

TIPCAP NEWS

Newsletter of the Tribal Injury Prevention Cooperative Agreement Program of the Indian Health Service



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Working Together to Decrease Traumatic Brain Injuries in the Norton Sound Region

By: Katie Hannon

The Norton Sound Health Corporation (NSHC) Injury Prevention Program (IPP) is excited to be one of the Part 1 IHS-funded TIPCAP programs and to learn from all the other programs. The Norton Sound Region experiences some of the highest injury rates within Alaska, the majority of which are preventable. With the development of a local IPP, we can assist in reducing and preventing injuries, increasing awareness, and delivering educational information and useful interventions in a culturally appropriate manner.

We have many unique qualities in our region, among them our way of transportation. Many residents in Nome and the regional remote villages travel via all-terrain vehicles (ATV's), including snowmobiles, four wheelers, and side by sides. These vehicles are often used for everyday transportation as well as subsistence hunting and gathering. Unfortunately, because they are used so routinely in everyday tasks, these vehicles can seem less hazardous. Due to our high rate of accidents, we know this is an issue, and additional education and resources are needed to emphasize the need for helmet use in our region.

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Office of Environmental Health & Engineering
Division of Environmental Health Services
Injury Prevention Program



Good work and farewell (but not good bye)

By: CAPT Holly Billie, Indian Health Service

Greetings!

As we approach the end of the first year of this new cycle, it's a good time for reflection. It seems like only yesterday the IHS TIPCAP was a new idea and excitement surrounded the launch of this new grant program. That was 24 years ago in 1997. Currently there are 27 programs; some are new grantees and others have been part of the TIPCAP family for several cycles.

I've had the distinct pleasure of being involved with the TIPCAP since it began—as a field project officer, as a trainer, and later as a program manager. The growth in tribal capacity over the years and programs achieving varying levels of sustained programming have been magnificent to witness. The TIPCAP is a small program that has

accomplished much and continues to contribute significantly to the world of AI/AN injury prevention.

There comes a moment in everyone's career when one has to make the difficult decision to leave a program. After 30 years of federal service, I will retire from the IHS in early 2022. I want to thank all who are involved with the TIPCAP and have contributed over the years—present and past coordinators, project officers, key partners, and stakeholders. Together you have made the TIPCAP a success story. I'm grateful for the opportunity to have worked with you and to celebrate your success.

As I leave the IHS Injury Prevention Program, you can be assured that the TIPCAP remains in good hands. Molly will continue to lead the

program with the support of the monitoring team from the Centers for American Indian & Alaska Native Health, Colorado School of Public Health. You are doing excellent and often ground-breaking work, which deserves the attention of decision makers, influencers, and those who will follow after you. I encourage all programs to keep up the good work, to lean on your support system, and to share your successes as often as you can with those inside and outside of your circles.

In retirement, I plan to spend time with my family and travel when the world re-opens. I look forward to the time when our paths cross again. Until then, stay safe and t'áá íyisíí ahéhee' (thank you very much). ■



By: LCDR Molly Madson, Indian Health Service

Congratulations to each and every one of you on completing the first year of this TIPCAP cycle! We have weathered vacancies, travel bans, family illness, tragedy, community closures, and technological barriers. Even with all of these hurdles, the TIPCAP was successful this year because you were dedicated to helping the people in your communities. The creativity and perseverance demonstrated by the TIPCAP coordinators and partners is inspiring and has allowed for injury prevention programs to be implemented and continue in various capacities. I encourage all of you to maintain the creative spirit and continue to find ways to move your programs forward in 2022. I truly look forward to working with you! ■

[cont.] Working Together to Decrease Traumatic Brain Injuries in the Norton Sound Region

Therefore, one focus for this new grant cycle is to reduce traumatic brain injuries by increasing helmet safety education and equipment use in the Norton Sound Region. Living in a rural area, having access to supplies is a large barrier because Nome and remote villages often don't have many helmets available for sale in their local stores. Because of this, people are required to order their helmets online, and they don't always get the right size helmets. With our program, we are able to order helmets in a variety of sizes and have them available for our residents.

We also promote helmet safety and education through community events. For example, we collaborated to host a Youth Snowmobile Race in the spring and a Bike Rodeo in the summer. Mariah Morgan, a community member, led the planning efforts for the Youth Snowmobile Race, which was sponsored by the City of Nome. She states, "Snowmachine racing has been a popular sport in Nome, Alaska for decades. With the Nome-Golovin race, Nome CannonBall, and hosting the Iron Dog's halfway point in Nome each year, hundreds of fans show support within the Bering Strait region. The youth haven't had a race for quite some time, so in March of 2021

local parents and volunteers put on a 120/200 snowmachine race for youth ages 4-12. NSHC's Injury Prevention Program also sponsored the youth event, raffling off full-face helmets for 6 registered youth racers. The event created an opportunity to talk to youth racers about safety. "Prior to the race start time, the 20 registered youth racers were given an overview on the importance of helmet safety and injury prevention. Each youth racer signed a pledge that indicated their understanding and promise to practice safe riding," said Mariah Morgan.

Katie Hannon and the NSHC's Injury Prevention Program led the planning efforts for the Bike Rodeo and handed out over 80 bicycle helmets to every child who participated. The participants had the opportunity to visit resource tables, bike through a safety course, and get their bike maintained. We are fortunate to have great partners in our region who support and build upon our injury prevention efforts.

A challenge for us this last summer was not being able to travel to complete other events in regional villages. Our goal is to host more community events next year and get more helmets out in the region. ■



Top: Katie Hannon staffing the resource table. Middle: Andrew Peterson does a bike tune up at the bike road. Bottom: Peyton and Piper Lewis check in rodeo attendees.

Building Partnerships to Save Lives

By: Gregory Sehongva

Hello from the Hopi Reservation. My name is Gregory Sehongva, and I am a member of the Hopi Tribe. I am currently serving my community as the Safety Coordinator for the Hopi Department of Transportation. I previously served as the Injury Prevention Coordinator for the CDC Tribal Motor Vehicle Injury Prevention Program (TMVIPP) and have been a Child Passenger Safety Technician since 2011 and an Instructor since 2015. I will assume the role of TIPCAP Coordinator until a full-time coordinator is hired.

The Hopi Tribe's Department of Transportation's focus for year two of the TIPCAP cycle is to increase seat belt occupant restraint use among residents of the Hopi Tribe and to establish a primary seat belt occupant restraint law on the Hopi Reservation. Previous efforts have been conducted to establish a primary occupant restraint law; however, with the COVID-19 pandemic, efforts in 2020 came to a halt. In 2019, the following was conducted to propose a primary occupant restraint law:

1. Data review of motor vehicle crashes (MVC)
2. Revitalize an IP coalition
3. Review of existing seat belt laws on the reservation
4. Conduct community, first responder surveys, and key stakeholder interviews
5. Develop educational materials

6. Presentation to tribal law and order committee on the primary occupant restraint law

The identification of partnerships has assisted in gathering local data on seat belt usage on the reservation to establish baseline data for tracking improvements. In 2019, the seat belt usage rate on the Hopi Reservation was 52%,¹ compared to 86.4% for the State of Arizona and 90.7% for the national rate.^{2,3}

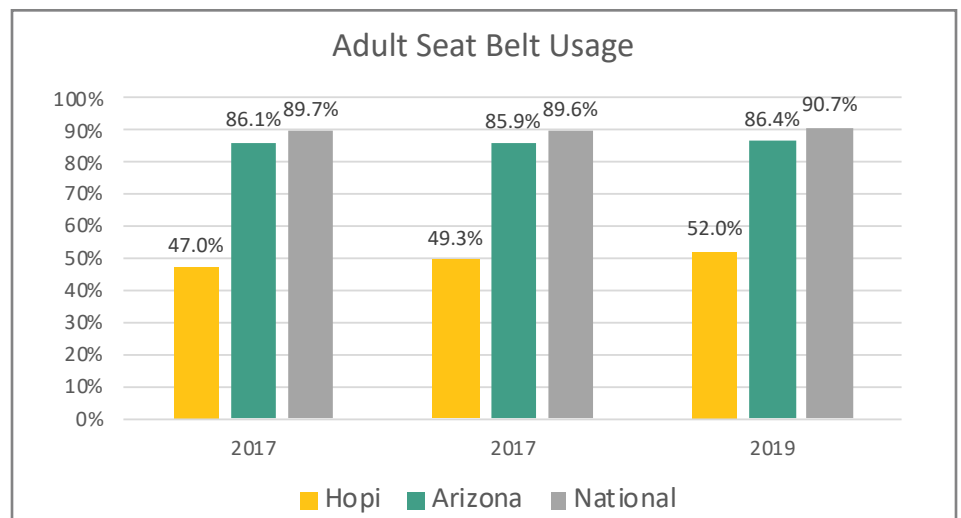
In addition to conducting observational adult seat belt use surveys, we also conducted surveys in 2012 and 2019 to determine community input on support for a primary occupant restraint law. In 2019, 96% (n=250) of community members stated they are in support of a primary occupant restraint law on the reservation.

Stakeholders and partnerships throughout this initiative have included Hopi law enforcement, Hopi Dept. of Transportation, Ari-

zona Dept. of Transportation, Chief Justice, Indian Health Service-Office of Environmental Health, Public Health Nursing, Chief Executive Officer and medical providers of the Hopi Health Care Center, local community health services, and emergency medical professionals. Stakeholders and partnerships have continued to be vital in the development of a primary occupant restraint law and addressing impaired driving.

Lieutenant Jarvis Qumyintewa of Hopi Law Enforcement Services (HLES) stated, "Since the onset of the Health Pandemic, HLES has seen a significant increase in incidents of impaired driving and motor vehicle crashes where the operator of the vehicle was impaired. HLES has also received referrals from state and county Social Services regarding Hopi Tribal members arrested within state or county jurisdiction for driving

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[cont.] Building Partnerships to Save Lives

impaired with children in the vehicle. DUI or Impaired Driving convictions have major ramifications, and some can linger for years. Most of us are aware of the short-term consequences, including temporary driver's license suspension, fees and fines, high insurance premiums, court-mandated community service, participation in drunk driving education programs, and even jail time. Unfortunately, the long-term shock waves from a DUI can cause the greatest pain. Even after you pay your fines and fulfill your legal obligations, your DUI conviction

can still undermine your future opportunities and haunt your life for years. Learning how you might be affected by a DUI is an important first step for protecting yourself, your family, and your future."

The Hopi TIPCAP program is continuing to work with our wonderful partners to focus on year two efforts. Our plan is to assist the tribal law and order committee in proposing the primary occupant restraint law to the tribal council for approval. We also will be collaborating with HLES for future check-

points to address impaired driving. We are thankful for this opportunity and look forward to implementing TIPCAP in the next five years! ■

1. Chase. S. Seat belt observation data, IHS Keams Canyon Service Unit, 2019
2. America's Health Rankings. Annual Report Seat Belt Use. (2019). https://www.americashealthrankings.org/explore/annual/measure/seatbelt_use/state/AZ. Accessed on March 3, 2020.
3. National Highway Traffic Safety Association. (2019). Seat Belts <https://www.nhtsa.gov/risky-driving/seat-belts>. Accessed on March 3, 2020.



Congratulations to Toni Short!

Our TIPCAP colleague, Toni Short, Health Program Director at Apache Tribe of Oklahoma, was honored with the J.C Burris Award. The Oklahoma Highway Safety Office presents the award each year for various achievements in the area of traffic safety in Oklahoma. The J.C. Burris Award is given in honor of J.C. Burris, a Law Enforcement Liaison for the Oklahoma Highway Safety Office, whose hard

work, dedication, passion, and tireless effort resulted in him being recognized nationwide by his peers as a dedicated public safety authority. Recipients of the award exemplify these characteristics, and we couldn't agree more that Toni Short is a deserving recipient.

**Please join us in congratulating Toni
on this momentous achievement!**

Developing Partnerships is Critical for Success



By: Livia Bracker

Maniilaq Association is thrilled to be a Part 1 TIPCAP

site. During this five-year cycle, we hope to improve the health of some of the more vulnerable members of our community by focusing on elder fall prevention. Currently, the Alaska Native Injury Atlas lists falls as the number one cause of injury hospitalizations in the Northwest Arctic. To reduce these injuries, we want to provide elders with resources and opportunities that can be used to lower their risk of falling. We plan to work with several tribes interested in starting a strength and balance exercise program, distribute free ice cleats to elders throughout the region, and encourage fall prevention through educational materials. Developing necessary partnerships is a crucial step to successfully meeting our goals.

Despite challenges, we've been able to make some exciting progress during this first year of the

cycle. Once the TIPCAP Coordinator position was filled, we began building partnerships with the five tribes interested in implementing a strength and balance program. The Tribal Council's participation is essential to starting these classes. We'll work through tribes to identify instructors and a location for the classes to be held and continue to work with them to monitor the classes once they begin. The tribes also have a better understanding of what their community wants and needs. Many of the Council Members are elders themselves or have close family members who are elders, so they'll know best what type of exercise class will have the most success among their community. For this reason, we've decided to give each community a choice between a Tai Chi or a Bingo-based exercise program, and the Council will make the final decision between the two.

Although the Tribal Councils give us valuable insight on what the elders in our area need, we've also been partnering with local elders directly to get their opinions on the style of ice cleat they would prefer. Through online

research and suggestions from other Alaskan Injury Prevention Programs, we were able to choose a few potential styles and brands of ice cleats that would be suitable for our area. We then presented them to some of the local elders in Kotzebue for them to try on. They gave us feedback on different factors such as weight, ability to take on and off, and their overall preferred style. Based on their preferences, we will use a new model of ice cleat that we believe will work better in our region and be worn more often. Now that an ice cleat has been chosen, we'll also work with 11 different health clinics and our primary care hospital to get them distributed for free to elders and pregnant women.

Partnerships can also be important in evaluating these interventions. We partnered with the ANTHC Alaska Native Epidemiology Center to improve regional fall injury data surveillance using our new enterprise data warehouse (electronic health record). We've worked with them to develop a case definition for the TIPCAP injuries and population.

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[cont.] Developing Partnerships is Critical for Success

Once the new data surveillance system is active, we'll have a more complete and accurate understanding of elder falls that occur in-region. This information can then be used to determine if our interventions are effective and actually

reduce fall injuries. It'll also tell us if we're overlooking specific risk factors or missing other high-risk segments of the population.

As this cycle progresses, we hope to continue to build our current

partnerships and start many others. Forming these relationships with organizations and groups with similar objectives is a key feature of our program, as they provide new insight and support that help us all be successful. ■

KAW NATION



Getting settled as the Kaw Nation IP Coordinator

By: LaVina Spotted Bear Clark

Haw'ê (Hello). My name is LaVina Spotted Bear Clark, and I am the Kaw Nation Injury Prevention Coordinator. I am enrolled Osage, and I'm also Kaw, Ponca, and Oglala Lakota. I reside in Ponca City with my husband. We have 3 sons and 10 grandchildren, with another on the way.

My first day in this new position with Kaw Nation was August 23, 2021, and I have learned quite a bit regarding car seats in this short time. A lot has changed since my sons were in car seats. My program has installed 25 car seats with the help of David Bales, IHS Project Officer, and Jim Warren, Kaw Nation Emergency Management Director. I have partnered with our Child Care Center, and we planned

an event for their parents with the invitation of other tribal programs that have parents of small children. However, before the event, my husband and I came down with COVID. We cancelled that event, but we rescheduled for November 8, 2021. Now that I'm recovered and back at work, I've been able to complete the Child Passenger Safety Technician Course with Tabatha Harris, Tribal Traffic Safety Specialist with the National Tribal Injury Prevention Resource Center, and I've already completed my first 3 installs.

The program also has a new office. Hopefully, we will be fully moved in soon! This new space will be perfect for the program, with office space, a small reception area, and

storage for our car seat inventory. The space also has a bay area, so when we have inclement weather, our families will be out of the elements.

I am working on a billboard for our program and plan to introduce to the Child Care Center and their subsidiary program participants the Buckle Bear Program. On my first week in this position, I read TIPCAP News and saw that the Ho-Chunk Nation Injury Prevention Program introduced the Buckle Bear Program and that it was well received within their Head Starts. I contacted Lisa Herritz at Ho-Chunk Nation, and she gave me the website. So, we will soon start our own Buckle Bear Program with our Child Care Center. ■

Education Outreach is Essential



By: Brenda Renteria

Thank you TIPCAP Team for this opportunity to share about

how the Bakersfield American Indian Health Project (BAIHP) serves our Native community here in Kern County! My name is Brenda Renteria. I am a TIPCAP team member, and I have been with BAIHP for over six years, helping to serve our Native Population and to educate them about our Injury Prevention Program. BAIHP serves a client population that represents over 220 tribes across the nation but who currently reside in Kern County, California.

Through our program, we reach out to our Native community and provide education about potential hazards in their environment while providing tips on how to avoid them. We educate new moms on dangerous home hazards for toddlers, teenagers about recreational

safety, and our elderly population on potential safety hazards in their homes.

Our program's success has been achieved through our community outreach events and strong relationships with our community partners. At our events, we serve our community by providing access to educational materials, car seats, bike helmets, walkers, and canes. BAIHP has also adopted and implemented the Building Elders Strength to Thrive (BEST) program by targeting the key elements to prevent elder falls, which are offering evidence-based exercise interventions to increase balance and strength and incorporating home assessments to identify modifications and safety measures needed to prevent fall risks. The BEST program uses a two-pronged approach to preventing elder falls: exercise and home assessment/modification. We believe the combination of these two strategies will offer the best opportunity to prevent elder falls.

“Our program’s success has been achieved through our community outreach events and strong relationships with our community partners.”

For this upcoming TIPCAP funding cycle, we have found a unique solution that mixes exercise, health education, and bingo to help overcome health problems. The program, called Bingocize®, provides our elders with a unique opportunity to have fun and socialize while they exercise. By increasing their exercise, we hope to help decrease their likelihood of chronic diseases and falls.

Thanks to the TIPCAP program for this opportunity to better serve my community. I believe injury prevention and providing awareness among our Native population about the risks of injuries in the home, and the importance of implementing safety measures, is the first step in preventing home injuries. ■



Left: Seniors doing Bingocize®. Middle: Helmets to distribute to BAIHP youth. Right: BAIHP flyer advertising the Injury Prevention Program.

JCBI's First Car Seat Check Event and Lessons Learned

By: Mona Maxwell

On October 16, 2021, the Jena Band of Choctaw Indians (JBCI) of Louisiana held our first car seat check event at the JBCI center, along with other JBCI departmental activities in the hopes of reaching more tribal members. We had one of the LaSalle Parish Sheriff's officers CPS technicians help us with the event.

During our drive-through car seat event, we distributed and installed four new car seats (two convertibles and two boosters) and completed two car seat checks.

We also hoped to have tribal members complete a survey, but the SurveyMonkey website was down during the hours of our event. We did not want to miss the chance to gather data, so we opted to use pencil and paper. Nine tribal members completed the survey and received a gift card incentive.

We also conducted an observational survey during the drive-through event; however, this did not work out as expected because we needed more staff to capture the data. However, we managed to distribute fliers to tribal members driving through, encouraging them to tell others about the program and if they knew of tribal members needing a car seat or assistance with installation to contact us.

We felt our first car seat check event was successful; however, there is much room for improvement. We planned the event with other tribal departmental activities such as the Health Department giving flu shots, hoping for a good turnout. However, the local high school had its homecoming, and the town had its annual festival the same day; we felt this kept tribal members from coming to our event.

When looking at our surveys later, we found several questions were not answered. We felt we needed more staff to oversee that the surveys were complete. In the future, using iPads for the survey will prevent unanswered questions, and hopefully, the site will be up and running to alleviate the problem next time.

We also felt we could have captured more tribal members when distributing our program materials during the observational survey, if we had more staff. Once the three technicians began the seat checks, they could not stop and talk with

About JCBI

The Jena Band of Choctaw Indians (JBCI) of Louisiana received TIPCAP funding in 2021. Our motor vehicle injury prevention program (MVIPP) is focused on preventing motor vehicle injuries by increasing the number of tribal children 9 years of age and younger who correctly use child safety and booster seats. The program funding helps provide child safety seat education and awareness, distribution of car seats to tribal families, and the conducting of yearly car seat checks.

Our program partners include the tribal social services staff, tribal council, tribal chief, Kinetix, the local schools, and law enforcement. Three of our MVIPP staff completed and earned their Child Passenger Safety Technician's certification in June of this year. In August, one staff member completed the Injury Prevention Level 1 course.

the members driving through the event.

Overall, the first car seat event was successful, and we have had several people make appointments to have their seats checked at later dates. We look forward to continuing the program and improving our program to prevent motor vehicle injuries. ■



Photos of CPS Technicians, volunteers, and participants at the car seat event.

TIPCAP Teamwork!

Bristol Bay Area Health Corporation Navigates Turnover



By: Melany Eakin

The pandemic contributed to many things in the Bristol Bay Area Health Corporation (BBAHC) Environmental Health program, including staff turnover. Since our program has been dealing with multiple vacancies over the last year, staff in the Environmental Health Department have been stepping in to keep our TIPCAP program running.

I have been filling in as TIPCAP Coordinator since the departure of our last Injury Prevention (IP) Specialist in February 2021. I have worked for BBAHC as an Environmental Health Specialist since April 2017, but never had any formal role in the IP program, until now. I've been able to attend an IHS Injury Prevention Level 1 course virtually, and I plan to attend the level 2 course next time it is available. It's been educational and

exciting to cross over into some of the IP work and see all the great success stories from other regions. Even after the IP Specialist position is filled, I look forward to staying involved in growing our IP program at BBAHC.

In October 2021, we welcomed CDR George Larsen to the team as the Environmental Health Department Manager. George comes to BBAHC with 22 years in the Environmental Health field. He also plans to attend the IP Level 1 and 2 courses and gain a better understanding of the BBAHC IP program as we work on recruiting a full time IP Specialist. "I am so appreciative of the incredible efforts made by Melany and our support staff to keep some of the critical components of our Injury Prevention Program active in the absence of an IP Specialist. They have gone above and beyond as they have maintained active elder fall-reduc-

tion and nighttime visibility programs," George said. He is eager to fill our open IP Specialist position so we can flesh out and grow the program. Opportunity is knocking for the IP program at BBAHC, and we are excited to serve our communities into the future! ■



National Child Passenger Safety Week

By: Brian James

Yá'át'ééh! Greetings from Navajo Nation.

As we all know, the COVID-19 pandemic has created some uncertain times for all communities throughout the Country and for the Navajo Nation. Conducting outreach activities was very challenging this past year. But when our COVID numbers began to decrease, we made the decision that it was time to get back out to our communities and continue Child Passenger Safety (CPS) education.

The Navajo Nation is 27,000 square miles and is made up of five (5) agencies, which includes Western, Central, Fort Defiance, Northern, and Eastern. Throughout National

Child Passenger Safety Week (September 19-25, 2021), we wanted to hit the ground running and reach all agencies within Navajo Nation and conduct Child Passenger Safety Clinics. We were successful in reaching almost all agencies, with the exception of Western Agency.

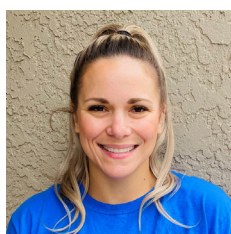
On Navajo Nation, our collaboration and success are dependent upon our partners who are most often certified CPS Technicians. It is to be noted that most of our partners work within the healthcare system and have been busy with COVID-related tasks.

We are truly thankful for these technicians who came out to support and assist us with our CPS events. ■



NORTHERN VALLEY INDIAN HEALTH

Where There's a Will, There's a Way *Fall Prevention Programming amidst a Pandemic*



By: Amanda Holley

I would like to start by thanking TIPCAP for aiding

Northern Valley Indian Health's "Standing Strong on Your Feet" program, which works to prevent

unintentional fall-related injuries among elders. My name is Amanda Holley, and I'm the Outreach Fall Prevention Program Coordinator for Northern Valley Indian Health in California. My main focus for the next 5 years is to help the elders in our Native communities build up their confidence, strength, and balance in order to prevent

falls. I plan on tackling this is by providing strength and balance classes, executing more home safety assessments, supplying patients with home modifying safety equipment, and educating and working closely with our providers to ensure patients are getting the resources they need to reduce their fall risk.

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[cont.] Where There's a Will, There's a Way

2021 was the first year of the TIPCAP grant cycle. It had a rocky start due to circumstances out of our control. For the first six months of 2021, COVID-19 took over our Community Health and Outreach team's focus. I joined the team mid-July and have taken on this position in full force. At the end of July, we were able to train our team in A Matter of Balance in anticipation of holding our first workshop in September. Unfortunately, we hit a setback due to the Delta variant and COVID cases continued to climb in our community, and we had to cancel the workshop. All the restrictions have been a challenge, but where there is a will there is a way! Our team has made several home safety assessments via phone and some in person. We have also set up virtual balance exercise groups once a week and supplied home modifying equipment when needed. At the end of September, another team member and I earned our trainer's certification in Virtual Matter of Balance. By completing this course, we now have the ability to offer virtual classes. Our first virtual workshop is planned for the beginning of 2022.

We expect 2022 will hold many opportunities for our program. We have made connections with a Tai Chi and a Healthy Steps instructor willing to do in person classes. We have also looked into getting one of our team members certified as an instructor for additional types of balance and strength classes. And I plan to link up with our local Physical Therapy Clinic and Public Health Department to better support our older adult Native communities to prevent injuries from falls. ■

Northern Valley Indian Health stocked up on fall prevention safety equipment and training materials.



SANTO
DOMINGO
PUEBLO

Meet Eric, New Tribal Injury Prevention Coordinator

My name is Timothy Eric Bailon from the Pueblo of Santo Domingo. I am known to the community as Eric. I've been working for the tribe for two years in the Prevention field as a Prevention Specialist. This allowed me to work with tribal programs including Tribal Courts, Tribal Social Services, Tribal Behavioral Health, and the community. I am certified in the 360 training in COVID-19 awareness, QPR Suicide Prevention Gatekeeper Instructor, Mental Health First Aid, Basic Tobacco Intervention, Ethics in Prevention Professionals, Trauma-Informed Approach for Health and Well Being, Strengthening Your Coalition to Produce Outcomes, Safe Talk for Suicide Alertness, and Certified Facilitator of the Fatherhood Is Sacred, Motherhood Is Sacred Program. Helping people has always been my passion especially working with our Elders and the Youth. This has taught me patience, good communication skills, and customer service. I've been in Tribal Administration as a Tribal Official for three terms, working alongside three different governors. I like fishing and hunting, which helps me be patient with an excitement of a successful outcome. I am also an artist in mosaic stone inlay which has been in my family for many generations. I am now excited with my most recent acceptance of the position of the new TIP (Tribal Injury Prevention) Coordinator for Santo Domingo Pueblo. This position is under the CHR program, and I look forward to continue working with the community. ■

Program Profile

ROCKY MOUNTAIN TRIBAL LEADERS COUNCIL EPIDEMIOLOGY CENTER



RMTLC works to promote and assist injury prevention efforts within Tribal communities in Montana and Wyoming and serves the following tribes:

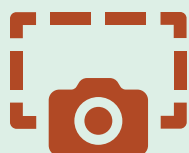
- Blackfeet Tribe
- Chippewa Cree Tribe
- Confederated Salish & Kootenai Tribes
- Crow Tribe
- Eastern Shoshone Tribe
- Fort Belknap Tribe
- Little Shell Tribe
- Northern Arapaho Tribe

Goals:

1. Collect and report injury data to each Tribe to assist in planning their injury prevention activities
2. Provide overview of each of the Tribe's injury prevention activities, laws, and policies
3. Support each Tribe by providing ongoing advice and guidance

Highlights:

- Building partnerships by collaborating and communicating with tribal health directors and sanitarians.
- Hosting the Injury Prevention Strategic Intervention Planning Meeting.
- Analyzing Tribal Injury data and creating tribal-specific and aggregate mortality reports.
- Developing a gap analysis survey.



Snapshot of Activities:

Annual Workshop

RMTLC held an annual workshop to assist Tribes in planning their injury prevention activities

Child Safety Seats

RMTLC is partnering with IHS to educate the community on child passenger safety

STOCKBRIDGE-MUNSEE TRIBE

Cami Miller joins team at Stockbridge-Munsee Tribe



My name is Cami Miller, and I am a member of the Stockbridge-Munsee Tribe and a licensed Physical Therapist Assistant (PTA). I recently took the position

with the Stockbridge-Munsee Community, located in Bowler, Wisconsin, as a Community Health Representative focusing on SNAP-Ed Nutrition Education and Fall Prevention among the elderly. I have 11+ years of experience working with the elderly population as a PTA in various skilled

nursing facilities in Northern Wisconsin, with the goal of assisting elders with strengthening and balance exercises so they can safely return to their prior level of function and living environment. Some of the tasks performed included working with elders to improve their strength and balance, estab-

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[cont.] Cami Miller joins team at Stockbridge-Munsee Tribe

lishing home exercise programs, performing functional tests and assessments to determine fall risk, and performing home assessments to establish recommendations to improve safety and decrease fall risk within their homes under the supervision of a physical therapist.

Our goal for this funding cycle is to develop a fall prevention program, with goals such as develop tools for providers (risk scale) for patient risk assessment, work with our IT staff to integrate assessments into EHRs (electronic health records), and

provide education to providers and the Community about falls and how to prevent falls. In doing so, we will provide assistance and education to elders in the Stockbridge-Munsee Community to improve their safety and overall well-being in order to reduce falls within the Community. We purchased iPads in order to supply participants of the fall prevention program with a virtual home exercise program to improve strength, flexibility, and balance to aid in decreasing their fall risk and improving their overall

health. Incentives were purchased for participants of the fall prevention program such as reachers, non-slip socks, non-slip bath mats/rugs, night lights, ice cleats, swivel car seat cushions, fall prevention books, and vehicle support handles to assist with fall prevention.

The Tribal Injury Prevention Cooperative Agreement Program allows the Stockbridge-Munsee Community the opportunity to decrease injuries related to falls, raise awareness, and improve health and wellness throughout the Community. ■

TUBA CITY REGIONAL HEALTH CARE CORPORATION



Benefits of Partnership

By: Susie Hernandez

My name is Susie Hernandez, Injury Prevention Specialist/Program Assistant for the Tuba City Regional Health Care Corporation (TCRHCC), Division of Environmental Health Services/Injury Prevention Program (DEHS). We serve the Navajo, Hopi, and the San Juan Southern Paiute tribes in Coconino County of Arizona. TCRHCC provides primary care services to over 33,000 Navajo, Hopi, and San Juan Southern Paiutes and is the sole health care provider in a 7,000 square mile service area. I completed the Indian Health Service's Injury Prevention Level I and II courses this year and am applying the knowledge toward the first year of the TIPCAP grant. Our team is working on reducing the top two leading causes of injury and hospitalization in our service area—older adult fall injuries and suicide.

Fall Prevention Project Data

The unintentional injury data from the Emergency Department Log is collected for 2020 and 2021. Only 2020 data will be used to calculate the project baseline and for evaluation. The data are compiled to make charts, identify leading injuries, develop reports, and plan community interventions.



An elder is assessed in her home for fall risk.

Home Assessments and Evaluations

Home assessments are conducted at residences of fall patients that are 65 years and older. Fall hazards are identified at the homes, and the findings are forwarded to Home Assistance Programs for modifications or repairs. All homes evaluated were not handicapped accessible. The Home Assistance Programs are willing to help. Some programs and departments that are participating are the Navajo Nation Chapters, ASSIST! to Independent Program, Navajo Housing Authority, Navajo Housing Services, and many more. ■



An example of a handicap ramp built by the program for a high risk elder. The ramp was added to an existing porch.



ASK AN EVALUATOR

The monitoring contractor team at CAIANH answers some commonly asked questions from TIPCAP sites about collecting data and program evaluation. If you have any additional questions, please reach out to [Jenn Russell](#) or [Holly McKinney](#).

What is the best way to gather feedback from the community when deciding what type and/or brand of injury prevention equipment to provide or what incentive items are preferred?

Decisions about which brands to use for any safety equipment that will be given out to community members should be based on science about what is most effective within the allowable costs. For example, choosing car seats should be based on testing by NHTSA. For other products, Consumer Reports might be a resource. For items that may be given out as incentives, like for program participation or attendance, you might want to rely more on community input, so long as the item is not intended for safety (e.g., a t-shirt or gift card).

Once a set of options is identified that are of equal quality and within the budget, then feedback can be gathered from people with different viewpoints in the community. Surveys of a sample that is representative of the larger group is a good strategy so long as the questions you ask are neutral and do not lead the participants to a specific answer. A focus group can help determine what the important questions should be and what terminology is familiar to your respondents. Key informant interviews often work well when you are trying to get a feel for what the issues are in a community and how to approach a solution. Deciding on incentives for participant retention can be done through talking to a convenience sample, as long as the group is representative of the types of people likely to participate.

In the end, the decision rests largely on the nature of the question you are trying to answer and what is at stake. If you are trying to learn about attitudes and beliefs about a problem so as to select the best products or equipment, a survey might be preferable. If the question you are trying to answer is what groups might like in the way of an incentive, then focus groups, key informant interviews, or convenience samples typically are fine.

What are some ways to track or monitor social media/electronic marketing campaigns? And how do we know if those campaigns are effective?

Social media platforms will provide the user with metrics, like the number of new followers, re-tweets, hashtags, comments, likes, etc. Some platforms, like Facebook, will provide metrics on the number of views, which would be very useful in determining exactly how many users viewed a particular post. If using a business account, you will gain access to a greater array of metrics, like demographics, but this will likely cost money. There are also ways to set up analytics for websites to measure views and track clicked links. It might also be helpful to ask those who come to an event or reach out to you, "how did you hear about us?" and track responses so you can see which method of communication is most effective.

It's important to remember that all of these metrics will help inform us on what types of media people are engaging with most so that we can improve how we market our programs, but **knowing the number of people who saw your post is different than knowing how effective your campaign was at changing behavior**. For program evaluation, you want to know if those reached changed something (e.g., wore a seat belt, attended a car seat check event, participated in a fall prevention course, improved strength or balance), and metrics from a social media campaign can't easily tell us that. [Here is a resource](#) that might be helpful if your program is considering a targeted media campaign and wants to evaluate its effectiveness.



ASK AN EVALUATOR

How can I ensure accurate data collection with self-report data and/or data collection with virtual functional assessments?

In general, the best data come when the measurement is straightforward and simple and when whoever is doing the measurement is well trained and consistent in the way they take measurements. For example, if the goal is to gather baseline data on someone's strength and balance before they begin virtual Tai Chi classes, the best data would come from someone trained to conduct functional assessments. Preferably this person would be able to conduct the assessments for all participants before they begin classes and after a certain amount of time the participants have been attending (i.e., 12 weeks, 6 months, 1 year, etc.). Relying on self-report data collection can be challenging as people may forget, they may exaggerate, or they may not understand what they are reporting in the same way you intend them to.

If it is not possible to conduct activities in-person, it might be possible to provide education and training via Zoom or other video software so that a participant can safely conduct an assessment on camera while the TIPCAP assessor watches.

[CDC's STEADI website](#) provides educational videos on how to conduct the three main functional assessments for older adult fall prevention (30-second chair stand, 4-stage balance test, and the timed up and go (TUG) test), which may be useful.

A good first step if your program is looking to do virtual functional assessments is to find out from other TIPCAP programs who have tried virtual assessments what worked and what didn't work for them. Then, have your staff practice among themselves, with one staff member doing the test on themselves while the other watches on video to see if they can determine, through the video, if the staff member is doing it correctly. If your staff agrees that you have the educational and technological capacity to instruct participants (and potentially their family members), then the next step would be to determine if a participant is willing and able to do it themselves.

It will be very important to ensure that the participant can safely conduct the activities without harming themselves. Additionally, the participant will need to have the necessary technology and a stable connection. If the participant is not computer savvy, a family member may be needed to help with the setup. In fact, it's probably a good best practice to make sure there are two people available (the main participant and another) during the virtual assessment so that someone is there to balance an elder if they're at risk for falling. Given that participants are not trained in these types of activities, be sure to allow quite a bit of time. And try to make it fun!



ASK AN EVALUATOR

I'm still a little confused about how to collect baseline data. Can you give a few tips and some key takeaways?

The point of baseline data collection is to be able to identify what the situation was like before the program to show if change happened as a result of the program and how much change took place. This could be a behavior (e.g., using child restraints) or it could be another type of outcome (e.g., number of falls experienced).

The data collected at baseline should represent the true “before” picture of the outcome you are trying to measure. For car seat use and seat belt use, it is important to choose an established observational survey protocol (based on community size) and follow the guidelines for choosing times and locations (and traffic direction, if applicable) for both the baseline observations and the follow-up observations. External factors that may affect your outcome should also be noted. For example, you will need to account for a difference in driving patterns associated with the pandemic. If you typically do observations at a location like a school or shopping area that closed during the pandemic, you may need to consider how decreased traffic in the area affected data collection. **These kinds of external factors can be very tricky to navigate when it comes to data collection and should be discussed with your Project Officer and the Monitoring Contractor.**

For functional assessments, like strength and balance, it's important to do measurement before the participant starts the classes and as soon as possible after the last class. It is helpful if the same person does the pre- and post-assessments to ensure consistency.

For falls, injuries, and hospitalizations from falls, it's important that the baseline data be collected for a group that is the same or very much like those targeted by the fall prevention program and that you will be able to obtain similar data at a pre-determined later date (e.g., 3 months, 6 months, 1 year). That way you can more accurately assess if the program changed the outcomes and not incorrectly attribute a change to the program when it really was because the baseline data was for a group that was different in some way from your target group (e.g., different age or different economic status). Additionally, you'll want to account for external factors that may affect your data, like unusual weather events that may have led to increased fall injuries in your community or schools being closed due to the pandemic.

If you have more questions or need further assistance, please reach out to the monitoring contractor by emailing [Jenn Russell](#) or [Holly McKinney](#).

Happy Retirement to CAPT Holly Billie!

from everyone at TIPCAP, IHS, and CAIANH



The first time I met CAPT Billie, she told me most straightforwardly, "This work will change your life." Over the short 7 years that I have come to know CAPT Billie, her influence has guided me, professionally and personally, to work with diligence, discipline, and compassion. To take great care and responsibility for the Communities and the culture that we were working with. And to work with intentions both for the present and future generations. "This is

important work." I will always remember those words. Author J.M. Barrie said, "Never say goodbye because goodbye means going away and going away means forgetting." Well, Captain Billie, the work you have done for tribal communities, injury prevention staff and supporting staff, and myself will never be forgotten. So, no "goodbye" from me, instead "till our paths cross again."

—Monte Yazzie, Salt River Pima-Maricopa Indian Community

TCRHCC would like to thank Ms. Holly Billie for her dedication and hard work, saving many lives through the Injury Prevention Program. Enjoy your retirement and the new journey in your life. Cherish every moment and have fun.

Ahé heé Ms. Holly Billie,
From everyone at Tuba City Regional Health
Care Corporation



Congratulations! Very well deserved after such an amazing career. Thank you for your commitment and hard work that made TIPCAP a success. I am grateful to have had the opportunity to learn from you, and I'll miss the knowledge that you bring. Best wishes to you and your family! Never forget the difference you've made across Indian country!

—Jocelyn Jackson, Ponca Tribe of Oklahoma

Holly Billie is the purest example of a highly respectable leader and someone whom we are fortunate to make claim to as a great representative of the Navajo Nation. Holly has one of the highest work ethics that I've ever come across; her attention to detail is impeccable. Holly's interest in ensuring safety across all Native American Tribes, including checking in on the Navajo people, was so enduring to us all, and I know for sure it has given me, personally, a true example of what outstanding leadership should be. Holly is one who is respected for the many roles that she has held in her professional career and a true class act that will be hard to follow. However, I believe that she has left us examples to follow in making our safety programs excel continuously.

We, at Navajo, wish Holly the sincerest Retirement Blessings and thank her for her remarkable leadership.

—Norma Bowman, Navajo Division of Transportation

CAPT Holly Billie,

You have been a true inspiration and thoughtful leader for indigenous health and safety folks. I feel very grateful to have experienced, in my career, your dedicated leadership, authentic presentations, and simple conversations over lunch getting to know one another. You have helped foster and grow injury prevention for many years beyond your career years. I am so happy for you and at the same time I will miss you at injury prevention events. I feel very humbled and grateful to have been part of the TIPCAP team and look forward to many years within the injury prevention field. A million times thank you for your dedication and service to indigenous health and safety. I wish you the best in your future endeavors.

Pinigigi,
Jennifer Barta, Winnebago Tribe of Nebraska

In 2008, you assisted in the hiring of me. You introduced me to injury prevention and planted the seed for a career I never expected. Then, many years later, you hired me again. This time at HQ to fill a brand new IP position. It has been an honor to learn from you and watch you give this program global recognition! I admire you as an expert in IP, as a woman, as a mother, and as a good and decent human. You will be missed. Congratulations, and I wish you all the best in retirement!

—Molly Madson, IHS

There is a special magic and holiness about an indigenous woman. They are the bringers of life (sacred life givers) to all Dine' and humanity. She is a mother of empathy and a devoted coach of humankind.

Holly, you have been a great source of inspiration, someone that I've looked up to from the day we first met! I appreciate you for all you have taught us and the knowledge you have shared. You have been a wonderful colleague and a mentor to all. Thanks for the years you have spent working hard for us. You will be immensely missed.

Congratulation and best wishes on your retirement. May it be even better than you ever imagined! It is the beginning of the open highway. Stay young at heart, kind in spirit, and enjoy retirement living and travels.

In your honor, I will continue my endeavors in injury prevention and coach someone else in my path as you gave me.

My prayers for you sister.

May the sun bring you energy by day, may the moon softly restore you by night, may the rain wash away your uncertainties, may the breeze blow new strength into your being and may you walk gently through the world and know its beauty, all the days of your life. In beauty all day long, may you walk through the returning seasons, may your words be beautiful, may there be radiate beauty within you. I finish my prayer for your Navajo beauty.

May you walk on the trail marked with pollen.

May you walk in beauty before you,

May you walk in beauty behind you,

May you walk in beauty below you,

May you walk in beauty above you,

May you walk in beauty all around you,

Love you sister,

Antoinette "Toni" Short, Apache Tribe of Oklahoma

Dear CAPT Billie,

Working with you at the helm of the IHS IP Program has been a true inspiration and honor. Your knowledge and expertise in tribal injury prevention are unapparelled and we feel so lucky to have had the opportunity to get to know you, learn from you, and observe the wonderful work you do in Indian Country. Thank you for being a mentor, a guide, and for sharing your love and passion for injury prevention. You will be greatly missed by all. We wish you all the best in your retirement and we are excited to hear all about your future travel and adventures.

With gratitude and best wishes,
The contract monitoring team at UCD CSPH CAIANH

The JBCI TIPCAP staff would like to say a big "Thank You" to CAPT Holly Billie for all her hard work with the TIPCAP program and especially the encouraging words as we began tackling our Motor Vehicle Injury Prevention Program. We wish you the best in your retirement.

Best wishes,
From all of us at the Jena Band
of Choctaw Indians in Louisiana
Lacy, Venae, and Mona

Holly,

Thanks for being an amazing leader and friend. We will miss you and all your dedication, energy, and support.

—PHX Area IP Team

Congratulations to CAPT Holly Billie!

Thank you for a career of hard work dedicated to reducing injuries for tribal members across the Nation. It has been a pleasure working with you, and we hope you enjoy a safe and happy retirement. You will always be welcome to visit us and cool off in Kotzebue.

—Livia Bracker, Maniilaq Association

Congratulations on your retirement!

I wish you abundance and happiness for your future journey. I want to say thank you, and I appreciate you meeting with me on several occasions. I feel very fortunate to have been led by you and your staff at the Injury Prevention Program Division of Environmental Health Services Indian Health Service for these past years. I will always be grateful for the times I have had to speak with you in person and to hear you deliver tribal injury prevention messages and keynotes at various venues. Thank you for also providing me the opportunity to address the TIPCAP cohort and conferences in a creative way. The fact that you are an Indigenous woman leader from a matriarchal society speaks volumes. I have learned from you and respect the way you go about your professional work and the way you carry yourself. Thank you for sharing your experiences, knowledge, expertise, and wisdom with so many of us. We are going to miss you tremendously!

Respectfully in gratitude, A. Sixtus Dominguez, AASTEC



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