Arizona Department of Health Services Native American Semi-Annual Report January – June 2006

Office of the Director

Native American Liaison

Michael Allison, Native American Liaison, provided on-going training and technical assistance, board membership services, advocacy, and network communications for and on behalf of the Arizona Department of Health Services (ADHS) and the Arizona Native American health care community to enhance overall working relationships and service delivery.

Training and Technical Assistance: These activities included participation on an ADHS Well Women's Health Check Program (WWHP) planning committee planning the sponsorship of a one day "Working with Native American Communities" workshop which was held on three consecutive days for three separate audiences on 1/25-27/06 in Phoenix, providing guidance to the WWHP in planning for an Arizona Native American breast and cervical cancer outreach program, providing guidance to the Maricopa Community Pediatrics Training Initiative in developing a Native American training component to their curriculum, providing guidance and mentoring assistance to new ADHS Native American Program Coordinators for the Emergency Preparedness and Primary Care programs, providing technical assistance to ADHS and AHCCCS personnel in working with the Chinle Assisted Living Center for Medicaid billing, provided overall coordination for delivery of a bio-terrorism/emergency preparedness training workshop in Window Rock, Navajo Nation on 4/10/06, participation on a minority health panel presenting minority health disparities information to University of Arizona Nursing Students on 4/28/06 in Tucson, providing on-going technical assistance to the Governor's Advisory Council on Health, Physical Fitness & Sports (GACHPF&S) for increased involvement of Native American tribes and entities in GACHPF&S sponsored Native American events and activities, and collaborating with the ADHS Native American Community Development Program Manager in planning activities for a grant writing workshop to be held for Arizona tribal and urban Indian communities.

Board Membership Services: These activities included Council and Ex-officio Commission membership on the Advisory Council on Indian Health Care (ACOIHC) and the Arizona Commission of Indian Affairs (ACIA). ACOIHC activities included attendance at Council meetings and participation on the Council's Strategic Planning and Personnel Committees. The Strategic Planning Committee held numerous meetings resulting in the development a draft five year strategic plan for the period 2006 – 2010. The Arizona Health Care Cost Containment System (AHCCCS) provided an organization development

consultant, free of charge, to the Strategic Planning Committee to provide guidance in the development of the draft strategic plan. The Personnel Committee also conducted number meetings reviewing resumes and conducting interviews of selected candidates for the Executive Director's position. At the request of the Council, Michael served as the Council's Interim Executive Director from February 24 to June 02. ACIA activities included attendance at Commission board meetings and attendance at the ACIA sponsored 2006 Legislature's Indian Nations and Tribes Day on 1/17/06 and the annual ACIA Arizona Indian Town Hall held on 6/5-7/06 held in Scottsdale.

Advocacy: These activities included advocating for a \$5,000 ADHS Tobacco Education and Prevention Program (TEPP) sponsorship grant for the 2nd Annual Tucson Native American Family Wellness Day held on 2/18/06 in Tucson, ongoing advocacy for increased tribal and Indian Health Service involvement in the ADHS emergency preparedness and response programs including hospital preparedness and Pandemic Flu preparedness, securing of \$180,000 of Pandemic Flu phase I funding for tribal/IHS programs, development and approval of an overall ADHS strategy planning outline for making tribal services a priority. Initiatives from this outline included the development of a draft Department Tribal Consultation Policy in line with Governor Napolitano's directive to Agency Directors to issue tribal consultation policies, the initiation of a Native American Data Collection and Analysis Strategic Planning Committee, and the initial scheduling of site visits by Director Gerard to reservation, Urban Indian program, and IHS sites.

Network Communications: These activities included participation on conference calls with the University of Arizona sponsored Partners in Native American Public Health (PNAPH) in their work on developing presentation programs for tribal public health data collection systems, participation in collaborative conference calls with New Mexico, Utah and Colorado Department of Public Health Tribal Liaisons, coordination of an ADHS-IHS Directors semi-annual meeting on held on 3/10/06 in Phoenix, and attendance and participation at the following Native American health conference/meetings: DHHS Region IX Tribal Consultation session held in Scottsdale on 5/2-3/06, Arizona Public Health Association Health Disparities statewide meeting held on 5/18/06 in Tempe, ITCA sponsored bioterrorism and emergency preparedness conference held on 5/23/06 in Tempe, Navajo IHS/Nation Nation Pandemic Flu planning and training forum held on 6/15/06 in Page, and Phoenix IHS Area ITU Conference held on 6/21-22/06 in Las Vegas, Nevada. Director Gerard participated on a panel presentation at the DHHS Tribal Consultation Session.

Division of Public Health Services

Office of Health System Development

Native American Community Development Program (NACDP): Outreach activities were conducted to the Salt River Pima Maricopa Indian Community, Ak-Chin Indian Community, Hopi Nation, Hualapai Nation, Fort Mohave Indian Tribe, Colorado River Indian Tribes, White Mountain Apache Tribe, San Carlos Apache Tribe, Gila River Indian Community, Fort McDowell Yavapai Nation, Yavapai Apache Nation, Tohono O'odham Nation, Quechan Tribe, Cocopah Indian Tribe, Yavapai-Prescott Indian Tribe, and the Navajo Nation for a total of 15 tribes. Outreach activities were also conducted to the three urban Indian centers, Native Health in Phoenix, Native Americans for Community Action in Flagstaff, and Tucson Indian Center in Tucson. Additional outreach was done with the Inter Tribal Council of Arizona. Outreach activities were to notify tribal health departments of the NACDP and other programs within the Office of Health Systems Development (OHSD). Other outcomes of the meetings were to determine any immediate technical assistance. A brief overview of the Arizona Department of Health Services was also given to familiarize them with the organizational structure of ADHS. Follow up will be conducted with visited tribes to determine further collaboration and assistance and to continue to build trust relationships with them. The NACDP is a collaborative project between ADHS, Health Resources and Services Administration, and the three Indian Health Service Area Offices in Arizona.

The NACDP manager is involved in several internal committees including the Tribal Cancer Initiative group, the Center for Minority Health Internal Advisory Committee, the Office of Children with Special Health Care Needs Integrated Service Grant- Cultural Competency Committee, and Native American Grant Writing Planning Committee. Through the US DHHS Region IX Office of Minority Health funds were secured to put on basic grant writing trainings for the Native American population in Arizona. A planning committee is being formed consisting of the program manager, the ADHS Native American Liaison and other interested tribal and urban health program staff. Planning is still in its initial stages with the completion of grant activities to be completed by July 2007. The program manager also participates on several external committees including the AzCCC Cancer Disparities Committee, the ITCA Southwest American Indian Cancer Network- Training and Education Core, and the Arizona Policy Training Institute planning committee.

Unique to the NACDP is an advisory council comprised of seven members. The following are the members and the organizations they represent: Genevieve Notah, Navajo IHS Area Office, Michael Joseph, Phoenix IHS Area Office, George Bearpaw, Tucson Area IHS Office, Michael Allison, ADHS, Tara McCollum-Plese, Arizona Association of Community Health Centers, and Dana Russell, Native American for Community Action, Inc. A tribal representative is still being recruited. On June 28, 2006 the first quarterly advisory council meeting was conducted.

Center for Minority Health: Collaborative Community Project mini-grant funding opportunity information was sent out to Native American tribal and urban communities. The Center for Minority Health received 4 applications from tribal and urban Native American programs. Two of the proposals were funded in the amount of \$999 each rom the White Mountain Apache Tribe and the Native American Community Health Center, Inc.

Office of Chronic Disease Prevention and Nutrition

Arizona Nutrition Network (AzNN): The program provided food demonstration training on May 8 and 9 in Chinle, Arizona. The 20 participants conduct Food Stamp nutrition education activities on the Navajo reservation. Most participants were community and supporting partners of the Ilná Coalition that works to assist community organizations in collaborative health and wellness programs. Each participant developed skills related to the use of locally available foods. Five kits with approximately \$350 worth of kitchen equipment were distributed. The Arizona Department of Education (ADE) and the Arizona Nutrition Network also collaborated to add nutrition education activities to the USDA Fresh Fruit & Vegetable (F/V) Program implemented in 5 schools on the Tohono O'odham Reservation and 3 schools on the Gila River Indian Community Reservation. Information on the Arizona Fruit and Vegetable Snack Program in tribal schools was presented at the National Fruit and Vegetable Stakeholder Conference in Seattle, Washington in June of 2006. The program will continue in the 2006-2007 school year.

Comprehensive Cancer Control (AzCCC): The program hosted a Women's Health and Cancer Forum on February 24. The Forum featured Dr. Laura Tillman, Chief of Surgery at the Phoenix Indian Medical Center. She presented Breast Cancer in Native American Women Treated at an Urban-based Indian Health Referral Center, 1982-2003. The CCC Program also hosted a Colorectal Cancer Screening Forum on May 12. Dr. Peter Lance of the Arizona Cancer Center in Tucson presented on his colorectal studies with the Navajo population. The Arizona Comprehensive Cancer Control's mini grant program provided funding to assist with this study. In addition, the CCC's Disparities Committee hosted the "Reducing Cancer Disparities in Arizona" Conference on June 19 in which two breakout sessions featured health issues focusing on the Native American population. Dr. Tillman, Chief of Surgery at the Phoenix Indian Medical Center presented Breast Cancer in Native American Women Treated at Phoenix Indian Medical Center, 1983-2003. Lori Martin of the Hopi Women's Health Program presented on Hopi Women's Health Program: Overview and Future Directions.

<u>Diabetes Prevention and Control Program:</u> The program is providing funding for diabetes education activities in the Town of Guadalupe. This community is 48% Pascua Yaqui, 49% Mexican American and 3% white non-Hispanic in composition.

<u>Nutrition and Physical Activity Program:</u> The program supported incentive items that encourage healthy eating and being active to native youth during the Inter-Tribal Council of Arizona, Youth Camp held at Scottsdale Community College June 19-23.

<u>Steps to a Healthier US Program:</u> The program conducted pre-testing of creative concepts among Tohono O'odham Nation residents for social marketing campaign designed to promote physical activity in families with children in 4th through 6th grades for prevention of obesity, addressing the related risk of diabetes.

Well Woman HealthCheck Program (WWHP): The WWHP and the Comprehensive Cancer Control Plan sponsored three, one-day Native American Cultural Competency Trainings that took place 1/24-1/26. Participants included WWHP contractors, Comprehensive Cancer Coalition members, and ADHS employees. A Tribal Cancer Initiative Workgroup was formed in February as a result of the cultural competency training. The workgroup is developing a strategic plan to improve communication and collaboration with the 21 Arizona tribes. In addition, WWHP met with Medical Directors from both Phoenix and Tucson Indian Health Service Area offices to discuss opportunities for collaboration to improve access to Native American Women. On May 9th, the WWHP presented program information at the Southwest Native American Coalition to Reduce Cancer. Various tribal communities were represented. On May 23rd, the WWHP provided education to benefits coordinators at Phoenix Indian Medical Center on the Well Woman program and how to refer women to the program. On June 9th, the WWHP met with CDC tribal liaison and Phoenix Indian Medical Center (PIMC) to discuss opportunities to increase access to Native American women. The program is pursuing the possibility of contracting with PIMC as a Well Woman provider. The WWHP began preliminary discussions with the Native American Community Health Center's Medical Director on the potential of contracting with the clinic as a WWHP provider to help increase access to urban Native American women in Maricopa County.

Arizona WIC Program: The program's Integrity Unit has been working with the ITCA, Inc. to identify dual participation in the Arizona and ITCA WIC Programs. The Dual Participation Agreement between the Arizona WIC Program, the Navajo Nation, and the ITCA was signed by all parties and is now in effect. In addition, the Arizona WIC program, Inter Tribal Council of Arizona, Inc., and Navajo Nation WIC Programs held its quarterly Tri-State Coordination meeting on February 14, 2006. Areas of focus were food package coordination, implementation of Vendor cost containment status reports, and sharing of program materials. The ITCA WIC Program and the Arizona WIC Program also attended Civil Rights Training together on April 26, 2006. The training was conducted by representatives from the United States Department of Agriculture, Western Regional Office.

Tobacco Education and Prevention Program

Monthly ongoing program activities (on/off reservations) continued with the program's 10 tribal and urban Indian contractors. Activities included community education, youth collation groups, school intervention, cessation (Phoenix/Tucson), collaboration meetings county health departments/contracted tribes/contracted Urban Indian Health Centers, provider training, presentations, public services announcements, and events. Highlighted activities, noted below, are the major collaborative efforts.

Ongoing Activities:

- Technical assistance for infrastructure development for ITCA and the Gila River Indian Community (GRIC).
- Monthly collaboration meetings with Phoenix Indian Medical Center (PIMC).
- Quarterly Community Advisory Tobacco Coalition Meeting (ITCA, GRIC, Hopi Tribe, Hualapai Tribe, Pascua Yaqui Tribe (PYT), Salt River Pima-Maricopa Indian Community (SRP-MIC), Colorado River Indian Tribes (CRIT), White Mountain Apache Tribe (WMAT), KPT, Native Americans for Community Action, Inc. (NACA), Native Health, Tucson Indian Center, Inc. (TIC), ADHS-TEPP)
- Monthly meetings with ITCA (ITCA, ADHS-TEPP)
- Native Visions Coalition Meetings (Native Health, PIMC, ADHS-TEPP, ITCA)
- Monthly American Indian Youth Conference Planning Meetings (ITCA, ADHS-TEPP, Hualapai Tribe, Hopi Tribe, Native Health, NACA, TIC, SRP-MIC, CRIT)

Activities (past six months):

- January 17: State Legislature Indian Nation and Tribes Day (ADHS Booth)
- January 18: Traditional Story Telling Event (ITCA, Native Health), provided sponsorship and Native American Legislation Day (ADHS booth)
- February 18:Tucson Indian Health Event (TIC, PYT, Tohono O'odham Tribe, I.H.S., AHCCCS, DES, ADHS, UA College of Public Health)
- March 23-24: Urban Disability Conference (ITCA, Native Health), provided sponsorship
- April 5: Kick Butts Day (ITCA, Hualapai Tribe)
- May 31:World No Tobacco Day (ITCA, Hualapai Tribe)

Planned activities (next six months):

- July 5-7: Tobacco and Health Youth Conference: Phoenix (ADHS-TEPP, ITCA & tribal/urban Indian health center contractors), provided sponsorship
- July 14: Native American Comedy Night (ADHS TEPP), provided sponsorship
- July 28: Indian Health Services Campus going Tobacco-Free Event (Megan Wohr, I.H.S.), assistance and event planning
- August 1-3: Headstart Screenings, Parker (ITCA, CRIT)
- August 15: Family Night Out, Flagstaff (ITCA, NACA)
- September 16: Relay for Life, Flagstaff (ITCA, NACA)

- September 30: Climb to Conquer Cancer, Flagstaff (ITCA, NACA) and Children's Powwow, Tucson (ITCA, TIC)
- October 11: Breast Cancer Awareness (ITCA, KPT)
- October 23-27: Red Ribbon Week, Peach Springs (ITCA, Hualapai Tribe)
- October 23-29: Red Ribbon Week, Parker (ITCA, CRIT)
- October 27: Red Ribbon Week (ITCA, KPT)
- October 29: Red Ribbon Week, Flagstaff (ITCA, NACA)
- Community Thanksgiving (ITCA, CRIT)
- November 16: Great American Smoke Out, Flagstaff (ITCA, NACA),
 Communities helping Natives Breathe Easier, Phoenix (ITCA, Native Health)
- November 17: Youth Basketball Tournament (ITCA, KPT), Great American Smoke Out, Peach Springs (ITCA, Hualapai Tribe), Great American Smoke Out, Tucson (ITCA, TIC), Great American Smoke Out, Parker (ITCA, CRIT), Great American Smoke Out (ITCA, KPT)

Office of Women's and Children's Health

Community Health Program: The program funds a grant awarded to the Inter Tribal Council of Arizona, Inc. (ITCA) that has the goal of reducing the rate of death and injury to American Indian children and women resulting from motor vehicle crashes. ITCA distributes child car safety seats to all 19 tribes in the Council. Each participating tribe has a certified National Highway Traffic Safety Administration (NHTSA) technician distribute the child car safety seats to the tribal parent/caregiver and educate them on proper use and installation. A community awareness campaign encourages correct seat belt use for American Indian women, including correct seat belt use during pregnancy.

Family Violence/Domestic Violence Program: The program funds a Native American domestic violence service provider in Chinle, AZ. Ama Doo Alchini Bighan (ADABI) has received Family Violence Prevention Services funds from the department since 1998. ADHS has been one of the sponsors of ADABI's annual Native American Domestic Violence and Sexual Assault Networking and Awareness Conference for the past two years. ADHS will again be a sponsor of the third annual conference in August, 2006. ADABI serves the Navajo Nation and provides temporary emergency safe shelter, case management, crisis intervention, group and individual therapy work for victims of domestic violence. The agency also has a Batterers Intervention Program. ADABI has been instrumental in the development of Native American domestic violence coalition efforts in Arizona.

Two other Rural Safe Home Network contractors provide services to persons living on the San Carlos Apache Indian Reservation. Mt. Graham Safe House in Safford, and the Gila County Safe Home in Globe are in close proximity to persons living on the reservation and provide women seeking safety from domestic violence with shelter and other necessary services as requested.

Rape Prevention and Education Program: The "Rape Prevention & Education" Program (RPEP) funds services provided by Ama Doo Alchini Bighan (ADABI). ADABI is active in presenting rape prevention and education by providing prevention activities for schools, businesses, social service providers and others throughout the area. Also, with a nomination from the Program Manager of RPEP, Cheryl Teller and Rob Taylor won as "Outstanding Prevention Professional Award" at the annual Sexual Assault Conference held March 31, 2006, in Phoenix, Arizona. The award was presented personally by Governor Janet Napolitano.

Health Start Program: The program contracts with Native American Community Health Center, Inc. to provide Health Start Services to Native Americans located in central and west Phoenix. The services provided include connecting pregnant or postpartum women with community resources that provide prenatal and related infant and child services. In addition, families are followed for two years after the birth of the child to assist with identification of a "medical home" for each family member and to encourage immunizations for all children in the family. They also provide education on normal child development and parenting skills, and serve as a referral source in the identification of children with special needs.

<u>Injury Prevention Program:</u> The program has been involved in several tribal outreach activities during the current reporting period. They are as follows:

- April 21 presented at the Elders Conference on child passenger safety for the Inter Tribal Council of AZ.
- April 24-26 co-taught certification training on child passenger safety training in Whiteriver. Six students: 3 from tribal social services & 3 from White Mountain Apache Tribe (WMAT) Fire Dept.
- April 27 & 28 taught a one-day course on injury prevention to White Mountain EMS.
- Added the injury prevention coordinator from WMAT to the ADHS Injury Prevention Advisory Council (IPAC). Have advised Indian Health Services that their injury prevention coordinators are welcome to join IPAC.
- Recertified 6 WMAT car seat technicians at an event in Pinetop May 13
- June 5-8 co-taught certification training on child passenger safety training for Hopi. Twenty students represented BIA, social services, police, health center and fire.
- June 6, met with Tony Huma to discuss Hopi EMS involvement in prehospital data collection.

Upcoming:

- Scheduled a certification child passenger safety class for Hualapi (Peach Springs) at the request of Police Chief Bradley for October 25-28.
- November 15-16 hold a recertification training and car seat check for Inter Tribal Council of AZ.

Bureau of Public Health Statistics

The Bureau Medical Director, Dr Tim Flood, has begun discussions with the Hopi Tribe concerning the exchange of cancer and birth defects data. The work with cancer data will be in support of a project to define the Hopi Tribe's cancer burden. Sylvia Brown from the University of Arizona is the main contact on this project. Statewide cancer data is reported to the state's central cancer registry; this will be a valuable resource for the Tribe. The Bureau is in discussion concerning an agreement that will authorize the exchange. Similar discussions are taking place to clarify the ADHS role in ascertaining birth defects data.

The Bureau is working with ITCA and the ADHS Comprehensive Cancer Control project to define the opportunities to intervene and control cancer in Indian country.

The Bureau is available to generate reservation-specific rates of death from motor vehicle crashes. This is one of the most glaring health disparities when mortality data is analyzed by race group. Further information on this project can be obtained directly from Dr Flood, floodt@azdhs.gov.

Bureau of Emergency Preparedness and Response

Monthly Tribal Conference calls are held on the third Thursday of each month which include participation of the Tribal Bioterrorism Coordinators, Inter Tribal Council of Arizona, Indian Health Service and the Bureau to provide a forum to discuss matters dealing with the CDC Cooperative Agreement, Tribal, ITCA and IHS deliverables, and other issues relating to Tribal Bioterrorism and Public Health Emergency Preparedness. A day-long meeting was held with our Tribal, ITCA and IHS partners on June 8, 2006 to provide assistance on how to address each of their CDC Cooperative Agreement deliverables. Other topics that were addressed were Budgets and Contractor's Expenditure Reports (CER's), ADHS Pandemic Influenza Preparedness Plan and Phoenix IHS Pandemic Influenza Preparedness Grant, Arizona's Preparedness Campaign "Just in Case Arizona", Strategic National Stockpile, SIREN overview and update, and interoperable radio communication.

Site Visits have been made by the Tribal Emergency Preparedness Coordinator, Africa Dorame. Tribal Site visits include Gila River Indian Community, Ak-Chin Indian Community, Tohono O'odham Nation, Pascua Yaqui Tribe, Navajo Nation, Hopi Tribe, and White Mountain Apache Tribe. Tribal, ITCA and IHS partners were invited to participate in the Walk the Wall session on June 29, 2006. The event provided an opportunity for our Tribal, ITCA and IHS partners to provide input and discussion of proposed concepts for the FY 2006-2007 CDC Public

Health Emergency Preparedness and HRSA National BT Hospital Preparedness Program.

The Tribal Emergency Preparedness Coordinator, Africa Dorame attended the Current Issues in Bioterrorism Response Conference sponsored by ITCA that was held on May 23 and 24, 2006. Topics such as coordination efforts in Tribal Communities, bioterrorism and water systems security, Safe Drinking Water Act, NIMS, Inter-governmental Agreements, and Homeland Security were discussed.

Division of Licensing Services

During this reporting period the Division of Licensing Services (DLS), through the Office of Assisted Living Licensing (OALL), provided both on-site and telephone technical assistance to the Navajoland Nursing Home entity known as Navajo Land Assisted Living. A team of leader from the OALL made a courtesy inspection visit to the facility on April 25, 2006. A letter was issued advising the Administrator of Navajo Land Assisted Living to the effect that if the facility was located on non-tribal land it would be licensed. The DLS was proud to be a participant in the project and looks forward to working with the Navajo Nation.

Division of Behavioral Health Services

The Arizona Department of Health Services, Division of Behavioral Health Services maintains intergovernmental agreements with four tribal nations, which includes Gila River Indian Community, Pascua Yaqui Tribe, Navajo Nation and the Colorado River Indian Tribes. The intergovernmental agreements are funded with a combination of federal and state funding sources, which include AHCCCS (Medicaid) funds, state appropriated funds and federal block grant funds. Each intergovernmental agreement is unique in its funding methodology and is designed specific to each tribe and includes contract deliverables within interim monitoring, as well as reporting requirements.

Two tribes function as a Tribal Behavioral Health Authority (TRBHA) and the Division of Behavioral Health Services is required to conduct an annual administrative review of the financial and operational systems. The review teams use of a monitoring tool, which consists of operational and financial standards, and the TRBHA is scored on its contract compliance performance in various areas, such as clinical services, quality management, financial management, customer service, and policies and procedures. To ensure the TRBAs are prepared for the administrative reviews, Ms. Ysaguirre conducts trainings and also coordinates quarterly meetings with TRBHA management staff.

TRBHA's Administrative Review

In the past few months, the Division of Behavioral Health Services has been preparing for the 2006 Administrative Review of Tribal and Regional Behavioral

Health Authorities. This year's review cycle began on August 9, 2006 when the Gila River Tribal Behavioral Health Authority delivered documents for the pre-site review conducted by the Division. On August 17, 2006 the Monitoring and Oversight Team from the Clinical & Recovery Section reviewed clinical records at the Gila River Tribal Behavioral Health Authority offices. The Division is currently preparing interview questions and will be conducting an on-site review toward the end of August. The Administrative Review for the Pascua Yaqui Tribal Regional Behavioral Health Authority will begin in late October and proceed through early November.

As the Contract Administrator for the Tribal Behavioral Health Authorities, Ms. Julia Ysaguirre is the point of contact and will be leading the team for the on-site review and is responsible for consolidation of the finds, drafting a report, obtaining input from the Tribal Behavioral Health Authorities, initiating Corrective Actions Plans and submitting a final report summary with an analysis of the findings.

Tribal Intergovernmental Agreements

Ms. Ysaguirre also has administrative oversight of two additional intergovernmental agreements with the Navajo Nation and the Colorado River Indian Tribes. Ms. Ysaguirre has been involved in assisting the Navajo Nation Behavioral Health Authority in increasing coordination of services with tribal and federal facilities of the Indian Health Service. The Navajo Nation Tribal Behavioral Health Authority has expanded remote access to two of their program sites that allow case managers to enter client records into the State's behavioral health system, and is continuing to enhance their systems to improve customer service. In the past four months, Ms. Ysaguirre has provided two trainings to case managers of the Navajo Nation Tribal Behavioral Health Authority and a local provider. Ms. Ysaguirre also serves as the point of contact and provides technical guidance to the Navajo Nation Tribal Behavioral Health Authority.

Tribal Coordination with RBHAs

The Colorado River Indian Tribes has a signed intergovernmental agreement with the Department that is funded with state subvention funds, and is designed for the tribe to serve members who are not eligible for AHCCCS and are in need of higher levels of care not available in the local coordinate services with the local Regional Behavioral Health Authority, Cenpatico. In recent months, Cenpatico has been conducting conference calls with the tribal governments located in their geographic service area, and has initiated discussions to implement memorandums of agreements with tribal governments for the provision of services and funding as a pass through mechanism from the Division to the tribal government. Cenpatico has met with the tribal Council from the Ak-Chin Indian Community, and is currently working with the tribal government to initiate prevention programs in the community.

The Maricopa County-based RBHA, Value Options, is meeting on a monthly basis with the Phoenix Indian Medical Center (PIMC), a facility of the Indian Health Service, to improve coordination of services for patients needing services not available at PIMC. Additionally, Value Options and PIMC have extended an invitation to the Salt River Pima-Maricopa Indian Community, and have initiated discussions on improving communications and coordination of care. The Division has also partnered with the AHCCCS Administration to resolve policy issues surrounding the reimbursement of behavioral health services for Native American AHCCCS members that enter the behavioral health system and continue to receive services at IHS and tribal facilities.

The Northern Arizona Regional Behavioral Health Authority (NARBHA) recently held its Embrace Life Summit which provided a vast array of suicide prevention workshops for Native American youth. The conference provided suicide awareness and prevention skills workshops. This was the second annual event and took place on August 25th and 26th in Flagstaff, Arizona, at Northern Arizona University's du Bois Center. NARBHA staff was the conference emcee and were very excited about the vision for positive outcomes for Native American Youth. NARBHA will be forming a planning committee, which will be responsible for developing a statewide youth leadership institute for Native American high school students. The committee will be made of both youth and adults, empowering young leaders to take responsibility for their futures.

State Infrastructure Grant Funds to Tribal Governments

Under the State Infrastructure Grant (SIG), the Division will be providing funds and working with contracted RBHAs to fund prevention activities in Native American communities for tribal governments who do not currently have an intergovernmental agreement with the Department. Here are a few of the proposed uses of SIG funds for tribal communities.

- The Ak-Chin Indian Community will be funded through Cenpatico and will use the funds to sponsor a community health fair with a local crisis provider on substance abuse prevention.
- The San Carlos Apache Tribe will be funded through Cenpatico to purchase teleconferencing equipment and suicide prevention curricula.
- Community Partnership of Southern Arizona (CPSA) will be providing funds to a local provider to work with the Tohono O'odham Nation for the delivery of suicide and substance abuse prevention activities.
- The Hopi Tribe will be funded through Northern Arizona Regional Behavioral Health Authority (NARBHA) who will subcontract with the Hopi

Guidance Center for the planning of conference on methamphetamine abuse.

- The Hualapai Tribe will be receiving funds through NARBHA to sponsor a
 Methamphetamine Awareness Day that will be organized by the Tribe's
 Youth Council in a health fair fashion to include speakers and information
 tables to education youth on substance abuse issue.
- NARBHA will be providing funds to the White Mountain Apache Tribe for the purchase of a training module, <u>Protecting You, Protecting Me</u>, which is a science-based alcohol use prevention curriculum for school-age children.

Tribal Community Accomplishments and Updates

The Gila River TRBHA held a Meth Awareness Day on May 24, 2006 that provided information to tribal members on substance abuse and direction in accessing services for treatment. Speakers included law enforcement agencies, community social services and youth programs, and behavioral health providers. Additionally, the Division provided Gila River TRBHA with funds to implement Methamphetamine treatment program, MATRIX. The program event was highlighted in one of the local newspapers.

The Gila River TRBHA has also initiated a housing project for persons with severe mental illness, and received funds from the Division. The TRBHA is working with local tribal officials for the designation of land and to begin building the necessary infrastructure to support the housing project. The TRBHA has almost completed their telemedicine capability with funds provided by the Division.

Pascua Yaqui TRBHA will use SIG funds to purchase materials related to identification of behavioral health problems and referrals to treatment services. Ms. Ysaguirre has provided the TRBHA with technical assistance and guidance with the TRBHAs contract deliverables and reporting requirements. She will be providing training to TRBHA staff for the upcoming administrative review.

The Pascua Yaqui TRBHA sponsored a suicide prevention conference, in conjunction with their neighboring tribe, the Tohono O'odham Nation, in which over 300 Native American youth attended. The TRBHA is also working on implementing telemedicine capability with funds provided by the Division.

Ms. Ysaguirre has also met with representatives from Apache Behavioral Health Service, a tribal provider of the White Mountain Apache Tribe, who has submitted a request to enter into an intergovernmental agreement for the administration and delivery of behavioral health services to tribal members. Apache Behavioral

Health Services has taken on the task of drafting an agreement and a proposed budget to begin the negotiation process. The Division and AHCCCS are currently working to resolve policy issues regarding reimbursement methodologies for tribal programs that enter into agreements with the Department for the administration and delivery of behavioral health services as covered under the AHCCCS administration.

Substance Abuse Coordination Grant

The Division's Clinical & Recovery Services section is involved in conducting community focus groups to gain information on the adolescent and young adult population with diagnosis of substance use disorder, and who may be currently receiving treatment. The focus groups will include parents and family members, program directors, clinical supervisors, line clinicians, therapist and clinical liaisons. The goal is to gain an understanding of the constituent groups' view of substance abuse treatment services, and how those systems and services can be enhanced to promote improved outcomes. The SAC grant will establish state level infrastructure and provider network support. A team of three staff is designated to lead, and give direction and support to these efforts. The team will work closely with family organizations, other state agencies and community based agencies to seek their input and to collaborate in the planning, implementing and development of resources. The primary objective is to identify strategies that function well for engaging young adults and adolescents in treatment programs and services, and to use this information to educate state policy makers and behavioral health practitioners. The SAC grant initiated their focus groups in July 2006 with coordination with the RBHAs and TRBHAs, and is expected to continue through early September.

Addressing Alcohol Abuse and Methamphetamine on Reservations: ADHS released infrastructure development plan requests to all RBHAs and TRBHAs for development of rural detoxification centers and follow-up services in areas of the state with high levels of need for substance abuse services and limited local resources. The plans will be funded through a \$2.5M appropriation to DHS passed in the 2006 General Session. An internal selection committee will review the plans and make awards by November 2006.

Expanding Access to Behavioral Health Services: New rates were established for Therapeutic Foster Care in July 2006 that allows tribal foster care providers to be paid at a rate in line with market rates for this service in non-reservation areas.