# JANUARY—MARCH, 2017 CALIFORNIA AREA INDIAN HEALTH SERVICE



# Quarterly highlights

The California Area IHS reports its accomplishments during the second quarter of FY 2017, in alignment with the agency's priorities:

- 2. Improving How We Deliver Service
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- 4. Strengthening Management
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# Assessing Care...

# Government Performance and Results Act (GPRA)/GPRA Modernization Act (GPRAMA) Update

As of the second quarter of FY 2017, the California Area has met the targets for 9 of the 27 GPRA/GPRAMA performance measures, and is within range of meeting three additional measures. Of the 9 measures that have been met as of 2<sup>nd</sup> quarter, 6 of those measures have baseline targets in FY 2017, meaning all health programs will meet those measures this year. To assist California tribal and urban Indian healthcare programs meet 2017 performance measure targets, during the second quarter of FY 2017, the IHS/CAO:

- Hosted a California Area webinar session on March 23 for California tribal and urban Indian health programs. The webinar featured FY 2017 California Area 2<sup>nd</sup> Quarter GPRA results, updates on CAO FY 2017 improvement strategies, and a presentation on GPRA improvement strategies health programs can use to improve GPRA performance in the final quarter of FY 2017. Twenty-five California healthcare program staff attended the session.
- Hosted one national webinar training sessions for all IHS, tribal, and urban Indian healthcare programs on January 19. The training session focused on Depression Screening in adults and youth.



All of the national and California webinars were recorded and posted on the California Area GPRA/GPRAMA Portal, located at: <u>http://www.ihs.gov/</u> california/index.cfm/member-portal/cao-gpra-gprama/gpra-toolkit/

# Improving How We Deliver Services...

#### **Youth Regional Treatment Centers**

On March 1, 2017 the grand opening of the Desert Sage Youth Wellness Center in Hemet was held. The 35,355 square foot youth regional treatment center (YRTC) will provide a mental, spiritual health environment, which is rooted in culture to meet the needs of the native communities served. Services will include: clinical evaluation; substance abuse education; group, individual, and family psychotherapy; art therapy; adventure-based counseling; life skills; medication management or monitoring; evidencebased/practice-based treatment; aftercare relapse prevention; and post treatment follow-up services. Desert Sage was designed for sustainability and is Leadership in Energy and Environmental Design (LEED) certified.





Interior features include classrooms, computer lab, art room, commercial kitchen, dining area, cultural space, exam rooms, employee offices, five family suites, indoor half -court gymnasium, and weight room. The residential unit is divided into four separate quadrants and is designed to house 16 male and 16 female residents, age 12-17. Exterior features include an outdoor basketball court, walking/ exercise trails, and an outdoor water feature/amphitheater. Continued progress is taking place on Sacred Oaks Healing Center in Davis the second YRTC in the California Area, which is estimated to be completed in early 2019. The YRTCs are an important step to helping Native American youth in California in need of residential care.

# Addressing Behavioral Health Issues...

#### Youth Regional Treatment Centers (YRTC)



The Desert Sage Youth Wellness Center remaining construction activities included the commissioning of the water treatment plant anticipated to be completed by April 2017 and the expansion of the drain field anticipated to be completed before the end of the year. The water treatment plant construction was completed in March 2017 and includes the installation of a packaged water softener system, a chlorinator, and an all -weather enclosure.



The Sacred Oaks Healing Center design-build contractor selection is progressing, with final selection anticipated by the end of April. Preliminary design work completed during the first quarter, included the drainage and traffic impact studies.

#### **Injury Prevention Mini-Grant Program**

The injury prevention mini-grants were awarded by the Division of Environmental Health Services during this quarter. The funding will support Tribes, Tribal Organizations and Tribal Health programs in purchasing bicycle helmets, child passenger safety seats and smoke detectors. All grantees received a notice of award letter on March 5, 2017. To expedite the communication of this information, an electronic version of the letter was also distributed through email to all tribal contacts associated with the funded projects.

# Strengthening Management...

#### **Sanitation Facilities Construction Program**

The SFC Program continues to collaborate with Tribes to update the Sanitation Deficiency System (SDS); which is an inventory of water, sewer, and solid waste needs for existing Indian homes and communities. Under the Indian Health Care Improvement Act, the IHS is required to maintain inventories of sanitation deficiencies, to prioritize those deficiencies, and to annually report them to Congress for funding. Typically, the California Area receives \$2-3 million each year for sanitation projects to address these needs. Of the many critical aspects to update and manage SDS, the timeline requirements and Tribal consultation are outlined below.

The table below presents a summary of critical due dates and a typical timeline of important activities related to SDS. The IHS staff provides support to the Tribes in order to develop, sort, and prioritize SDS projects. This is accomplished by a variety of means including field visits, site investigations, meetings with utility and environmental directors, and presentations to the Tribal Council. Documentation of the Tribe's priorities is required, and is submitted with the SDS projects. The general process to consult with Tribes to share, review, and update the annual SDS data is then summarized.

Timeline 2017-2018	Activity
02/01-06/01	District staff review, develop, and update SDS projects and consult with Tribes
06/01-06/30	District Engineer reviews SDS data
07/01	District Engineer submits SDS to Area Office
07/01-07/31	Area Office reviews SDS data
08/01	Area Office submits SDS to Headquarters
08/01-12/31	Headquarters reviews, requests additional supporting information, finalizes SDS annual update, and performs official snapshot report for Congress.
01/01-04/01	Based on SDS data, Headquarters provides Regular Fund allocation to Area Offices, and Area Offices fund projects from the SDS list (e.g. create PDS projects).

# **Bringing Health Care Quality Expertise** to IHS

#### **Patient Care Initiative**

To equip healthcare providers and their patients with information and tools to help keep blood pressure under control, the IHS California Area Office (CAO) Chief Medical Officer (CMO) initiated a collaboration with the American Heart Association (AHA) to promote their Target: BP initiative. The initiative aims to prevent the progression of hypertension to other serious threats to heart and brain by controlling blood pressure. An estimated 13.7% of patients receiving services at tribal and urban programs using RPMS are currently diagnosed with hypertension, which represents 5998 individuals. The CAO CMO is currently working with Chapa De Indian Health, Riverside San Bernardino County Indian Health, and Toiyabe Indian Health who are implanting the Target: BP initiative. Additionally, leadership from the Sacramento Native American Health Center (SNAHC) meet with AHA staff, and community participants to discuss efforts aimed at more thoroughly addressing hypertension through home visits. Future plans are for the CAO CMO to work with 17 tribal program and 8 urban additional programs who have also expressed interest in learning more about the initiative. This initiative is anticipated to help tribal and urban programs make great progress by working collaboratively through this robust program.



#### **YRTC Aftercare Evaluation**

Progress on evaluation aftercare continued with 24 sites assessed, and an additional 13 sites to be assessed in California. When completed all California sites will have been assessed for their capabilities and services offered. Screening/Identification Current Findings:

- 'A total of 8,398 youth were served at the facilities
- 4,356 Female youth served
  - 25.05% screened for alcohol use
- 4.38% screened for drug use
  - 4,042 Male youth served 19.94% screened for alcohol use 4.82% screened for drug use

# **Engaging Local Resources...**

#### **Health Facilities**

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Tuolumne Me-Wuk Indian Health Center, recently renovated 3,000 square feet of space to accommodate 9 new dental operatories.

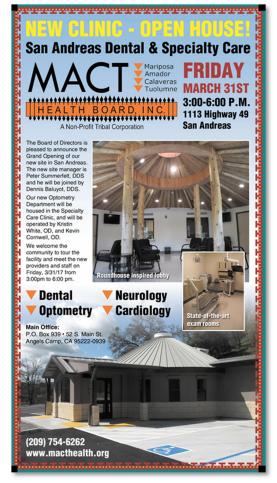
Susanville Indian Rancheria Health Center, selected a site recommended by the IHS Health Facilities Engineering for construction of their proposed health care facility pending funding for a design-build approach.

MACT Health Board - San Andreas Dental and Specialty Clinic Renovation and Addition, project for renovation and expansion was completed late 2016 with an open house held on March 31, 2017. The renovated and expanded building will provide services that includes dental, optometry, neurology, and cardiology. The project encompasses the construction and installation of 3,887 square feet of renovation work and 1,521 square feet to new addition to the existing building. The project also include site work to provide additional parking and handicap accessible parking spaces.

The building improvements provided space for:

6 dental operatories,
3 exam rooms,
1 nurse station
4 offices,
Rooms for sterilization, laboratory, storage,
Patient and staff restrooms,
Staff lounge, and
Areas for reception and patient waiting.





#### **Environmental Health Portal**

To improve program awareness and the quality of our services, the California Area Division of Environmental Health created a portal on the California Area website which went live in March 2017. The portal provides our tribal partners and facility contacts important information about the services available through our program as well as numerous relevant references and resources. The portal is expected to improve the efficiency by which our staff can share public health information with the tribes we serve and increase accessibility to the resources that have been developed by our program. The portal can be found at: <a href="https://www.ihs.gov/california/index.cfm/member-portal/">https://www.ihs.gov/california/index.cfm/member-portal/</a>

# **The California Area Welcomes**

The California Area Division of Environmental Health Services welcomed Alyssa Bernido to our team on March 20<sup>th</sup>. Ms. Bernido been assigned to the Clovis Field Office – This is the first time an environmental health position has been located in Clovis and this (



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