during the pandemic
- Improve community health aid programs and bolster workforce pipelines for all sectors
- Establish a comprehensive resource guide at state and local levels to effectively provide case management to a variety of age groups and populations

Achieving a Healthy Oklahoma Action Guide

The recommendations in this action guide would not be possible without the dedication of everyone involved in the Achieving a Healthy Oklahoma initiative. The funders, steering committee, workgroup chairs, and workgroup members contributed resources, time, and expertise to improve Oklahoma’s preparedness and overall health outcomes. Throughout the process, common themes emerged across multiple sectors. We recognize that each sector is not a silo, but rather the workgroups are interdependent—often with multiple areas of significant overlap. With this in mind, many of the following recommendations may be applicable to more than one sector.



The work does not stop here; rather, it begins. This is our time for action-based engagement with business, education, community, and health sectors across the state, aimed at improving the lives of current and future Oklahomans.

The recommendations in this booklet are intended to serve as an action guide for public-private partnerships, policymakers, and the Center for Public Health Practice to dedicate resources, staffing, and programming towards accomplishing the goal of a healthier Oklahoma. **By carrying out these recommendations, we will improve health, policy, and preparedness across the state, as well as influence nationwide change.**

The recommendations developed in this report build on discussions at the workgroup level and may be applied across sectors. Overarching themes that proved to be foundational in the work achieved by this initiative are listed below and serve as the general recommendations from the Achieving a Healthy Oklahoma steering committee.

“We want Oklahoma to set a precedent for national standard operating procedures for pandemic response.”

Overarching Recommendations

- 1 State and local health departments should optimize emergency response performance by 1) identifying key public and private partnership capabilities to improve performance across Oklahoma and 2) coordinating innovative responses and efforts across jurisdictional boundaries
- 2 Health leaders and policy makers should pursue sustainable funding for state and local health departments to strengthen public-private partnerships
- 3 The Center for Public Health Practice should serve as a hub for 1) communications around public health preparedness, 2) policy collaboration, 3) workforce development data and evaluation, 4) cross-sector collaboration to guide data modernization and grant opportunities, and 5) periodic review of the Achieving a Healthy Oklahoma recommendations and impacts
- 4 Data modernization must be a key driver for the next phase of preparedness and health improvement. Policy makers must pursue funding for sustainable, interconnective, health data solutions, including cross-sector, statewide and national systems. The Center for Public Health Practice is uniquely positioned to serve as a central data modernization hub between public-private entities to pursue scalable and interoperable health data projects

These recommendations provide the foundation for Oklahoma to serve as a leading agent of change for public health and to be better poised across healthcare, business, education, and community sectors to prepare for—and respond to—public health crises in the future. The recommendations in this report may be adapted to other states to steer decision making and future preparedness throughout the Nation.

Workgroup Recommendations

BUSINESS

Goal: Arm Oklahoma businesses with robust preparedness strategies ahead of future pandemics and public health crises.

Action items to complete workgroup objectives have been distilled into recommendations for various stakeholder groups as follows:

Center for Public Health Practice

- 1 Explore grant opportunities for public-private partnerships in order to expand workforce development, retention, and pandemic preparedness across Oklahoma
- 2 Seek sustainable funding for an Oklahoma Workforce Training and Leadership program
- 3 Research tax incentives for small businesses to provide health insurance and wellness programs
- 4 Provide program implementation strategies—in partnership with public and private entities across the state—to develop small business wellness programs, while drawing upon existing models across the state
- 5 Develop strategies that address growing multi-sector workforce needs and business-related gaps and can be supported by the Oklahoma Workforce Training and Leadership program

Oklahoma Policymakers

- 1 Support technological advancement across business sectors, especially in digital deserts, and provide incentives and strategies for digital infrastructure updates across Oklahoma
- 2 Allocate funding and/or create grant opportunities to support continuing education and business retention growth strategies

Public-Private Engagement Opportunities

- 1 Convene business leaders from across the state to evaluate and discuss action items needed to prepare for future public health crises
- 2 Collaborate with state and national leaders to develop a data interoperability framework for Oklahoma and the Nation

- PREPARE** Oklahoma businesses with an adequate workforce and streamlined processes ahead of future pandemics and public health crises
- ENHANCE** Workforce retention and growth through telework capabilities, phased operation plans, pandemic response coverage and alternative business operation strategies
- SUSTAIN** Top notch business services and cross-sector data sharing through policy driven actions and incentives

COMMUNITY ENGAGEMENT

Goal: Enhance the community services preparedness network and strengthen population health through effective partnerships and advanced resources.

Action items to complete workgroup objectives have been distilled into recommendations for various stakeholder groups as follows:

Center for Public Health Practice:

- 1 Train students to conduct statewide community health status assessments with the workforce development team, in partnership with OU Hudson College of Public Health, Oklahoma State Department of Health, hospital systems, and local health departments
- 2 Provide an annual report to policymakers that identifies vulnerable communities across Oklahoma and informs targeted policy decisions
- 3 Work with and support organizations that provide opportunities for community health workers (CHWs) to learn skills aimed at ensuring equitable delivery of mobile and digital health services in normal and emergency operations
- 4 Provide policymakers with essential information needed to strengthen Oklahoma’s overall health, wellbeing, and preparedness
- 5 Serve as a central data hub and repository for community health-related grant opportunities, research, and monitoring

Policymakers:

- 1 Request updated population health data to reference during the legislative session
- 2 Request funding for the Center for Public Health Practice to facilitate ongoing assessments and cross-sector collaboration
- 3 Encourage state, county, and municipal agencies to establish cross-sector data sharing capabilities for purposes of timely, accurate health status assessments
- 4 Prioritize funding for delivery of mobile and digital services statewide
- 5 Approve a state level CHW certification process as presented by the OK CHW Coalition and key stakeholders

PREPARE Evaluate opportunities and community threats in public health crises. Update crucial services, ensure equitable delivery of services, and boost community-based operations

ENHANCE Enhance the community referrals system. Identify cross-sector data availability pre- and post-pandemic. Outline data points needed to steer decision making

SUSTAIN Develop effective public engagement tools that focus on multi-sector capacity and sustainability of resources

Public-Private Engagement Opportunities:

- 1 Collaborate with state and national leaders to develop a data interoperability framework for Oklahoma and the Nation
- 2 Identify and pursue funding opportunities that expand data interoperability between community engagement, health, education, and social service systems
- 3 Help community members and leaders increase public engagement, information dissemination, and confidence in services
- 4 Develop connections with faith-based organizations and underrepresented groups to address and enhance ongoing community health issues

PUBLIC HEALTH AND HEALTH CARE

Goal: Modernize the public health and health care sectors through public health workforce training and development. Enhance data-driven decision making and cross-sector leadership to better prepare and secure the public health and health care infrastructure in Oklahoma.

Action items to complete workgroup objectives have been distilled into recommendations for various stakeholder groups as follows:

Center for Public Health Practice:

- 1 Strengthen health improvement efforts in Oklahoma through nurturing public-private partnerships (including community partners, businesses, and schools) and leveraging the strengths and weaknesses of public-private partnerships to drive change in communities across the state
- 2 Pursue funding opportunities to establish education and employment pathways for physicians, nurses, educators, and public health workers across high-need areas
- 3 Workforce data across state and local jurisdictions is not readily accessible. The Center for Public Health Practice should serve as a centralized space to gather baseline and routinely updated workforce data. This data is critical in planning effective and sustainable workforce development programs

PREPARE Oklahoma public health and health care sectors with an adequate workforce and sufficient systems ahead of future pandemics and public health crises

ENHANCE Data driven decision making and cross-sector leadership to better prepare and secure the public health and health care infrastructure in Oklahoma

SUSTAIN A robust workforce through enhanced retention and growth strategies

- 4 Launch the public health and health care workforce training and leadership program
- 5 Expand training opportunities for public health and health care professionals; consider public health certifications and continuing education programs
- 6 Hold a legislative event to brief officials on the completed Achieving a Healthy Oklahoma recommendations

Policymakers:

- 1 Support and allocate funding to an Oklahoma Public Health Scholarship and Loan Repayment program
- 2 Direct and maintain sustainable funding to workforce development programming
- 3 Create and support legislative policies that ensure adequate resource allocation to the public health and health care workforce, both during normal operations and in emergencies
- 4 Invest in and remove barriers to statewide, centralized, interoperable public health and health care technology systems that facilitate timely and accurate data sharing across private, public, territorial, and local health agencies. Data should be available to users upon entering a data sharing agreement. Funding will be provided through policy-driven appropriations, grants, and private sector philanthropy

Public-Private Engagement Opportunities:

- 1 Prioritize an integrative approach to improving health in Oklahoma through implementation of centralized services across Oklahoma’s nine public health regions. This approach may include establishing hubs in currently placed county health departments that link Oklahomans to mental health, public health, preventive, wellness, and clinical services within each hub
- 2 Provide media and communications training to public health workers and local leaders through public-private partnerships to improve public health communication strategies and build trust across communities
- 3 Engage middle and high school students to cultivate interest in pursuing a career in public health and health care
- 4 Prioritize access to and expansion of health literacy resources across business, community, health, and education sectors in Oklahoma
- 5 Develop an all-in-one website for tracking policies that support the Achieving a Healthy Oklahoma recommendations
- 6 Develop a secure and scalable Memorandum of Understanding (MOU) template that can be utilized for statewide data sharing

“...we must keep modernizing and pushing forward to improve health for all Oklahomans.”

EDUCATION

Goal: Strengthen preparedness strategies for Oklahoma educational institutions, educators, and students for future pandemics and public health crises.

Action items to complete overarching workgroup objectives have been distilled into recommendations for various stakeholder groups as follows:

Center for Public Health Practice

- 1 Retain the service of or contract with a policy expert to work with legislative personnel at the University of Oklahoma and the Regents for Higher Education on implementation of the Achieving a Health Oklahoma recommendations
- 2 Pursue grant funding, in partnership with private entities, to address digital learning deserts across Oklahoma
- 3 Facilitate the development of communication and public outreach resources aimed at building trust to foster collaboration among community groups across Oklahoma
- 4 Engage students in public health initiatives and health care programs to boost the future public health workforce
- 5 Provide pilot programming that expands higher education public health coursework to include data use, reporting methods, and community health needs assessments

Policymakers:

- 1 Support adequate funding investments in digital education resources
- 2 Expand funding and scholarship programs to recruit and retain skilled Oklahoma educators

Public-Private Engagement Opportunities:

- 1 Increase presence of community-based health workers in school settings
- 2 Establish public health law mentorship and training programs
- 3 Pursue grant funding to address digital learning deserts across Oklahoma
- 4 Utilize community health status assessment data from public health and health care partners to steer programming

- **PREPARE** Assess impacts from COVID-19 on education and develop an action plan that ensures sustained learning throughout a public health emergency
- **ENHANCE** Operation/learning strategies, and technical resources. Expand higher education public health coursework to include community needs assessments
- **SUSTAIN** Engage students in initiatives to boost future workforce. Outline data endpoints needed to drive sustainable programs

Conclusion

The Achieving a Healthy Oklahoma initiative has laid the foundation for Oklahoma to serve as a leading agent of change for public health. The work accomplished this past year by our committees provides actionable steps for Oklahoma to be better poised across health care, business, education, and community sectors to prepare for—and respond to—public health crises in the future. The Center for Public Health Practice is prepared to turn these action steps into sustainable, effective programs that can be implemented throughout Oklahoma and serve as a template for the rest of the Nation.

The Center for Public Health Practice has identified five core areas to serve the mission of strengthening preparedness and overall health efforts:

- 1 Health care workforce training
- 2 Policy, research, and grants center
- 3 Convener on key community issues and engagement
- 4 Data sharing and repository core
- 5 Communications hub

Oklahoma State Department of Health workforce data indicates that there are currently 316 unfilled public health positions—193 of which are listed as critical—across Oklahoma. The greatest shortage is among registered nurses, with 43 open positions that need to be filled. We must deploy the Center for Public Health Practice to unify public and private health improvement efforts and effectively address critical public health workforce needs throughout our state. The Achieving a Healthy Oklahoma initiative set the foundation for improvement of health care, business, education, and community collaboration after the COVID-19 pandemic. The work does not end here; rather, we now have a formulated plan with actionable items to transform the state’s preparedness, interoperability, and overall health status. As one of the first initiatives of its kind, Achieving a Healthy Oklahoma places Oklahoma at the forefront of statewide transformation, producing a model for multi-sector collaboration, innovation, and preparedness. Now is the time to take action and improve our health outcomes, setting the standard for advanced partnership development and data modernization.

“The Oklahoma that we love, that we knew 100 years ago, is not the same Oklahoma now. And it won’t be the same Oklahoma 25 years from now. So, we’ve got to think about how we change and prepare for the future.”

Quotes provided in this document were collected through Key Informant Interviews, Achieving a Healthy Oklahoma meetings, and Community Listening Sessions. Individual names remain anonymous.

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Achieving a Healthy Oklahoma Funders and Sponsors:

- | | |
|------------------------------------|--|
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To learn more about the Center for Public Health Practice and to access updates on the Achieving a Healthy Oklahoma initiative, please visit: publichealth.ouhsc.edu/Departments-Centers/Center-for-Public-Health-Practice.



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