

# Preventive Health & Health Services Block Grant Advisory Committee Meeting and Public Hearing



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WEDNESDAY, MAY 6, 2015

# Welcome!



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# Agenda



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- Welcome and Introductions
- Approval of June 17, 2014 Minutes
- Preventive Health and Health Services Block Grant Background and Requirements
- Review of New Work Plan Objectives and Budget
  - Public Health Dental Program: Sean Isaac
  - Sexual Violence and Prevention Program: Elvira Hanson
  - Supporting Healthy Communities: Calandra Portalatin
- Public Hearing/Comments
- Final Remarks & Adjourn

# Approval of June 17, 2014 Minutes

# Background



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- The Preventive Health and Health Services Block Grant (PHHSBG) established by Congress in 1981
- Allows flexibility for states to address their priorities
- Tied to Healthy People 2020 objectives
- Managed by the Centers for Disease Control and Prevention's (CDC) Office for State, Tribal, Local and Territorial Support (OSTLTS) as of FY 2014
- Provides two years to expend funding
- Florida spends funding during year 2 of the two year period to prevent gaps caused by delayed allocation from CDC



# Background (Cont.'d)



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- The PHHSBG Allocation is distributed to the states according to a two-part formula:
  1. The annual basic amount is determined by the percentage of funds that each state received in 1981 from the former categorical grants.
  2. The funds for the sex offense set-aside are based on a population formula for each state. The population-based formula is updated when official census data is released.

# Requirements



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- States must hold two **Advisory Committee** meetings and one public hearing within the annual funding program time frame.
  - The **Public Hearing** provides the opportunity for the public input regarding the direction, planning, program content, and funding decisions by the Advisory Committee prior to the work plan submission.
- States must submit an **Annual Report** in January that includes progress made toward achieving their National Health Objectives.
  - **Success Stories** are highlighted accomplishments of the PHHS Block Grant programs.
  - The report is submitted in **The Block Grant Management Information System (BGMIS)**, a web-based system that enables grantees to create and submit work plans to CDC.

# BGMIS



CDC Home  
**CDC** Centers for Disease Control and Prevention  
Your Online Source for Credible Health Information

**BGMIS Home** | **Work Plans** | **Annual Reports** | **Success Stories** | **Compliance Reviews** | **Block Grant Contacts**

**Welcome: BGMIS Test QA nccd\_bgmis**

The Block Grant Management Information System is a web-based system that enables grantees to create and submit Work Plans, Annual Reports, Success Stories to CDC and to view Compliance Review information.

<p><b>GUIDANCE</b> Latest Guidance Documents</p> <p><b>NAVIGATION</b> Using the BGMIS system</p> <p><b>ALLOCATIONS</b> Healthy People Funding</p> <p><b>CONTACTS</b> Current list of Regional CDC Contacts</p> <p><b>BULLETINS</b></p> <ul style="list-style-type: none"><li><a href="#">BGMIS Changes and Improvements 12/18/2012 (534 k)</a></li><li><a href="#">BGMIS FAQs (85 k)</a></li><li><a href="#">Success Story ToolKit FY 2012 (368 k)</a></li><li><a href="#">CDC Mini-Style Guide FY 2012 (51 k)</a></li></ul>	<p><b>WORK PLAN</b></p> <p>The Work Plan defines the Programs, Objectives and Activities that will be carried out using PHHS Block Grant funds. Work Plans are due no later than July 1st.</p>	<p><b>ANNUAL REPORTS</b></p> <p>The Annual Report captures progress towards reaching objectives and completing activities that were identified in the prior year's Work Plan. Reports are due no later than February 1st.</p>	<p><b>SUCCESS STORIES</b></p> <p>Highlighted accomplishments of the PHHS Block Grant Programs.</p>	<p><b>COMPLIANCE REVIEW</b></p> <p>Compliance Reviews are completed in accordance with the PHHS Block Grant legislative mandate.</p>
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# Role of the Advisory Committee

12

- The PHHSBG Advisory Committee supports planning, program priorities, funding decisions, and the maintenance of the funding accountability.

# Program Updates & Review of Work Plan Objectives for Fiscal Year 2014-2015 (Implementation Year 2015-2016)



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- 1. PUBLIC HEALTH DENTAL PROGRAM**
- 2. SEXUAL VIOLENCE PREVENTION PROGRAM (SVPP)**
- 3. SUPPORTING HEALTHY COMMUNITIES PROGRAM (SHC)**

# Public Health Dental Program



## Water Fluoridation Project

14

**FUNDING FOR 2014-2015  
IMPLEMENTATION YEAR:**

**\$376,105**

**FUNDING FOR 2015-2016  
IMPLEMENTATION YEAR:**

**\$365,206**

# Current Program Objectives



15

- **National Health Objective:** HO OH-13 Community Water Fluoridation
- **State Health Objective:** Increase the proportion of Floridians served by community water systems that are optimally fluoridated by 0.5%.
- **Impact/Process Objective 1:** Public Health Dental Program staff will provide technical assistance and funding to partners for the promotion of water fluoridation and oral health to 15 of the largest 20 non-fluoridated community water systems in Florida.

# Current Program Objectives



16

- **Impact/Process Objective 2:** Public Health Dental staff will review 116 fluoridating community water systems in Florida for reporting compliance in accordance with Florida Administrative Code. The Program will also review a sample of the reports to validate the data.
- **Impact/Process Objective 3:** Public Health Dental Program staff will provide technical assistance, information or funding to 3 non-fluoridating communities that have expressed an interest in attaining water fluoridation.



# Background



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- Community water fluoridation has been demonstrated to be the most cost-effective measure for preventing dental caries
- PHHSBG provides funding to assist communities throughout Florida to promote, implement, and maintain fluoridation
- Communities that elect to add fluoride to their water may be provided funds through a financial agreement

# Funding History



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- 2005 –\$241,500
- 2013 –\$177,700
- Current year –\$376,105

# Public Health Services



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## Inform/Educate

- Benefits of community fluoridation
- How to obtain fluoridation funding
- Laws and regulations

## Mobilize Partnerships

- Work with coalitions and local communities
- Provide technical assistance

# Public Health Services



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## Enforce laws and regulations

- Monitor fluoridating community water systems reports for reporting compliance in accordance with Florida Administrative Code 62-555.325
- Collect data and provide quality assurance in the monitoring of all water plants that fluoridate drinking water (receive over 2,400 reports/year)

# Successes



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- (10/1/13 - 9/30/14) - 16 communities pursued and received information on water fluoridation
- (10/1/13 - 9/30/14) - 4 coalitions received technical assistance on fluoridating water systems and plants
- (10/1/13 - 9/30/14) - 9 communities pursued the installation or reaffirmation of water fluoridation

# Successes



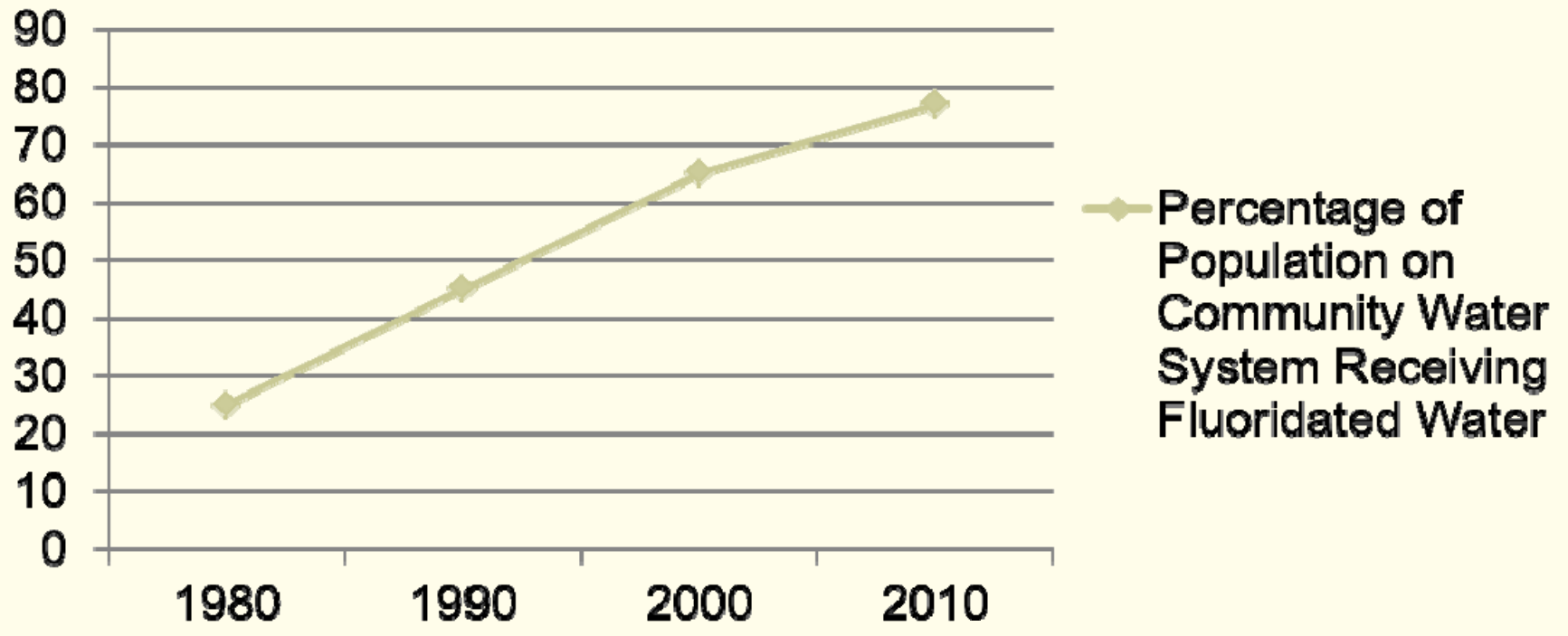
22

- (10/1/13 - 9/30/14) - 2 communities recognized for initiating water fluoridation
- (10/1/13 - 9/30/14) - 1 community recognized for reaffirming water fluoridation
- (10/1/13 - 9/30/14) - 35 communities recognized for providing optimal year levels of water fluoridation

# Public Health Dental Program



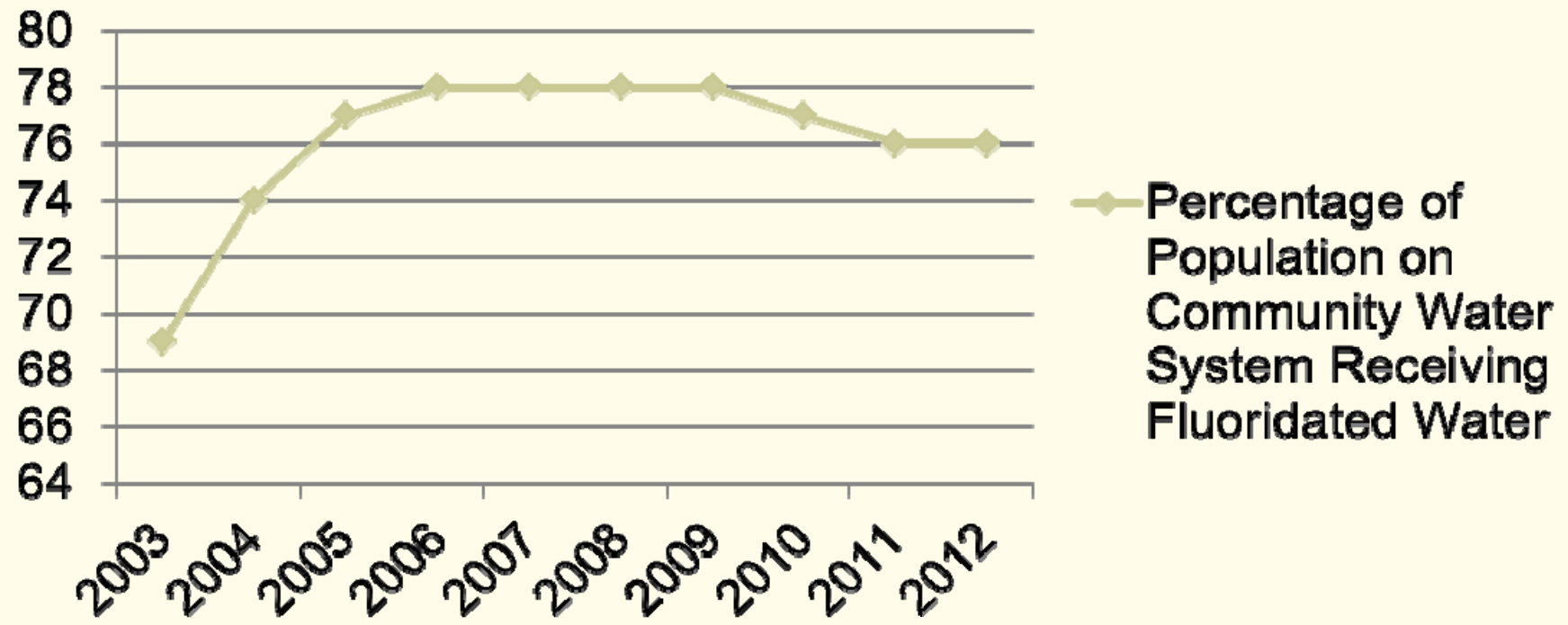
**30 – Year Trend for Percentage of Population on Community Water Systems Receiving Fluoridated Water**



# Public Health Dental Program



**10 Year Trend for Percentage of Population on Community Water Systems Receiving Fluoridated Water**





# Public Health Dental Program



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2014-2015 WORK PLAN  
(2015-2016  
IMPLEMENTATION)

# New Work Plan



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- **National Health Objective:** HP 2020, OH-13: Increase the proportion of the U.S. population served by community water systems with optimally fluoridated water.
- **State Health Objective:** Increase the proportion of Floridians served by community water systems that are optimally fluoridated.

# New Objectives



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- **Impact/Process Objective 1:** Public Health Dental Program staff will provide technical assistance funding to partners for the promotion of water fluoridation and oral health to 15 of the largest 20 non-fluoridated community water systems in Florida per year.

# New Objectives



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- **Impact/Process Objective 2:** Public Health Dental Program staff will review 116 fluoridating community water systems in Florida for reporting compliance in accordance with Florida Administrative Code per year. The Program will also review a sample of the reports to validate the data each year.

# New Objectives



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- **Impact/Process Objective 3:** Public Health Dental Program staff will provide technical assistance, information or funding to 3 non-fluoridating communities that have expressed an interest in attaining water fluoridation each year.

# Contact Information



30

## **Sean Isaac, MPH**

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# **Questions/Comments**

## **about the Public Health Dental Program**

### **Water Fluoridation Project**



# Sexual Violence Prevention Program

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**FUNDING FOR 2014-2015  
IMPLEMENTATION YEAR:**

**\$420,382**

**FUNDING FOR 2015-2016  
IMPLEMENTATION YEAR:**

**\$420,382**



# Current Program Objectives



33

- **National Health Objective:** HO IVP-40 Sexual Violence (Rape Prevention)
- **State Health Objective:** Reduce the number of forcible sex offenses by 10 from the previous year.
- **Impact/Process Objective 1:** SVPP contract managers will conduct at least one programmatic contract monitoring site visit per funded site per year.

# Current Program Objectives



34

- **Impact/Process Objective 2:** Rape Crisis Centers Staff will increase the number of services provided to rape victims from 5688 to **5698**.
- **Impact/Process Objective 3:** SVPP staff will distribute professional development and educational opportunities to **at least 30** rape crisis centers and stakeholders.

# Current Program Objectives



35

- **Impact/Process Objective 4:** Florida's certified rape crisis center staff and key stakeholders will decrease the number of forcible sex offences from 10,145 to **10,135**.
- **Impact/Process Objective 5:** SVPP contract managers will analyze **nine** PHHSBG-funded certified rape crisis center's data entered into the SVDR to ensure compliance with contract deliverables.

# Program Components



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- Preventive Health and Health Services Block Grant - Sexual Assault Victim Services to Primary Victims
- Sexual Battery Victims' Access to Services Act (Rape Crisis Trust Fund Program) - Sexual Assault Victim Services to Primary Victims
- General Revenue Funding for Sexual Battery Recovery Services
- STOP Funding - Training & Technical Assistance for First Responders to Sexual Assault Victims (rape crisis center staff and law enforcement personnel)

# Program Components



37

- Sexual Assault Services Program (SASP) - Sexual Assault Services to Primary and Secondary Victims (including children)
- Rape Prevention Education and Training - Education for the General Public and Professionals & Statewide Sexual Violence Prevention Strategic Plan

# Florida Statistics



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- 1,266,000 women in Florida have been raped at some point in their lives. That is 17% or 1 in 6 women in Florida.

-National Intimate Partner and Sexual Violence Survey, 2010

- 9,863 sex offenses of forcible rape; forcible sodomy and forcible fondling were reported in 2013.

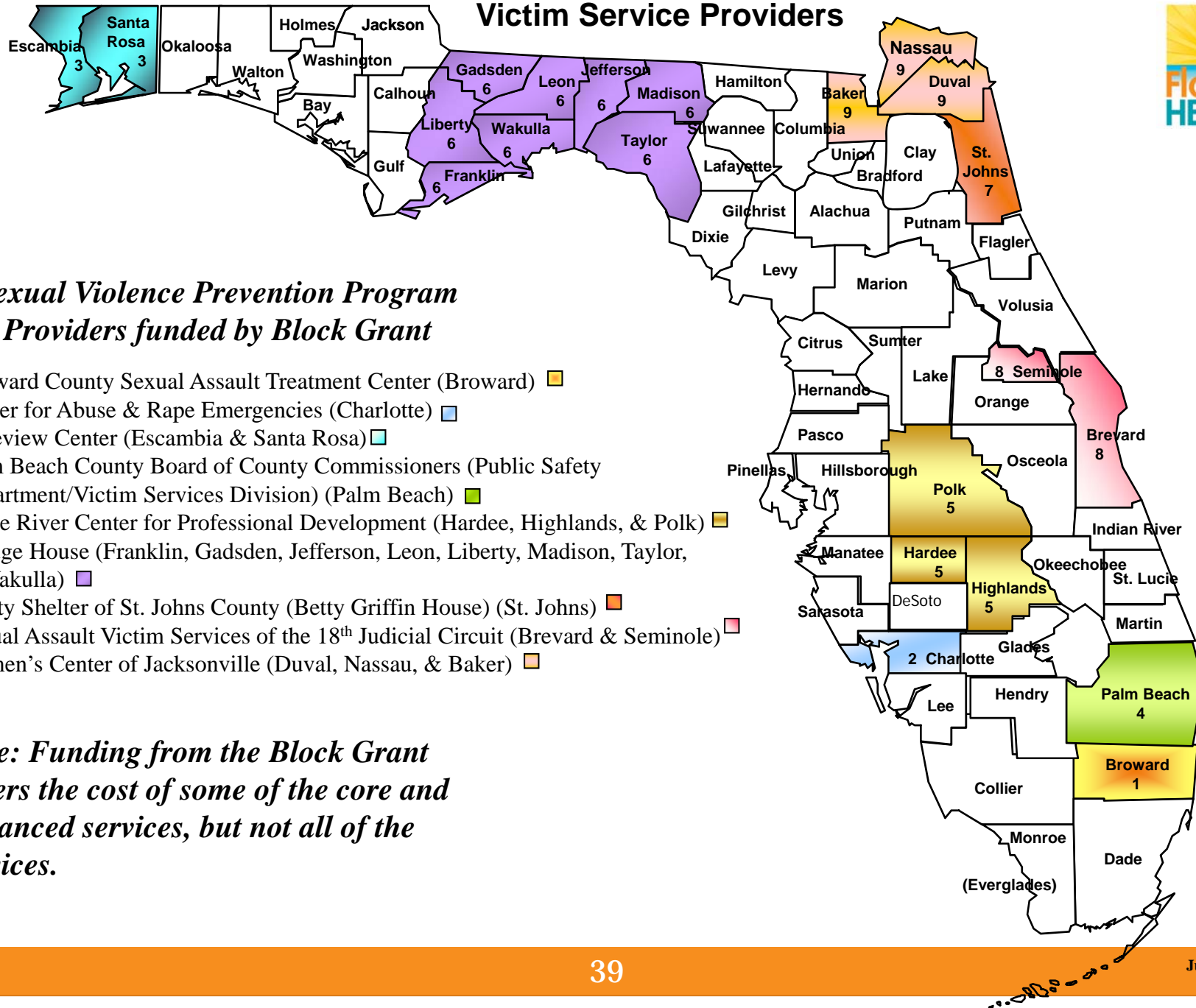
-Florida Department of Law Enforcement, UCR Report 2013

- A forcible sexual offense is reported to law enforcement every 53 minutes.

-Florida Department of Law Enforcement Annual Crime Clock, 2013



## Victim Service Providers



### *Sexual Violence Prevention Program Providers funded by Block Grant*

1. Broward County Sexual Assault Treatment Center (Broward) ■
2. Center for Abuse & Rape Emergencies (Charlotte) ■
3. Lakeview Center (Escambia & Santa Rosa) ■
4. Palm Beach County Board of County Commissioners (Public Safety Department/Victim Services Division) (Palm Beach) ■
5. Peace River Center for Professional Development (Hardee, Highlands, & Polk) ■
6. Refuge House (Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, & Wakulla) ■
7. Safety Shelter of St. Johns County (Betty Griffin House) (St. Johns) ■
8. Sexual Assault Victim Services of the 18<sup>th</sup> Judicial Circuit (Brevard & Seminole) ■
9. Women's Center of Jacksonville (Duval, Nassau, & Baker) ■

***Note: Funding from the Block Grant covers the cost of some of the core and enhanced services, but not all of the services.***

# Services Provided to Victims

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- The Block Grant, Rape Crisis Program Trust Fund, and Sexual Assault Service Program (SASP) all provide funding for services for sexual assault victims.
    - **Advocacy and Accompaniment**
    - **Crisis Intervention and Counseling**
    - **Therapy**
    - **Support Groups**
    - Information and Referral
    - Forensic and Medical
    - Hotline
- \* Only services in **bold** are provided by Block Grant funds.



# Advocacy and Accompaniment



41

Personal support and/or assistance in accessing sexual violence related services, and acting on behalf of and in support of victims of sexual violence, emergency medical/forensic services and law enforcement response on a 24-hour basis, ensuring that their interests are represented and their rights upheld.

# Crisis Intervention



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A timely response by a trained staff member or volunteer to an individual presenting a crisis related to sexual violence.

# Therapy

43

A professional relationship that involves organizing and evaluating information and using techniques to address the effects of sexual violence. This definition applies to group or individual therapy modalities, and encompasses more intensive, ongoing clinical practice.

# Support Groups



44

Facilitated meetings for primary victims of sexual violence with a supportive and/or educational focus.

# Data Registry

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- A confidential internet-based system that collects information about sexual assault victims and services provided in Florida.
- Each primary victim is assigned a unique victim identification number to ensure accurate data collection.

# PHHSBG Contracts



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Implemented 9 victim services contracts effective 10/01/12 once PHHSBG funding was received. These contracts are effective through 9/30/15.

# Number of Primary Rape Victims



47

October, 2013 – September, 2014

1,242 victims served

# Services Provided



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## Services Provided by Victim Service Providers October, 2013 – September, 2014

Services	# of Services
Advocacy/Accompaniment	596
Crisis Intervention	1,598
Support Group	561
Therapy	2,623
<b>Total</b>	<b>5,378</b>



# Hotlines and Help



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- Florida Council Against Sexual Violence
  - 1-888-956-RAPE (7273)
  - [www.fcasv.org](http://www.fcasv.org)
- Florida Coalition Against Domestic Violence
  - 1-800-500-1119
  - [www.fcadv.org](http://www.fcadv.org)



# Sexual Violence Prevention Program

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2014-2015 WORK PLAN  
(2015-2016  
IMPLEMENTATION)

# 2015-2016 Efforts



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## Prevention efforts in 2015-2016

- The SVPP will focus funding only to entities that utilize the Green Dot strategy.
- The Green Dot strategy is a comprehensive approach to violence prevention that capitalizes on the power of peer and cultural influence across all levels of the socio-ecological model.
- Florida's effort will include training and a social marketing.
- More information can be found here:  
<https://www.livethegreendot.com/>

# New Work Plan



52

**National Health Objective:** IVP-40: Reduce Sexual Violence

**State Objective:** Reduce the number of forcible sex offenses by 10 from the previous year.

**Impact/Process Objective 1:** 100% of providers will utilize the evidence based bystander intervention called Green Dot.

# New Objectives



53

**Impact/Process Objective 2:** The number of Green Dot certified trainers supported with these funds will increase from 0 to 10.

**Impact/Process Objective 3:** The number of Green Dot individuals exposed to a Green Dot focus group, social marketing campaign, overview speech or bystander training supported with these funds will increase from 0 to 1,200.

# SVPP Contact Information



54

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Website: <http://www.floridahealth.gov/prevention-safety-and-wellness/sexual-abuse-or-violence-prevention/index.html>

# **Questions/Comments for the Sexual Violence Prevention Program**



# Supporting Healthy Communities Program

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**FUNDING FOR 2014-2015  
IMPLEMENTATION YEAR:  
\$3,384,948**

**FUNDING FOR 2015-2016  
IMPLEMENTATION YEAR:  
\$3,286,857**



# Program Components



57

1. Community Health Assessment/Community Health Improvement
2. Chronic Disease Prevention efforts related to Community Health Improvement Plans and Healthiest Weight Florida

# Current Program Objectives



58

- **National Health Objective:** HO ECBP-10 Community-Based Primary Prevention Services
- **State Health Objective:** Support the Community Health Improvement chronic disease prevention activities in Florida counties.
- **Impact/Process Objective 1:** Local health offices will conduct 2 activities related to County Health Improvement Plan (CHIP) chronic disease prevention objectives.

# Current Program Objectives



59

- **Impact/Process Objective 2:** SHC state level staff will review 100% of the submitted progress reports.
- **Impact/Process Objective 3:** SHC state level staff will review 100% of the submitted local SHC work plans.
- **Impact/Process Objective 4:** SHC state level staff will conduct at least one training on the SHC program criteria.

# Program Updates

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## **Community Health Assessment and Planning**

- Community-led and community-owned process
- Based on comprehensive health assessment
- Health priorities are selected
- The product is a community health improvement plan (CHIP)
- The process is repeated every 3-5 years

# Program Updates



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## **Community Health Assessment and Planning**

- A current Community Health Assessment and a Community Health Improvement Plan are prerequisites for agency accreditation
- Current is defined as being dated within the past 3-5 years
- 2013-2014, all Local Health Offices had a community-led CHA and CHIP, with measurable health improvement objectives that aligned to the State Health Improvement Plan (SHIP)

# Program Updates



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## **Community Health Assessment and Planning**

The majority of counties address health issues through health promotion and education, access to care and services, and health protection activities. In 2014, communities across Florida prioritized:

- overweight and obesity (61/67, 91%)
- physical activity (53/67, 79%)
- nutrition and food-related issues (42/67, 63%)
- smoking and tobacco use (41/67, 61%)
- diabetes (37/67, 55%)
- heart disease and stroke (34/67, 51%)

# Program Updates



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## Community Health Assessment and Planning

- **Ninety-six percent of CHDs (64/67) addressed or resolved a community health-related strategic issue and have improved targeted indicators.** Implementing action plans to improve community health and monitoring change in health status is integral to the process.
- **Thirteen CHDs received a collective \$4,669,660 in new resources** for community health improvement. Not all CHDs leveraged new assets, but those that did reaped significant financial benefit. Since 2009, over \$105 million in extramural grants and other funding was reported as having been gained.

# Program Updates



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## Community Health Assessment and Planning

- **Community involvement is strong.** All 67 county health departments report community partner participation. Stronger partnerships and more diverse partners were cited as benefits by 96% and 88% of CHDs, respectively. These percentages have continued to increase since 2008. Seventy-six percent (51/67) of CHDs said their community understands the value of public health, and 57% (38/67) reported their community taking ownership of health issues.



# Program Updates



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## **Community Health Assessment and Planning**

For PHHSBG (Block Grant) funding currently:

Each DOH-Local Health Office that chooses a health improvement planning deliverable will submit one deliverable that is an outcome of a community health improvement project.

# Program Updates



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## **Healthiest Weight Florida**

- A public-private collaboration bringing together state agencies, not for profit organizations, businesses, and entire communities to help Florida's children and adults make choices about healthy eating and active living.

# Program Updates



## **Healthiest Weight Florida Strategies**

1. Integrate physical activity every day in every way
2. Make healthy food available everywhere
3. Strengthen schools as the heart of health
4. Empower employers to provide healthy worksites
5. Market what matters for a healthy life

# Program Updates



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- **Healthiest Weight Florida/Chronic Disease Prevention**
  - **Physical Activity:** Local Health Offices focused on walking trails, bike routes, wellness programs and challenges, “Complete Streets”, 5K/Walk and Run events, etc.
  - **Nutrition:** Local Health Offices participated in farmer’s markets, community gardens; healthy cooking demonstrations (i.e. at local grocery stores, worksites, local county health departments, faith-based organizations, etc.)

# Program Updates



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## **Healthiest Weight Florida Activities**

- Nature Play “Prescription” Program
- Florida Health Cleans Up!
- Healthy Campfire Cooking
- Baby Friendly Hospitals
- Healthy Promise Florida
- Maintain, Don’t Gain
- Fall into Healthy Habits
- Healthy Weight Community Champion Recognition Program
- State Surgeon General Worksite Wellness Recognition
- Living Healthy in Florida collaboration

# Program Updates



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## Healthiest Weight Florida / Chronic Disease Prevention Successes

- Moved from the **top 20 to the top 15 states** with the healthiest weight
- Engaged with **over 550 public and private organizations** around the state
- In **16 months, launched 20 new** and innovative projects and interventions
- Improvement in **3 key health behaviors** of high school students

# Supporting Healthy Communities (SHC) Program



71

2014-2015 WORK PLAN  
(2015-2016  
IMPLEMENTATION)

# Funding Distribution



72

Local health offices will receive equal funding and have the flexibility to spend dollars toward to the following interrelated program areas:

1. Community Health Assessment/Community Health Improvement
2. Chronic Disease Prevention efforts related to Community Health Improvement Plans and Healthiest Weight Florida



# Focus Areas for 2015-2016



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## Prevention Opportunities across the Lifespan

- Breastfeeding through **Baby-Friendly Hospitals**
- Physical Activity and Nutrition in **Early Childhood Education Centers**
- Physical Activity in **Schools**
- **Worksite** Wellness
- **Lifestyle Change Program** / Diabetes Prevention Program
- **Complete Streets**
- Food Benefit Programs at **Farmers Markets**

# New Objectives



74

**National Health Objective 1: PHI-15:** Increase the proportion of tribal, state, and local public health agencies that have implemented a health improvement plan and increase the proportion of local health jurisdictions that have implemented a health improvement plan linked with their State Plan.

**State Health Objective:** Support the local health offices in community health improvement planning and maintaining accreditation readiness.

**Impact/Process Objective:** 65 of 67 of local health offices will maintain a current community health assessment and a community health improvement plan.

# New Objectives



75

**National Health Objective 2:** ECBP-10: Increase the number of community-based organizations (including local health departments, tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services. (Physical activity and nutrition)

**State Health Objective:** State health office will support the local health offices in the implementation of chronic disease prevention activities related to their community health improvement plan.

**Impact/Process Objective:** Local health offices will implement 67 chronic disease prevention and/or Healthiest Weight Florida strategies as defined in their community health improvement plan.

# New Objectives



76

**National Health Objective 3:** MICH 21: Increase the proportion of infants who are breastfed.

**State Health Objective:** State health office will support the local health offices in the implementation of chronic disease prevention activities related to their community health improvement plan.

**Impact/Process Objective:** Increase the number of birthing hospitals that take steps to improve maternity practices in support of breastfeeding from 22 to 35.

# New Objectives



77

**National Health Objective 4:** ECBP-1: Increase the proportion of preschool, Early Head Start and Head Start programs that provide health education to prevent health problems in the following areas: unintentional injury; violence; tobacco use and addiction; alcohol or other drug use; unhealthy dietary patterns; and inadequate physical activity, dental health, and safety.

**State Health Objective:** State level health office will support the local health offices and community partners in increasing the number of Early Childhood Education Centers that develop and implement food service guidelines and physical activity standards.

**Impact/Process Objective:** Increase the number of Early Childhood Education Centers recognized by the Nemours Health System for improving practices and policies related to physical activity and nutrition from 71 to 90.

# New Objectives



78

**National Health Objective 5:** PA-3: Increase the proportion of adolescents who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity.

**State Health Objective:** State health office will support districts and community partners in helping schools establish, implement and/or evaluate Comprehensive School Physical Activity Programs.

**Impact/Process Objective:** Increase the number of schools establishing, implementing and/or evaluating a Comprehensive School Physical Activity Program from 0 to 20.

# New Objectives



79

**National Health Objective 6: PA - 4:** Increase the proportion of worksites that offer an employee health promotion program to their employees.

**State Health Objective:** State level health office will support the local health offices and community partners to increase the number of works that adopt strategies to increase physical activity and implement food service guidelines.

**Impact/Process Objective:** Increase the number of worksites using the online Worksite Health Scorecard from the Centers for Disease Control and Prevention from 0 to 25.

# New Objectives



80

**National Health Objective 7: D-16:** Increase prevention behaviors in persons at high risk for diabetes with pre-diabetes.

**State Health Objective:** State health office will support the local health offices that have prioritized promoting referrals to the Diabetes Prevention/Lifestyle Change Program in their CHIP.

**Impact/Process Objective:** Increase the number of referrals to the Diabetes Prevention/Lifestyle Change Program from 1578 to 1800.



# New Objectives



81

**National Health Objective 8:** PA-13 (Developmental):  
Increase the proportion of trips made by walking.

**State Health Objective:** State health office will support the local health offices that prioritized increasing access to physical activity opportunities in their CHIP.

**Impact/Process Objective:** Increase the number of local Complete Streets policies by 3.

# New Objectives



82

**National Health Objective 9:** NWS-4 (Developmental): Increase the proportion of Americans who have access to a food retail outlet that sells a variety of foods that are encouraged by the Dietary Guidelines for Americans.

**State Health Objective:** State level health office will support the local health offices that prioritized food access through farmers markets in their CHIP.

**Impact/Process Objective:** Increase the number of farmers markets accepting food benefit programs (WIC and SNAP) from 83 to 93.

# Supporting Healthy Communities / PHHSBG Contact:



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# CHIP/CHA Contact Information

85

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# Questions/Comments

about the Supporting Healthy  
Communities Program

# Future Advisory Committee Meetings

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- **June 24, 2015**
  - ✦ Progress update
  - ✦ Discussion of opportunities for collaboration
- **October, 2015**
  - ✦ Progress update
  - ✦ Discussion of opportunities for collaboration
- **March, 2016**
  - ✦ Progress update
  - ✦ Work plan review for 2016-2017 implementation period
  - ✦ Discussion of opportunities for collaboration
  - ✦ Public comment

# Public Comment