Greetings to the Tribal Injury Prevention Cooperative Agreement Program Team! We present to you the TIPCAP March 2014 Newsletter.

Every quarter, we highlight program successes from each TIPCAP area. This quarter’s newsletter features highlights from the TIPCAP sites in the Albuquerque and Phoenix Areas.

Reno-Sparks Indian Colony, NV

INCREASING STRENGTH AND BALANCE TO PREVENT ELDER FALLS

Reno-Sparks Indian Colony (RSIC) is a Federally recognized Indian tribe located near Reno and Sparks, Nevada. One primary area of focus for the RSIC TIPCAP program is elder unintentional fall prevention. The Centers for Disease Control and Prevention reports that falls are the leading cause of fatal and nonfatal injuries among older adults. Furthermore, the National Resource Center on Native American Aging reports that in a survey of more than 18,000 elders age 55 years and older, 40.3 percent reported falling in the past year, as compared to the national average of 30 percent for elders age 65 years and older. Injury Prevention Coordinator Carrie Brown implemented a 12-week Tai Chi course for all elders in the community. Tai Chi was chosen because it is a low-impact activity that is enjoyable and suitable for elders to participate in three times a week and because elders expressed interest in the activity during the injury prevention presentations held monthly at the Senior Center. Ms. Brown received her Tai Chi certification through the Tai Chi

Continued on page 2.

Elders participating in a 12-week Tai Chi course.
Moving for Better Balance program, which is associated with the University of San Diego. The Tai Chi course started out with 14 attendees but ended with 6 regular attendees. The course used the Tinetti Gait and Balance System, which includes a 5-minute pre- and post-assessment that measures several factors associated with balance and walking, such as “Can a person stand up from a chair without using one’s arms and/or hands for support?” and “Can a person stand with their eyes closed for 10 seconds without swaying?” One elder could stand straight and still for only 3 seconds during pre-assessment but increased the time to 10 seconds during post-assessment. Table 1 shows pre- and post-assessment scores; the maximum score is 28 points. The average score is approximately 21 points during pre-assessment; the post-assessment shows a 13.5 percent increase in scores. The RSIC TIPCAP plans to conduct another Tai Chi course in Hungry Valley, NV to increase participation since the course has proven effective in helping improve balance and gait, which ultimately prolongs independence for elders by preventing falls.

<table>
<thead>
<tr>
<th>Participant #</th>
<th>Initial Score</th>
<th>Follow-up Score</th>
<th>Percent Change</th>
</tr>
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<tbody>
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<td>Participant 1</td>
<td>25</td>
<td>24</td>
<td>4.0</td>
</tr>
<tr>
<td>Participant 2</td>
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<td>22</td>
<td>26</td>
<td>18.2</td>
</tr>
<tr>
<td>Participant 5</td>
<td>21</td>
<td>23</td>
<td>9.5</td>
</tr>
<tr>
<td>Participant 6</td>
<td>16</td>
<td>22</td>
<td>37.5</td>
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<td>AVERAGE</td>
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<td>24</td>
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</tr>
<tr>
<td>TOTAL</td>
<td>126</td>
<td>143</td>
<td>13.5</td>
</tr>
</tbody>
</table>

Table 1: RSIC Tinetti Pre- and Post-Assessment Scores

For more information, contact:
Carrie Brown
Injury Prevention Coordinator
Reno-Sparks Indian Colony
Reno-Sparks Tribal Health Center
1715 Kuenzli
Reno, NV 89502
Phone: (755) 329-5162, ext. 1929
Email: cbrown@rsicclinic.org

Reference:
Greetings TIPCAP Coordinators,

We have emphasized the need for effective evaluation throughout the years. It is important to review your evaluation plan each year to improve or modify it so that activities are still on target to reach the desired outcome. Evaluation is an essential part of the TIPCAP program structure and will be emphasized in Year 4. Program evaluation should be incorporated to guide the TIPCAP program’s injury data collection efforts, including program indicators such as seatbelt use, child safety seat use, and home assessments. Evaluation can improve your program and also serve as an important aspect in sustainability; a program that reports successful accomplishments will be more likely to receive attention from Tribal leadership or management. The evaluation plan can demonstrate accountability by sharing the program’s results in increasing seatbelt and child safety seat use, reducing elder falls, and so on. Program evaluation can also help to assess challenges or barriers in accomplishing tasks. If you need further guidance on program evaluation, please contact the Econometrica Team or IHS project officer.

Sustainability is the overarching theme for the upcoming 2014 TIPCAP workshop in Nashville, TN. The webinar on March 18, 2014, will present key issues in increasing the capacity of the program and community to continue services when funding is no longer available. In order to work toward this goal, the webinar will include an assignment to coincide with the workshop activities. The workshop will provide information on data, evaluation, partnerships, proposal writing, and more to integrate sustainability planning into program activities for Year 5. Sustainability is a process that should be assessed as part of the overall readiness of a community.

I look forward to seeing you all in Nashville on April 30 to May 1, 2014.

Ahe’ bee’, Thank you,

Nancy M. Bill
MPH, CHES; CAPT USPHS
Injury Prevention Program Manager, Indian Health Service
OEHE-EHS-TMP 610
801 Thompson Ave., Suite 120, Rockville, MD 20852
Desk phone: 301-443-0105; Fax: 301-443-7538
E-mail: nancy.bill@ihs.gov
The Colorado River Indian Tribes (CRIT) set a goal to reduce motor vehicle crash-related childhood injuries by increasing the use of child passenger safety (CPS) restraint use by 5 percent. To address CPS, CRIT IP activities include child safety seat training, distribution of safety seats, and collaborative CPS check-up events with the La Paz County Health Department, CRIT Community Health Representatives, the CRIT Tribal Motor Vehicle Injury Prevention Program, and the Indian Health Services Office of Environmental Health Services. Additionally, in collaboration with IP partners, the site provides monthly CPS classes to educate parents and caregivers on the proper use and installation of child restraint systems and seat belts. Through these training sessions, CRIT IP conducts pre- and post-test surveys to evaluate the knowledge of the participants. Based on the results of the latest session, there was an average increase from the pre-test (39 percent) to the post-test (88 percent). Overall, 49 percent of attendees gained better knowledge and understanding of CPS and the proper installation of car seats. In addition to this, in Year 3, the CPS observation survey results indicate that the overall car seat usage rates increased from 15 percent (baseline) to 57.4 percent.

CRIT IP uses media to promote car seat awareness in the community. CRIT submitted CPS articles in the Head Start newsletter to present resources on car seat safety and attract attention from Tribal leaders. The newsletter reaches the families of more than 150 students. In addition, the Manataba Messenger, the official publication of the CRIT, highlights articles encouraging the use of car seats and awareness of the Tribal, Arizona, and California safety seat laws. CRIT has developed a 60-second media advertisement that focuses on the IP program and is aired in the Tribally owned multiplex theater on a daily basis prior to showtime. This ad reaches approximately 300 people per month.

As a result of CRIT activities, the site continues to demonstrate remarkable impact on injury prevention with respect to CPS in the community. As a means to ensure program sustainability, IP Coordinator Jaymee Moore attended the Navajo Area’s IP Level 1 course in New Mexico and is also now certified as a CPS Technician.
The Hualapai and Havasupai Tribal Injury Prevention Program (HHTIPP), located in NW Arizona, goal is to increase adult restraint usage rates for both communities by 20 percent over the 5-year Cooperative Agreement period. Since the program’s inception, the grantee has conducted a total of 18 seat-belt observations that resulted in a total of 2,206 vehicles surveyed. The observations revealed that 1,602 drivers and 391 passengers were restrained. As a result of HHTIPP activities, the seat-belt usage rate has increased 149 percent since the start of the program. In Hualapai, based on the observation survey results, the overall seat-belt usage rate in Year 1 (2011) was 37.5 percent. In Year 2 (2012), the usage rate increased to 73.8 percent, and in Year 3 (2013), the overall usage rate grew to 93.7 percent.

Additionally, in Havasupai, there has been significant improvement in the seat-belt usage rate, increasing from 60 percent in Year 1 to 90.5 percent in Year 3. The data supports evidence that the injury prevention program has made an impact in the community’s safety. The HHTIPP has demonstrated success in increasing occupant restraint usage through education, outreach efforts, and law enforcement activities. Moreover, the Hualapai Tribal Council has approved the passage of the child occupant restraint law, matching that of the Arizona State law. The HHTIPP will continue to conduct ongoing community education and car-seat distribution events to ensure the safety of the Hualapai and Havasupai children.

The HHTIPP has successfully established partnerships with the Hualapai Police Department and the Inter Tribal Council of Arizona to conduct checkpoints and seat-belt observational surveys at various sites on the Hualapai and Havasupai Reservations. The checkpoints conducted on Indian Route 18 and Route 66 have positively impacted and increased seat-belt restraint use and car-seat safety awareness in both communities. The observations help the communities be aware of the importance of keeping their seat belts on at all times. Throughout the grant, HHTIPP has improved seat-belt use in the Hualapai and Havasupai communities and has effectively achieved TIPCAP’s goal of increasing seat-belt use by 5 percent. Given this accomplishment, HHTIPP is hopeful that it will garner support from tribal leaders for a focus on maintaining high seat-belt usage rates.

Hualapai Reservation Tribe: Adult Restraint Increase

<table>
<thead>
<tr>
<th>Year</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
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<tbody>
<tr>
<td>Year 1</td>
<td>37.5%</td>
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<tr>
<td>Year 2</td>
<td>73.8%</td>
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</tr>
<tr>
<td>Year 3</td>
<td>93.7%</td>
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This graph summarizes the results of 2011–2013 Hualapai Tribe seat-belt use observational survey.
Falls is the leading cause of hospitalization for many American Indian/Alaska Native (AI/AN) communities. The Quechan Indian Tribe (pronounced kwuh-tsan) has developed a comprehensive elder fall prevention program. Lisa Aguerro serves as the IP Coordinator. The IP program goal is to reduce fall-related injuries among their elder population, ages 55 and older. The IP program is actively involved with activities contributing to the implementation of evidence or evidence-based interventions as well as the heightened awareness of the issue of elder falls. The Quechan IP partners with various tribal and IHS programs to offer services in home safety, vision screening, medication management, exercise training, and fall education. Each of the service areas has a significant elder participation rate and is consistent with the overarching program goal.

Quechan currently has 106 out of 120 (88 percent) elders participating in more than one of the service areas in the program. With respect to the home safety assessments, identifying elders to participate has been a barrier. To overcome this challenge, elders are able to conduct self-assessments and the site subsequently enters the homes for full assessments and designated repairs. In the past year, the site conducted more than 10 home assessments for fall risks, and the issues were resolved on site within a week of the assessment. IP partners with the Quechan Community Health Representatives (CHRs) to conduct in-home medication inventories of all prescribed and over-the-counter medications to identify any possible negative interactions or duplications. They utilize the Medication Management Improvement System (MMIS) software developed by the Partners in Care Foundation to conduct the inventories during home visits. Thus far, 26 elders have had their medications checked; IP’s goal is to reach 50 percent (n=60) of the elders by the end of Year 5. Moreover, Quechan’s Fit for Life Club has resulted in tremendous success within the exercise component. Fit for Life includes walking, yoga, and water aerobics. The program collaborated with the Special Diabetes Project and the Senior Center to promote and conduct exercise activities. In addition, Fit for Life participated in the successful Senior Olympics event, which consisted of 50 Quechan tribal members and more than 200 members from other tribes. Quechan has met its goal of 40 percent for elder participation in the Fit for Life program. The Quechan IP is in the planning stages for its 7th Annual Elder Fall Prevention Day, during which all the partners provide education, examples of services, and sign-up opportunities for future participation. Along with the fall prevention partners, many other health-related programs also participate in the event.

The Quechan IP has developed strong partnerships with many programs including the Tribal Council, which has shown a heightened interest and support of injury prevention activities. Since 2013, Lisa has provided monthly presentations to the Tribal Council; this effort encourages both collaboration and program sustainability. She continues to foster and produce relationships with tribal representatives, community health programs, and IHS to achieve the long-term goals of the Injury Prevention Program.
Falls are a major risk and can cause physical injury, immobility, depression, social isolation, nursing home placement, and death among elders nationwide (CDC, 2008). The Gila River Injury Prevention Program (GRIPP) aims to decrease the number of fall-related injuries by implementing a home safety assessment program, a medication management referral system, and the Matter of Balance program and by providing an Alert One unit to eligible applicants.

A recent success of the site’s elder fall prevention program is the implementation of the Alert One Program. The grantee has established a collaborative partnership with Gila River Telecommunications, Inc. (GRTI), and has effectively executed the Alert One Program in their community. Installation and maintenance of the devices are completed by GRTI, while GRIPP provides the Alert One units and conducts home assessments and follow-up services.

The Alert One Program features a home safety device that can be worn by clients in and around their homes. Should an elder experience a fall, the button on the client’s pendant or unit can be pushed to contact 911. Research studies show that emergency notification units decrease the time between falls and medical response, which could help minimize long-term injuries for elders (Alert1 Medical Alert System, 2014). GRIPP is the only TIPCAP site providing the Alert One service to elders of the community. The site has developed training tools and an Alert One process flow to educate key partners to assist with delivering the program. Thus far, the site has received 104 Alert One referrals, which include requests for replacements of pendants and defective units.

Additionally, the site has purchased 110 devices and installed 48 Alert One units in elders’ homes. GRIPP and their partners—GRTI, the Gila River Health Care Public Health Nursing staff, Case Managers, the Housing Program, Tribal Social Services, and the Elderly Liaison Program—continue to collaborate effectively to monitor the Alert One Program and improve service delivery. To evaluate the performance of the program, GRIPP has designed a Customer Satisfaction Survey to collect elders’ feedback and comments on the effectiveness of the Alert One Program services. GRIPP continues to strive to provide exemplary services and training in elder falls prevention to reduce hospitalized falls by 5 percent.

Reference:

Policy is an effective strategy for injury prevention, especially concerning seatbelt use. Since 2004, the San Carlos Tribal Police Department (SCTPD) has sponsored the Motor Vehicle Injury Prevention (MVIP) program, and since 2010 the San Carlos Apache TIPCAP program has strengthened efforts to increase occupant restraint use. While the MVIP program’s initial focus on DUI was successful in reducing motor vehicle crashes and associated injuries and fatalities, occupant restraint use remained low. TIPCAP Injury Prevention Coordinator Christine Reede and SCTPD championed the “Safety Belt and Child Passenger Restraint Law,” which took effect on January 1, 2012. It is important to note that efforts to draft and advocate for the law’s passage began in 2000.

The San Carlos Apache site understands the importance of data in demonstrating program effectiveness, and the site developed a plan to measure seatbelt use via observational seatbelt surveys before and after the law was enacted. During the months of October through December 2011 (before enactment of the primary seatbelt law), seatbelt use was measured at 14 percent. Observational surveys conducted during the 3-month enforcement grace period (February through April 2012) measured seatbelt use at 30 percent. Starting in May 2012, the primary seatbelt law was fully enforced. Observational surveys conducted from May through December 2012 found that seatbelt use had increased to 43 percent (Figure 1). Overall, the TIPCAP site reported a 207-percent increase in seatbelt use in just over 1 year!

In addition to seatbelt observations, police staff members were trained and educational activities were implemented to increase the Tribe’s awareness of the law and the importance of vehicle occupant restraint use. In 2013, the first year after the law was enacted, seatbelt use was measured at 47 percent. The picture below shows a billboard funded by the Bureau of Indian Affairs that serves as a reminder to drivers and occupants of the need to use seatbelts. Future TIPCAP program initiatives such as a media campaign are being developed to complement law enforcement and increase motor vehicle safety.

Reference:
2 Observational seatbelt surveys measure driver and front-seat passenger seatbelt use, collectively referred to as “seatbelt use.”
he Jemez Injury Prevention Program (IPP) has numerous initiatives focusing on various areas such as fall prevention, car restraint compliance, home safety assessments, and the Ride Safe and Sleep Safe programs. Maria A. Benton is the Program Manager and works with Antonio Blue Eyes and Marlon Gachupin, who assist with injury prevention program implementation such as car restraint use surveys.

Education is a key component of the Home Safety Assessment. Information on fall prevention is provided to elders to inform them that exercise, proper lighting, removal of tripping hazards, and medication and vision checks can help prevent falls. Elder patients aged 55 to 100 years from the Jemez Comprehensive Clinic are referred to the IPP. The number of patients seen at the clinic in 2011–2012 for fall injuries was 80, of which 18 were elderly. In 2012–2013, 106 patients were seen for fall injuries, and 14 were elderly, which indicates a slight decrease in fall-related injuries. Recently, IPP conducted an assessment for an elder who was referred to IPP by the clinic social service worker. This patient was having mobility issues in the home, so we surveyed all walking spaces to ensure there were no potential fall risks. A grab bar was placed on the doorframe of a small step to assist the patient to prevent tripping. Grab bars were also placed in the bath/shower and toilet rails were added. The IPP collaborates with the Tribal Housing to install handicap ramps.

Ride Safe and Sleep Safe are programs provided to the Walatowa Head Start Students. Smoke alarm installation, education, and assistance with a fire escape plan are parts of Sleep Safe. The IPP installs booster seats and educates students and parents on the importance of using child restraints for Ride Safe. In 2011–2012, the baseline for child restraint use was 39 percent, and the baseline for adult seatbelt use was 64 percent. The current child restraint use rate for Jemez is 71 percent, and the seatbelt use rate is 86 percent. Thanks to the Jemez Police Department for enforcing the Tribal traffic codes.
The San Felipe Injury Prevention (IP) Program has undertaken many IP initiatives in the past year, including home safety assessments, fall prevention, and occupant restraint use promotion and enforcement. Several home safety assessments have been conducted for elders referred by local clinic staff. After identifying various fall hazards inside and outside the elders’ homes, various fall prevention devices (some funded by the IP Program) were installed by the Housing program, including grab bars, toilet rails, tub rails, night lights, and ramps.

In addition to fall prevention equipment installation, local elders and their caregivers have been provided with fall prevention education materials highlighting the importance of exercise, lighting, tripping-hazard removal, medication checks, and vision checks. In addition, the IP Program has provided education to elders on several topics, including fire safety, home safety, winter carbon monoxide prevention, elder abuse prevention, ditch and water safety, and holiday safety.

The San Felipe IP Program has energetically promoted occupant restraint use at San Felipe Pueblo and since 2009 has operated 1 of 41 Child Safety Seat Distribution Program sites throughout New Mexico, supported and supplied by the New Mexico Department of Transportation. This helps serve car seat needs of both local residents and nearby communities. To further promote local occupant restraint use, the IP Program has worked effectively with multiple local agencies to operate the San Felipe Injury Prevention and Safety Coalition. Organizing local agencies to coordinate occupant restraint promotions, the IP Program also collaborated with Bureau of Indian Affairs law enforcement and local high school students to conduct seat belt/car seat use surveys and enforcement. This has helped raise observed driver seat belt use from 22 percent in 2010 to 52 percent in 2012, and a police-monitored survey in 2013 pushed driver seat belt usage to 83 percent. The IP Program continues to promote the passage and enforcement of Tribal infant/child car seat use legislation to help further protect the most vulnerable members of the San Felipe community.

The new IP Program Coordinator is Alvino Lovato. He will soon renew his Child Passenger Safety Technician certification and has quickly developed active contacts with the local Housing Department, Senior Citizen Program, and other departments.

For more information, contact:
Alvino Lovato
Injury Prevention Coordinator
Pueblo of San Felipe Injury Prevention
P.O. Box 4339
San Felipe Pueblo, NM 87001
Phone: 505-771-9900 ext. 1107
Email: alovato@sfpueblo.com
T

he Great Plains Tribal Chairmen’s Health Board, Great Plains Ride Safe Child Passenger Safety Program established a meaningful and productive partnership with the State of South Dakota’s Child Safety Seat Distribution Program. Through this partnership, the Great Plains Ride Safe Child Passenger Safety Program is able to provide child safety seats at no cost to families residing in the 13-county region in western South Dakota, also known as Region 1: West. Please see the map for the counties.

South Dakota’s Child Safety Seat Distribution Program is a statewide collaboration among the South Dakota Department of Public Safety, Office of Highway Safety, Department of Social Services, Child Care Services, and Governor Dennis Daugaard. South Dakota’s Child Safety Seat Distribution Program focuses on keeping children safe by providing child safety seats at no cost to families that meet income eligibility requirements to ensure that children are in the best child safety seat for their height and weight until they are at least 4’9”, when most children can safely wear a seatbelt. In addition the program provides education to parents and caregivers in proper installation and appropriate use based on the child's age, height, and weight. Child Passenger Safety Instructor Gina Yellow Eagle provides parents and guardians with hands-on education and assistance regarding their child safety seat as well as follow-up visits with education to participating program families.

As a result of this partnership, the Great Plains Ride Safe Child Passenger Safety Program is able to provide child safety seats to participating families at the Rural America Initiative’s Prenatal to Five Head Start Program sites.

For more information, contact:
Gina Yellow Eagle
Injury Prevention Coordinator
Great Plains Ride Safe Child Passenger Safety Program
Great Plains Tribal Chairmen’s Health Board
1770 Rand Rd
Rapid City, SD 57702
Phone: (605) 721-1920 ext.112
Email: gina.yelloweagle@gptchb.org

Reference:
The TIPCAP Advisory Committee meets every second Monday of the month by conference call to discuss and address current issues. The TIPCAP Advisory Committee serves as a vital link between TIPCAP grantees and IHS. Currently the committee is providing guidance in the planning for the upcoming 2014 TIPCAP Annual Workshop. Please feel free to contact your local committee member for discussion topics.

ABERDEEN
Pam Pourier
Oglala Sioux Tribe
Department of Public Safety
605-867-8167
ppourier@ostdps.org

ALASKA
Kendra Nichols-Takak
Norton Sound Health Corporation
907-443-4539
ktakak@nshcorp.org

ALBUQUERQUE (alternate)
Maria Benton
Jemez Pueblo
575-834-1001
mabenton@jemezpueblo.us

BEMIDJI (alternate)
Nicole Thunder
Ho-Chunk Nation
715-284-9851 x5070
nicole.thunder@ho-chunk.com

CALIFORNIA
Adrianna Gibson
Tule River
559-784-2316 x235
adrianna.gibson@crihb.org

NAVAJO
Norma Bowman-Moore
Navajo Highway Safety
505-371-8391
nbowman@navajodot.org

NAVAJO (alternate)
Mary Robertson-Begay
Hardrock Council on Substance Abuse, Inc.
928-725-3501
mbegay523@yahoo.com

PHOENIX
Christine Reed
San Carlos Apache Tribe, Public Safety
928-475-2383
creedescpd@yahoo.com

PHOENIX (alternate)
Lyndee Hornell
Hualapai Tribe
928-769-2207 x230
lhornell@ymail.com

PORTLAND
Gloria Point
Northwest Washington Indian Health Board
360-647-9480 x204
gloria@indianhealthboard.org

NASHVILLE
Riley Grinnell
Indian Health Service
615-467-1613
riley.grinnell@ihs.gov
The following new resources are available from the TIPCAP Technical Assistance Team:

ARTICLES

• An article entitled “High-Dose Vitamin D Supplement May Reduce Risk of Falling Among Older People” by Laurie Barclay, M.D., Medscape Medical News http://www.medscape.com/viewarticle/709829

• An article entitled “Minority Children Use Appropriate Car Seats Less Often” by Kathryn Doyle, Reuters http://www.reuters.com/article/2014/01/13/us-minority-children-car-seats-idUSBREA0C1AY20140113


• An article entitled “More Than 24,000 Kids Go to the Hospital for Shopping Cart-Related Injuries Every Year: Study” by Huffington Post http://www.huffingtonpost.com/2014/01/22/shopping-cart-injuries-children_n_4646036.html

TOOLS


FUNDING OPPORTUNITY


• Substance Abuse and Mental Health Services Administration (SAMSHA) Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth, and Families in American Indian/Alaska Natives (AI/AN) Communities (Short Title: Circles of Care VI) http://beta.samhsa.gov/grants/grant-announcements/sm-14-003

EVENTS

• Econometrica, Inc., presents Program Sustainability Webinar via Adobe Connect, March 18, 2014


• National Safety Council: Distracted Driving Awareness Month, April 2014 http://www.nsc.org/safety_road/Distracted_Driving/Pages/DDAM.aspx


• 2014 TIPCAP Annual Workshop in Nashville, TN, April 29–May 1, 2014


DEADLINES

• TIPCAP Year 4 Semi-Annual Report due date: March 31, 2014. The application can be accessed at www.grantsolutions.gov.

• TIPCAP Year 5 Continuation Application due date: May 1, 2014. The application can be accessed at www.grantsolutions.gov.

OTHER

• 2013 CDC Prevention Status Reports on Motor Vehicle Injuries http://www.cdc.gov/stlthpublichealth/pwr/motorvehicle/index.html#4

• Falmouth Institute On-Site Training –Tribal Certification Programs http://www.falmouthinstitute.com/training/index.html
NEW FACES AT TIPCAP

New IP Coordinator at the Pueblo of San Felipe Injury Prevention Program

Alvino Lovato is joining the Pueblo of San Felipe Injury Prevention Program as the new IP Coordinator. Alvino is from Santo Domingo Pueblo, more commonly known as Kewa, which neighbors the Pueblo of San Felipe. Before joining TIPCAP, Alvino attended technical vocational institutes in Albuquerque, NM, where he focused on Health Education and Emergency Medical Services (EMS) Basic. Alvino has 12 years of experience with Santo Domingo Pueblo as a Community Health Safety Officer, leading many injury prevention initiatives emphasizing road safety and helmet and car seat compliance. Alvino has several hobbies, which range from hiking and fishing to watching his favorite football team—the Dallas Cowboys—play to making silver and turquoise jewelry. Given his EMS and health education background, Alvino is excited to help the San Felipe TIPCAP program and has already thought of areas in which to expand TIPCAP initiatives. As spring approaches, Alvino has noted the need to address ditch, water, and bike safety.

New IP Coordinator at the Absentee Shawnee Tribal Health Program

Rosie Tall Bear is the new IP Coordinator for the Absentee Shawnee Tribal Health Program. Rosie is an enrolled member of the Crow Tribe of Montana and the Cheyenne and Arapaho Tribes of Oklahoma. She hails from Lodge Grass, MT, but lives in Norman, OK. Rosie went to Rocky Mountain College in Billings, MT, where she received her B.A. in Physical Education and Health Sciences. She has been with Absentee Shawnee for 8 years in various roles. Rosie has worked on several public health programs, including the Diabetes and Wellness Program and the REACH Program. When Rosie is not busy with TIPCAP, she enjoys being with her son and coaching his tee-ball and basketball teams. Given her background in health sciences and experience in other health prevention programs, Rosie is very excited to contribute to Absentee Shawnee’s TIPCAP program by working with the community and especially the elders in the Absentee Shawnee Tribe!
We would like to congratulate the following TIPCAP Injury Prevention Coordinators on their acceptance into the IHS Injury Prevention Fellowship Class of 2014:

Julie Adams – California Rural Indian Health Board
Adrianna Gibson – Tule River Indian Health Center, Inc.
Lyndee Hornell – Hualapai Health Department
Gina Yellow Eagle – Great Plains Tribal Chairmen’s Health Board

IHS Fellowship Feature – Julie Adams

Julie Adams has been chosen to participate in the upcoming IHS Fellowship Program. Julie is a Child Passenger Safety (CPS) Technician and would like to bring her expertise to this video, in accordance with the Native American culture. Julie plans to research current car seat videos and anticipates to create a CPS educational video.

Upcoming TIPCAP Annual Workshop

We are excited to announce the Annual TIPCAP Workshop will be held in Nashville, Tennessee on April 30–May 1, 2014.

The Pre-Annual Workshop meeting will be held on April 29, 2014 with the Project Officers, Advisory Committee, and the Econometrica Team.

Mark Your Calendars!

TIPCAP Administrative Call

Please join us for an Administrative Call on April 7, 2014 at 3:00 p.m. EDT to discuss the TIPCAP Annual Workshop, Year 5 Continuation Application, and additional administrative update.

Additional information will be sent closer to the call.

Bundle of Joy!

Shannon White, Program Director at the Sisseton-Wahpeton Oyate of Lake Traverse Reservation TIPCAP site had a little boy. Cyrus LaFromboise, born 11-14-13, 7lbs 6oz, 20 inches long.

If you would like to share general announcements with TIPCAP, please provide your information to Ciara Zachary at czachary@econometricainc.com.
As we continue to accomplish our goals in Year 4 of TIPCAP, many sites have begun to take steps towards sustaining TIPCAP initiatives beyond Year 5 such as building coalitions, expanding injury prevention networks, and researching funding opportunities. In this webinar, you will obtain a shared learning experience from your TIPCAP peers and learn about:

- Assessing community readiness to inform sustainability efforts
- Tips on navigating the tribal election process to support TIPCAP sustainability
- Where to access and download sustainability resources for AI/AN programs
- Applying the Native Aspirations Plan to promote sustainability

**Presenters:**

Michelle Carnes, PhD  
*Substance Abuse and Mental Health Services Administration*

Maria Benton, Injury Prevention Coordinator  
*The Pueblo of Jemez Injury Prevention Program*

Luis Salas, Injury Prevention Coordinator  
*Northern Native American Health Alliance*

*Adobe Connect participant information will be sent on a later date for your calendars!*
### TIPCAP CONTACT LIST

#### Alaska Area
- **Mary Clark, Injury Prevention Coordinator**
  - Bristol Bay Area Health Corporation
  - Phone: 907-842-3396
  - E-mail: mclark@bbahc.org
- **Kendra Nichols-Takak, Injury Prevention Coordinator**
  - Norton Sound Health Corporation
  - Phone: 907-443-4539
  - E-mail: knichols@nshcorp.org
- **Cyndi Nation, Community Health Director**
  - Indian Health Council, Inc.
  - Phone: 218-878-2126
  - E-mail: karee.lockling@tananchiefs.org

#### Albuquerque Area
- **Alvino Lovato, Injury Prevention Coordinator**
  - Pueblo of San Felipe
  - Phone: 505-771-9851 x5070
  - E-mail: nicole.thunder@ho-chunk.com
- **Maria Benton, Injury Prevention Coordinator**
  - The Pueblo of Jemez
  - Phone: 575-834-1001
  - E-mail: mbenton@jmepueblo.org

#### Bemidji Area
- **Luis Salas, Injury Prevention Coordinator**
  - Northern Native American Health Alliance
  - Phone: 715-682-7137, x4813
  - E-mail: nnahs@badriverhealth-services.com
- **Nicole Thunder, Motor Vehicle Injury Prevention Program Coordinator**
  - Ho-Chunk Nation
  - Phone: 715-284-9851 x5070
  - E-mail: nicole.thunder@ho-chunk.com
- **KaRee Lockling, Injury Prevention Coordinator**
  - Fond du Lac Tribe
  - Phone: 218-878-2126
  - E-mail: kareelockling@flilrez.com

#### California Area
- **Berent Lawton, Injury Prevention Coordinator**
  - Indian Health Council, Inc.
  - Phone: 760-749-1410 x5340
  - E-mail: blawton@indianhealth.com
- **Adrianna Gibson, Injury Prevention Coordinator**
  - Tule River Indian Health Center, Inc.
  - Phone: 559-784-2316 x235
  - E-mail: Adrianna.Gibson@crihb.net
- **Julie Adams, Injury Prevention Coordinator**
  - California Rural Indian Health Board, Inc.
  - Phone: 916-929-9761 x1512
  - E-mail: Julie.Adams@crihb.net

#### Great Plains Area
- **Martha Renville, Injury Prevention Coordinator**
  - Tuba City Regional Health Care Corporation
  - Phone: 928-283-2855
  - E-mail: tara.clisto@tcchealth.org
- **Michelle Warner, Injury Prevention Coordinator**
  - Kiowa Tribe of Oklahoma
  - Phone: 580-654-2300 x361
  - E-mail: kipp@kiowatribe.org

#### Navajo Area
- **Mary Robertson-Begay, Injury Prevention Project Director**
  - Navajo Nation Department of Highway Safety
  - Phone & Fax: 928-725-3501
  - E-mail: mbegay23@yahoo.com
- **Vacancy, Injury Prevention Coordinator**
  - Absentee Shawnee Tribal Health Programs
  - Phone: 405-701-7601
  - E-mail: RTabear@ostdps.org

#### Oklahoma Area
- **Rosie Tall Bear, Injury Prevention Coordinator**
  - Kaw Nation Injury Prevention
  - Phone: 580-362-1045
  - E-mail: tharris@kawnation.com

#### Phoenix Area
- **Jaynee Moore, Injury Prevention Coordinator**
  - Colorado River Indian Tribe (CRIT)
  - Phone: 928-669-8090
  - E-mail: jaynee.moore@crit-dhs.org
- **Christine Reedle, Injury Prevention Coordinator**
  - San Carlos Apache
  - Phone: 928-475-2338
  - E-mail: creedescpd@yahoo.com

#### Portland Area
- **Gloria Point, Injury Prevention Coordinator**
  - Northwest Washington Area Indian Health Board
  - Phone: 360-647-9480 x204
  - E-mail: Gloria@indianhealth-board.org
- **Luella Azule, Injury Prevention Coordinator**
  - Northwest Tribal Epidemiology Center
  - Phone: 503-416-3263
  - E-mail: LAzule@nptihb.org
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