

Tribal Self-Governance Advisory Committee Update

PRESENTATION BY:

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OUTLINE

1. FINANCING A COHESIVE VISION
2. RECRUITING AND RETAINING THE BEST
3. ACCESS TO HEALTH SERVICES FOR ALL
4. FENTANYL - ANOTHER CRISIS FOR A FRAGILE SYSTEM
5. PROGRESS



The Vision

- Federal Trust Obligation: “The purpose behind the trust doctrine is and always has been to ensure the survival and welfare of Indian tribes and people. This includes an obligation to provide those services required to protect and enhance tribal lands, resources, and self-government, and also includes those economic and social programs which are necessary TO RAISE THE STANDARD OF LIVING AND SOCIAL WELL-BEING OF THE INDIAN PEOPLE TO A LEVEL COMPARABLE TO THE NON-INDIAN SOCIETY (US Department of Health & Human Services “*American Indians and Alaska natives – The Trust Responsibility*).”
- To THRIVE, not just SURVIVE

Funding

- Inadequate IHS Funding: Forces Tribes to piecemeal revenue streams, thus threatening the opportunity for Tribe's to determine and carry out their own goals and objectives
- Grant Funding Troubles:
 - Goals and objectives of grants create siloed and fragmented programming
 - Are not sustainable by their very nature
 - Competitive grants can pit Tribes against each other
 - Deviate from the fact that compacts should be increasing in size, not insecure funds
 - Demonstrate lack of commitment to both providers and patients
- Third Party Revenue:
 - Advocating together for CSC on third-party revenues, which would tremendously benefit Tribes
 - The 9th Circuit Court of Appeals concluded the plain language of section 5325(a) appears to include CSC reimbursement of third-party and revenue funded portions of a Tribe's healthcare program.
 - In the 10th Circuit of Appeals, it was determined the Tribe's costs are directly attributable to the contract.
 - "The government cannot pay less because of program income, which the statute requires to be injected back into the Tribe's program which itself only exists because of the IHS contract."

Recruitment and Retention

- Recruiting and retaining healthcare workers is becoming an ever-increasing threat to providing tribal health services, even more so in rural areas
- Workforce Shortages:
 - COVID19 crippled a fragile system; temporary funding hid how bad the situation is
 - IHS has a shortage of workers and is not able to provide needed reinforcements
 - The cost of locums has increased tremendously after COVID19, with nurses at \$150+ / hr and providers at \$250 + / hr
 - Paying high locums wages leads to disparities and friction with permanent staff
 - Dependence on locums impairs continuity of care
 - Short staffing leads to additional burnout among staff
 - Administrators are concerned about the liabilities of operating in sub-optimal conditions

Recruitment and Retention

- Rural, and even urban clinics, are feeling the pressure of all that must be done to achieve full staffing
- What it takes to recruit when providers can go anywhere:
 - Housing that will attract a provider and their family
 - Schooling that will entice professionals to raise their families
 - Flexible schedules allowing for travel and balance of life
 - Wages that are higher than what anywhere else can offer
 - Incentives (examples)
 - A community effort
 - Tribes must go above and beyond to keep pace
 - The full support of IHS, particularly for smaller and rural tribes without established infrastructure

Health Service Access to All

- IHS has no hospital in California (Regional Specialty Center)
- Appropriate PRC funding to access needed services and not strain or stress the patient (lodging, gas, food)
- Ambulance / EMS funding for Tribes desiring to carry out life-saving health services
- Housing and long-term care for the elderly
- Hospice and palliative care
- Basic water and sanitation, the backbone of public health
- Health is not merely what occurs in the clinic

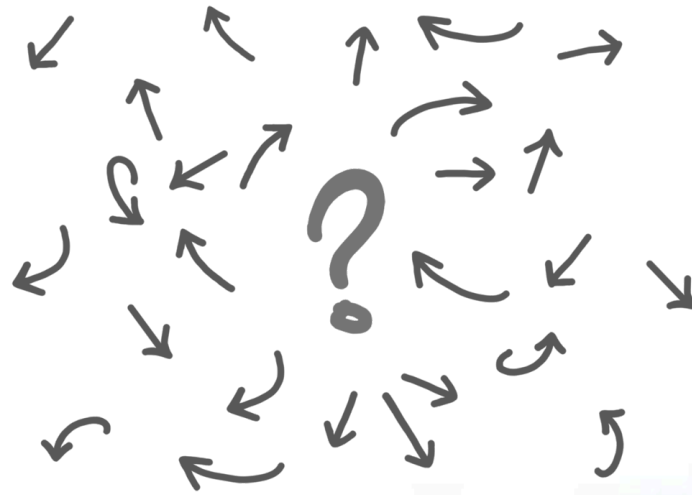
Fentanyl – Yet Another Crisis

- What would happen if we treated the opioid crisis like COVID19?
- Fentanyl:
 - Sharp increases in overdoses, but also deaths
 - Naloxone not working as it had
 - Shortage of beds and services
 - Need for local detox
 - Self-medication is a symptom of deeper traumas that must be addressed
 - Stressing a health system ill equipped to handle basic health services

Progress

- IHS Director Tso Appointment
- Presidential Budget
- Advanced Appropriations
- IT Modernization
- Section 105(l)
- Quarters Programming
- A house divided cannot stand: Partnering with Tribes and IHS in the joint mission of optimal health for all Tribes

Questions & Feedback



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