

**Arizona Department of Health Services
Tribal Leaders Roundtable/Summit Update Report
9-17-07**

Office of the Director

Under the leadership of Director Susan Gerard, the Arizona Department of Health Services continues to strengthen its relationships with Arizona's Native American communities. The Department is supporting and expanding critical programs serving Arizona Tribes, developing intergovernmental agreements specific to local Tribal communities, and bringing together Tribal leaders and resources to address priority Tribal health concerns. The following report reflects the funding and successful implementation of efforts to assist Native Americans across Arizona.

Native American Liaison

Michael Allison, Native American Liaison, continued building an active relationship with the Native American health care community to enhance overall working relationships and service delivery.

In recent months, Mr. Allison has traveled throughout Arizona to assist tribes in dealing with some of the most critical public health policy issues of today, including public health preparedness and pandemic flu planning. He also has provided leadership with other agencies to explore establishing a state construction fund for on-reservation health facilities, and helped to direct services to tribes by participating in two state Grant Review Committees for tribal primary care mini grants and tribal substance abuse coalition grants.

Division of Behavioral Health Services

The Division of Behavioral Health maintains Intergovernmental Agreements (IGAs) to provide mental health and substance abuse services to tribes across Arizona. Regions are managed by Regional and Tribal Behavioral Health Authorities (RBHAs and TRBHAs), who are responsible for planning, managing and/or delivering mental health and substance abuse services.

The Division has a wide range of initiatives aimed at supporting Arizona's Native American communities, including:

State Infrastructure Grant Funds (SIG): Grant funds are targeted to address: creating and sustaining trusting partnerships with families, and other child serving systems; workforce development through expanded training and coaching; community infrastructure development for child and family serving agencies

including barrier identification and resolution; and improvements to overall quality management to ensure sustainability of the statewide system reform.

The grant:

- Funds a .5 FTE Child and Family Team coaches' position for the Pascua Yaqui Tribe.
- Provides financial support to ongoing Child and Family Team coaching and mentoring efforts targeting increased direct support for children and families on the Gila River Indian Community.
- Funded "Meet me where I am" service expansion for children campaign Kick Off events for the Pascua Yaqui and Gila River Indian Community Tribes.
- Funds youth group development for all Tribal/Regional Behavioral Health Authorities (T/RBHA's).
- Provides financial support to the Gila River Indian Community and Pascua Yaqui Tribes to setup teleconferencing in their region.
- Funded Coach Mentor to attend Child Abuse Prevention conference, Wraparound Fidelity Index training and Meet me where I am campaign trainings.
- Funded tribes in Arizona to implement TeenScreen.

Substance Abuse Coordination Grant (SAC)

Integration of the Program's Native American Strategic Planning Work Group and the Native American Suicide Prevention Committee began on April 19, 2007.

The Native American Workgroup in partnership with Native American Connections, Inc. launched a series of trainings during the months of June and July. Curriculum from the White Bison Wellbriety program including: "Families of Tradition; Sons of Tradition and Daughters of Tradition," were conducted in June. Curriculum from Native American Connections, Inc. entitled "Circles of Strength" was delivered during the month of June and completed in July. The two-day training of the Circle of Strength curriculum was held in Casa Grande and Flagstaff. The White Bison Wellbriety three-day trainings were held here in Phoenix. Over 50 participants from 11 different tribes were represented and attended these trainings. The curriculums were very well received by tribal representatives, which included tribal family members as well as tribal clinical staff.

Methamphetamine Center of Excellence

The Gila River TRBHA is home to the one of three Methamphetamine Centers of Excellence in the state. The program provides intensive treatment and support to overcome methamphetamine addiction, within the cultural framework of the Gila River Indian Community. This program continues to maintain its unique cultural context by addressing critical issues prevalent in tribal communities; suicide being one such issue. The safety and support for women in the treatment group

provide to one another has assisted the women in increasing their own coping skills as well as improving their abilities to reach out to their community members who are in pain. The comprehensive program continues to see successes in increased number of family reunifications, maintained sobriety, and increased employment opportunities. There has been an increased opportunity for housing placements for many of the women and an aftercare therapist has recently been added to the program in addition to a peer support position. The Gila River TRBHA continues to utilize a van to increase outreach and improve access to off site support meeting for the treatment group participants.

Bureau of Compliance

The Division of Behavioral Health Services has a new Intergovernmental Agreement (IGA) with the White Mountain Apache Tribe to be a new Tribal Behavioral Health Authority (TRBHA). This new IGA will be effective July 1, 2007, for start up activity with behavioral health services starting October 1, 2007. There will be on-going provision of technical assistance to facilitate the development of the Apache provider network for implementation of services on October 1st.

Staff completed work with the Navajo Nation and Colorado River Indian Tribes (CRIT) to amend their Intergovernmental Agreements extending them through June 30, 2008. Staff also began developing work plans for these two tribes to negotiate amendments to new IGAs which will be effective July 1, 2008. Each tribe is requesting additional service responsibilities. Bureau staff also initiated work with the Pascua Yaqui and Gila River Indian Community Tribes to plan for the negotiation of new IGAs to be effective July 1, 2008.

The Gila River TRBHA participated in the 2006 Administrative Review and scored as high as and/or higher than the four RBHAs on most standards. Other monitoring activities which Gila River participated in were the Biennial Recipient Survey and the annual Independent Case Review (ICR). The Pascua Yaqui Centered Spirit Program in Tucson participated in the 2006 Administrative Review. Pascua Yaqui continues to utilize its subvention funding appropriately and efficiently. Pascua Yaqui also participated in the Biennial Recipient Survey and the annual Independent Case Review (ICR).

The two tribes with Intergovernmental Agreements (IGAs) with the DBHS are the Navajo Nation and Colorado River Indian Tribes (CRIT). The CRIT IGA is for provision of subvention services only. The Navajo Nation IGA is for case management services only. CRIT has 11 licensed staff providing services. The tribal council increased salaries for professional staff making recruitment successful. CRIT plans on proposing to provide case management services as well. The new Navajo Nation IGA will include services for the Navajo Developmentally Disabled population and several other new provisions. Both

CRIT and Navajo are experiencing issues for which ADHS/DBHS is providing technical assistance.

Other Activities – The Division of Behavioral Health Services continued to work with the Arizona RBHAs. The following is a summary of work with specific tribes and Native Americans. Value Options – A tentative agreement was reached between Value Options and Phoenix Indian Medical Center (PIMC) to initiate a memorandum of understanding (MOU) for PIMC to become a provider for Value Options. This proposed MOU would allow for the credentialing of PIMC psychiatrists in order to conduct assessments and to write prescriptions for Value Options' Native American members. Cenpatico – Work continues to facilitate provision of services and meet the concerns of Colorado River Indian Tribes and San Carlos Apache tribes. Northern Arizona Regional Behavioral Authority (NARBHA) – Work continues to address the behavioral health needs of tribes in NARBHA's service area, including the Havasupai specified issues. Of particular concern to NARBHA and the tribal programs is the provision of out of office services and the ability to bill for these services.

There is continued need for training within the tribal behavioral health programs, the local Indian Health Service's behavioral health programs and the RBHAs regarding how the various behavioral health service programs can work together to maximize behavioral health service resources for American Indians.

Arizona State Hospital

Between April 1, 2007 and June 20, 2007, five patients were admitted and 11 patients were treated at the State Hospital from Arizona tribal communities. The most common diagnosis among Tribal members is Schizophrenic Disorders, with the second most common diagnostic category being Cognitive Disorders. Of the 11 people treated, eight are male and 3 are female. Arizona State Hospital staff continues to work closely with the tribal communities for timely admissions of tribal members referred for care.

Division of Public Health Services

The Department continues to play a key role in supporting public health services to tribes across Arizona. Here are some examples of recent activities:

Bureau of Women's and Children's Health

Rural Safe Home Network Program

The program, using federal Family Violence Prevention Act funds, provides funding to Ama Doo Alchini Bighan (ADABI) on the Navajo Reservation. Located in Chinle, Arizona, ADABI serves the Navajo Nation and provides temporary emergency safe shelter, crisis intervention, advocacy, case management, and group and individual therapy for victims of domestic violence. 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.

County Prenatal Block Program

The program provides perinatal and preconception health services for all women, including Native American women who present at County Health Departments. The LaPaz County Health Department is located on the Colorado River Indian Tribes reservation and provides services to women who request pregnancy tests, children's immunizations, and in-home safety inspections. In most counties, however, the majority of Native American clients receive services from Indian Health Services.

Community Health Grants

The program provides services related to reducing infant mortality, decreasing obesity in women and children, and providing injury prevention. In Apache County, 32 car seats with accompanying safety education were provided for Native American families. Pre/Post tests revealed a 49% increase in knowledge about passenger safety. Two hundred and sixty eight high school students attended an interactive teen maze at Valley High School in Sanders. Four classes were also provided to 100 sixth-grade students about vehicle safety. A car seat checking event was conducted in Fort Defiance, and 28 parents at the local childcare center had their car seats checked. Five families needed replacement car seats, which were provided at no cost. Nineteen additional Child Passenger Safety Technicians were certified during a National Highway Transportation Safety Administration Child Safety Seat Technician training held in Window Rock.

Sixteen Navajo women completed a car safety course in Navajo County, and two community car safety events have been conducted. In Coconino County, 14

child car seats were provided to families in Tuba City, Tonalea, and Kayenta. Fifteen families participated in a program for drivers who have been ticketed for not securing their children in safety car seats. Through this program, participants pay reduced fines, receive education, and are provided with new car seats at reduced or no cost. Five tribal members completed the Child Safety Seat Technician training in Coconino County, and are now certified as Child Passenger Safety Technicians.

The Bureau awarded a grant to the Tohono O'odham Nation to create a "Pregnancy Circle of Care" among tribal perinatal service providers to integrate and strengthen substance abuse prevention services during pregnancy.

Teen Pregnancy Prevention Program

The Program is funding services to four tribes. The programs are designed to provide comprehensive sexuality programming in a youth development environment; parent /caregiver education; and outreach. A grant is in process with the Navajo Nation to provide comprehensive teen pregnancy prevention programming and education to teens, parents, and caregivers. A grant is in place with the Inter Tribal Council of Arizona to provide funding for comprehensive teen pregnancy prevention and education to three tribes, the Tohono O'Odham Nation in San Lucy, Colorado River Indian Tribes, and Fort McDowell Yavapai Nation to provide services to teens, parents, and caregivers.

As the result of the syphilis outbreak on the Tohono O'Odham Nation, the Bureau of Women's and Children's Health is currently involved with enhancing sexually transmitted disease prevention and education within the Tohono O'Odham Nation and surrounding areas. The unusual aspect of the syphilis outbreak is the disproportionate number of tribal members under the age of 25. An alliance between the Bureau of Women's and Children's Health, Center for Disease Control, Department of Health Services Sexually Transmitted Disease Program, Indian Health Services, Pima County, and the Tohono O'Odham Nation has formed, with the goal of working on a proactive sexually transmitted disease prevention program for the Nation. As a result of that alliance, the Bureau of Women's and Children's Health has expanded the existing scope of work of the Inter Tribal Council of Arizona Teen Pregnancy Prevention contract to develop ongoing programming to the impacted areas.

The Abstinence Education Program currently funds Arizona Youth Partnership to provide services as well as a life skills program on the Tohono O'Odham Nation. They have been working on the reservation for the past four years and have support of the Tribe and the Bureau of Indian Affairs Schools. They have served an average of 50 to 100 youth per year at the Tohono O'Odham High School. During the coming school year they will be providing services across the Tohono O'Odham Nation to fifth to eighth grade youth.

Injury Prevention

The Arizona Department of Health Services Injury Prevention Program serves as staff support for the Tribal Traffic Safety Group. Representatives in this group include the Arizona Department of Transportation, Governor's Office of Highway Safety, Bureau of Indian Affairs, Indian Health Services, Inter Tribal Council of Arizona, and tribal representatives. The current focus of this group is information/resource sharing. The Arizona Department of Health Services Injury Prevention Advisory Council and the Pediatric Emergency Services for Children Committee include tribal representation.

High Risk Perinatal Program

The Program Section Manager visited pediatricians working at the Chinle Indian Health Service (IHS) Service Unit to ensure they were aware of any babies who are returning to the reservation following discharge from an off-reservation Newborn Intensive Care Unit. This information is also useful for the Community Health Nurses who need to make contact with the baby and their family once they are home.

Bureau of Health Systems Development (BHSD)

Native American Community Development Program

Community Development/Partnership work included: (1) A St. Luke's Health Initiatives, through the Arizona Health Facilities Authority, whereby \$50,000 was made available for mini grants for medically underserved communities in Arizona. The BHSD Community Development Programs provided overall oversight and technical assistance to potential grantees. The funds were earmarked for a 50/50 split between rural communities and Native American communities. 15 applications were received and evaluated. 6 communities (3 Native American and 3 Non-Native American) were identified as grantees. Announcement will be made by end of August. (2) HPSA designations of Native American reservations (apart from their automatic designations) are in process. About half of the reservations have already been designated. A white paper report on this initiative is in progress. (3) Identification of a contractor from Sage Memorial Hospital as potential community partner to assist in workforce development issues. (4) Program Manager, Kim Russell, appointment as Chair of the Indigenous Section of the AZ Public Health Association (AZPHA) Board. She will represent the Native American communities on public health issues.

Trainings/Technical Assistance work included: (1) The coordination of a HHS Office of Minority Health Region IX sponsored Basic Grant Writing workshop and a HHS Health Resource and Service Administration (HRSA) sponsored Section 330 Community Health Center workshop for tribal participants held during the last quarter of FY 2007. Workshop evaluations were overwhelmingly positive

with requests for similar trainings to be held in the future. (2) Program Manager, Kim Russell, attending a Northern Apache Special Health Care District Board meeting where interest in telemedicine was identified. Technical assistance on telemedicine grant opportunities was provided. (3) Program Manager, Kim Russell, Fabian Valle, Workforce Manager, IHS Phoenix Area Office human resource, and provider recruiters meeting with the Gila River Health Care Corporation (GRHCC) to provide technical assistance on available resources to assist in recruiting and retaining providers in a new planned facility. (4) Providing technical assistance to Native Health, the Phoenix Urban Indian Health Center, in their application for the Federal Qualified Health Center (FQHC) look-alike designation.

Primary Care Program

For FY 2008, the Program provided funding to 19 Community Health Centers. Contracts were effective July 1, 2007. All contractors are expected to serve all low income individuals including low income Native American individuals. One of the contractors is the Phoenix Urban Indian Health Center, Native Health. A budget decision package was developed for FY 2009 requesting \$1.5 million of "new start" monies for 2 urban Indian Centers; Native Americans for Community Action in Flagstaff and the Tucson Indian Center in Tucson. Part of the requested funds will be used for covering the costs of providing primary care services.

Office of Chronic Disease Prevention and Nutrition Services

Arizona Diabetes Program

Phoenix Indian Medical Center (PIMC), which received a grant from state funds, produced an Exercise Chair Video using American Indian Music and patient volunteers. PIMC clients requested a video they could use at home that uses culturally relevant music to integrate their American Indian Heritage. The video will be made available throughout Indian Health Service, and other Indian communities. The video program will target patients with diabetes and/ arthritis (approximately 20% of the patients.) The Arizona Diabetes Program (ADP) will augment the number of videos that will be available by making 500 additional copies.

The ADP provided technical assistance and resources to the Diabetes Program Coordinator at Sage Memorial Hospital in Ganado regarding their inquiry into information on the use of a non-mydractic (non-dilated) diabetic eye evaluation. ADP staff were aware that the Phoenix Indian Medical Center (PIMC) provides this type of diabetic eye evaluation and ADP staff connected the Diabetes Coordinator with the director of the vision program at PIMC.

Arizona Nutrition Network

Five local tribal projects have been approved to provide Food Stamp Nutrition Education to American Indian students and clients. These projects include: (1) Ha:sañ Preparatory and Leadership School – Charter school in Tucson that links use of indigenous foods to improve health through gardening program and multigenerational activities for Tohono O’odham students. (2) Iina Coalition, Inc. – Community-based organization on the Navajo Nation that provides nutrition education in schools, through services of Community Health Representatives, and by providing food demonstrations and other activities. (3) Native American Community Health Center, Inc. – Health center provides nutrition education to American Indian clients within the Phoenix area at high schools, in senior centers, and in clinic settings. (4) Navajo Nation Area Agency on Aging – Tribal Area Agency on Aging reaches elders through congregate meal services and receiving home meal delivery with culturally responsive, individualized nutrition and physical activity information. (5) White Mountain Apache Tribe Health Education – Tribal health education program provides nutrition education through innovative community events, school programs, and activities such as food demonstrations.

Arthritis Program:

The Arizona Arthritis Program will be requesting use of carryover funds to expand on the Arthritis Foundations Life Improvement Series; Aquatic, Exercise and Self-Help (LIS). These trainings will include rural Arizona to include the Native American population. Use of carry over funds would provide the program with 15 new certified instructors whom could conduct 4 LIS series per year with a maximum of 10 participants in each course series for a potential of 1800 participants to be reached in Native American communities.

Steps To A Healthier Arizona (Steps)

The ADHS Policy Planning Committee implemented the Arizona Policy Training Institute in April 2007. Attendees agreed to have a follow-up training specific for Native American communities. Some preliminary activities recommended included: (1) Creation of a summary list of current reservation policies; (2) Creation of a list of potential policies that the Indian Tribes and Nations would like to have; (3) Support and implementation of current policies; and (4) Search for various funding sources from different ADHS programs and community partners (e.g., Intertribal Council of Arizona, Special Diabetes Programs, Tribal funds, Arizona Public Health Association Indigenous People Subgroup).

The Tohono O’odham Nation, one of the Steps Program contractors, reported the following activities: (1) Currently conducting the Community Health Assessment – a door-to-door CDC-Behavior Risk Factor Surveillance System (BRFSS) survey adapted for the Tohono O’odham Nation. The surveyors will visit 850 homes to assess the health status of the Nation on all diseases and

disease risk factors. (2) Continue to offer Asthma awareness and self management to children and adults referred by IHS physicians. (3) Offered a 4-day Asthma Camp to 30 children who learned about asthma awareness and self-management through an interactive approach. (4) Participated in a "Food and Fitness Retreat" sponsored by the Tohono O'odham Community Action (TOCA). The Retreat brought together community members, tribal leaders and local organizations/stakeholders to plan a Food and Fitness project that incorporates the use of healthy native foods in the everyday life of the Nation.

Well Woman HealthCheck Program (WWHP)

Phoenix Indian Medical Center (PIMC) continues to screen American Indian women in Maricopa County since their contract start date in February 2007. PIMC has been able to take the Well Woman HealthCheck Program campus-wide beginning May 2007 to increase the number of women served. Prior to May 2007, the program was limited to women receiving services in the Women's Clinic. This increase has doubled volume and they expect to screen approximately 60 women a month. The WWHP staff has been providing increased technical assistance related to reimbursement and clinical review. A one year contract extension has been initiated and completed for 7/1/2007-6/30/2008. The WWHP was selected to present information on the Phoenix Indian Medical Center pilot project at the National Program Director's Meeting with the Centers for Disease Control and Prevention in August.

The WWHP sponsored a case management conference in April for case managers from the state, Hopi Tribe and Navajo Nation breast and cervical cancer programs. The WWHP has partnered with the Navajo Breast and Cervical Cancer Program to provide funding for a mobile mammography unit to be present at fairs and events throughout September and October in Window Rock, Shiprock, and Tuba City. The Navajo program will staff the event, provide follow-up and share data with the state. The WWHP met with the Gila River Indian Community on 5/10/07 and have a contract in process for Gila River to implement the Well Woman HealthCheck through the Gila River Healthcare Corporation.

WIC Program

A 5-year intergovernmental agreement with the Cocopah Tribe was initiated for the Tribe to continue providing WIC services for FY08. The Cocopah Tribe elected to contract directly with the Arizona Department of Health Services, instead of through the Intertribal Council of Arizona, Inc. The three state WIC Agencies, State of Arizona, Intertribal Council of Arizona, Inc., and the Navajo Nation, held their tri-state meeting to discuss common issues related to the WIC Program and plan for the anticipated change in the WIC food package regulations. The food package selection committee meeting is scheduled to meet on September 7 to select the WIC foods for FY09 and to plan a joint

training for vendors. The Intertribal Council of Arizona, Inc. participated in the statewide breastfeeding strategic planning session as part of the efforts to promote breastfeeding in the state.

Bureau of Tobacco Education and Prevention (TEPP)

This year, TEPP is working with 9 Tribal Nations, 3 Urban Indian Health Centers, and the Inter Tribal Council of Arizona (ITCA) to deliver tobacco education and prevention services targeting American Indians in Arizona, through contracts totaling more than \$1.3 million. The following is a listing of these tribal and Urban Indian entities:

- Colorado River Indian Tribes
- Gila River Indian Community
- Hopi Tribe
- Hualapai Tribe
- Kaibab Paiute Tribe
- Native Health (Phoenix)
Native Americans for Community Action
(Flagstaff)
- Pascua Yaqui Tribe
- Salt River Pima-Maricopa
Indian Community
- Tucson Indian Center
(Tucson)
- White Mountain Apache
Tribe
- Yavapai Apache Nation

All but one of the tribal/urban contractors have subcontracts through ITCA. All of the American Indian programs provide services to their individual communities. The individual tribes provide services on the reservation, while the Urban Centers target American Indians living in the three major cities in Arizona (Phoenix, Tucson and Flagstaff). In general, these services include: school-based and after-school programs using the Get Real About Tobacco and Project Alert curricula, that incorporate information about traditional tobacco use as appropriate; second hand smoke education through targeted outreach and community events; in some communities this includes education on the importance of smoke free policies for public spaces; cessation classes and individual cessation services; and general tobacco education through community outreach events and health fairs.

In addition to the ongoing services provided in these tribal communities, TEPP has been working closely with ITCA to develop a Youth Tobacco Survey, that would be conducted by the Urban Indian Health centers as well as the tribal programs that choose to implement it. This survey would gather valuable data about American Indian youth attitudes and behaviors as it relates to both commercial and traditional tobacco. In June of 2007, the first American Indian Tobacco Cessation and Health Conference, was held in Sedona, sponsored in-part by TEPP. This conference provided an opportunity for individuals working on tobacco and other health issues within the Native American community to come together and learn from various speakers and presenters, as well as from each other. Workshop topics included: tobacco basic skills training, Smoke Free

Arizona, oral health and chewing tobacco, the Counter Strike program to reduce youth access to commercial tobacco, keeping tobacco sacred, and more.

Per the new Smoke Free Arizona law, many tribal communities are exploring similar policies in their communities to reduce exposure to second hand smoke. The Hopi Tribe has been particularly successful in educating community members about the harmful effects of second hand smoke, and generating interest and support in developing policy to prevent it. Currently, they have a “no smoking 20 feet from the entrance” policy in businesses and are looking at extending this to fifty feet. In addition, they are meeting with their village Tobacco Clans on the use of commercial tobacco in their kivas.

Bureau of Epidemiology and Disease Control

Staff from the Arizona Department of Health Services, the US Centers for Disease Control & Prevention and from Pima County Health Department have been working with the IHS and tribal health personnel to conduct public health interventions to control a syphilis outbreak that has been occurring on the Tohono O’odham Nation. Interventions include treatment, contact tracing, analysis of risk factors among other public health measures. The level of teamwork has been impressive, and the team expects to see lower rates of syphilis by the end of the year.

Bureau of Emergency Preparedness and Response

The US Centers for Disease Control & Prevention has funded the ADHS for several years to help improve overall public health readiness to respond to outbreaks and other public health disasters. The ADHS funds tribal partners through this cooperative agreement to build public health infrastructure and capacity. The CDC Cooperative Agreement for the 07/08 Fiscal year has not yet been announced; however the CDC has indicated that funding levels for this fiscal year will be slightly lower than this year. The ADHS works with its tribal liaison, Michael Allison and the “Tribal Collaborative Team” to ensure that tribes have input into the grant application and funding.

Bureau of Oral Health

A HRSA dental workforce grant on tele-dentistry is being piloted on the Hopi Indian Reservation in elementary schools. The goal is to reduce the out of classroom time for the students and to provide preventive dental care with referral to dentist for extensive dental services. Oral health train-the-trainer tool kit and training was provided to Navajo Nation Head Start in Gallup New Mexico. Oral Health trained pediatricians and their staff on basic dental screening technique for the White Mountain Apache service unit. Bureau staff continued to work with key stakeholders on the solution to dental care provider shortage for Native Americans. Discussions include the Arizona Dental Association on their

new Community Dental Health Coordinator program, the Alaska Dental Health Aide Therapist and the licensed dental hygienist.