Greetings to the Tribal Injury Prevention Cooperative Agreement Program Team! We present to you the TIPCAP June/July 2015 Newsletter. This newsletter features program successes and accomplishments from TIPCAP sites and highlights the Year 5 Annual Workshop.

TIPCAP Data Online Summary

Based on the TIPCAP Data Online submissions, the Tribal Injury Prevention Cooperative Agreement Program (TIPCAP) reports the following:

- 75 percent of the 137,760 drivers observed were wearing their seatbelts.
- 69 percent of the 38,527 passengers observed were wearing their seatbelts.
- 5,700 child safety seats were checked as being correctly used.
- 1,100 child safety seats were checked as being misused (and subsequently corrected).
- 8,900 child safety seats were distributed, and only 280 of those seats were purchased/supplied from other non-TIPCAP funding sources.
- 272 child safety seats were confiscated due to outdated or defective seats.
- 460 child safety seats arrived at TIPCAP checkpoints uninstalled by parents or caregivers.

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Want to see the TIPCAP Annual Workshop in pictures?
If so, follow this link: https://www.flickr.com/photos/124353566@N06/show/
Greetings TIPCAP Coordinators,

The tremendous accomplishments over the five years have been very significant for the Tribal Injury Prevention Programs and Indian Health Service. On behalf of the IHS Injury Prevention Program, I want to express my gratitude to all of the TIPCAP Coordinators, IHS Project Officers and advocates in making this happen.

The unique work of the Tribal Injury Prevention Program reached some of the most remote Tribal communities in the country. As we move forward, we want to keep the momentum in sustaining TIPCAP. Many TIPCAP Coordinators have reported that their positions will continue to be funded by the Tribe or Tribal organization. This is also very positive news.

TIPCAP supports the IHS mission in building Tribal capacity to address the injury disparities in American Indian/Alaska Native communities. I want to thank you all again in your role in saving lives. I wish all you well and hope our paths will meet again.

Abé’heé’ many thanks to TIPCAP!!

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These results demonstrate the power of TIPCAP to change lives by preventing deaths, hospitalizations, and injuries from motor vehicle crashes. In reference to cost savings, Child Safety Seat Distribution, ages 0–4, yields an estimated cost savings of $2,400 for a cost of only $57 per seat provided. As TIPCAP distributed 8,915 seats at a cost of approximately $508,155, it generated more than $21.3 million in benefit to society.

Child Seat Misuse Reduction and Design Improvement at a car seat checkpoint involves ensuring that child safety seats are properly installed in vehicles, that children are appropriately fastened in the child seat, and that parents and caregivers have an understanding of procedures. Uniform latches to anchor seats contributed to the effectiveness of this intervention. The Child Seat Misuse Reduction and Design Improvement yields an estimated cost savings of $600 for a cost of only $6.60 per seat that is being used when it comes to the checkpoint. As TIPCAP had 6,873 seats come through their checkpoints (5,737 of which were correctly used and 1,136 that were being misused) at a cost of approximately $45,362, it generated more than $4.1 million in benefit to society.

The total benefits mentioned are the amount these interventions saved by preventing injuries. These benefits to society include medical costs, other resource costs, work loss, and quality-of-life costs.

Econometrica expresses its gratitude to the grantees for participating and engaging in the pilot study of TIPCAP Data Online.


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Reno-Sparks Tribal Health Center

Injury Prevention Program (IPP) Moves Toward Sustainability

It is what every hard-core, bleeding heart, nonprofit worker dreams about: sustainability. It usually comes at the expense of someone’s position. While the service is deemed necessary, the personnel who provide the service are not, so one of several things can occur. Many times, the service provided by grant personnel is delegated to another regular, full-time (hard money-funded) employee, or it is discontinued at grant dissolution.

However, Reno-Sparks Indian Colony made a decision to support further Injury Prevention efforts. At a special economic development meeting held on April 29, 2015, the Reno-Sparks Tribal Council voted on an action item to modify the Reno-Sparks Tribal Health Center’s compact budget by $2,274,157 and the third-party budget by $1,412,356. These monies will be used to convert an existing building into a satellite clinic, renovate shelled space, and expand existing patient services. As a result of Council approval, Injury Prevention will no longer rely exclusively on grant funding. Salary for the previously grant-funded position of Injury Prevention Coordinator will now be funded as part of the Reno-Sparks Tribal Health Center’s budget, beginning September 1, 2015.

The road to sustainability is not simple, but it has been made possible under the leadership of Reno-Sparks Health and Human Services Director, Angie Wilson. Under Ms. Wilson’s direction, Reno-Sparks Tribal Health Center has moved from being primarily funded by the Indian Health Service to functioning as a Title V Self-Governance Compact. In partnership with the Affordable Care Act, Medicaid expansion, Tribal Health Benefits Coordinators, and the Silver State Health Insurance Exchange, funding for the Tribal Health Center has increased by 95 percent. Much of its revenue is now generated through third-party billing, rather than solely from Federal funds. Through these increases, the Reno-Sparks Tribal Health Center is able to expand patient services, making cardiology, radiology, obstetrics and gynecology, and several other services—including Injury Prevention—available for direct care.

The Reno-Sparks Injury Prevention Program (IPP) will continue to seek grant funding for project expenses. However, funding full-time, regular Injury Prevention personnel is a start. The IPP plans to expand Child Passenger Safety and Elder Fall programs and incorporate new prevention initiatives.
The Great Plains Tribal Chairmen’s Health Board (GPTCHB) Great Plains Ride Safe Child Passenger Safety Program partnered with the State of South Dakota and nine programs located within both urban and reservation locations to conduct five Safe Native American Passenger (SNAP) training courses, education, and outreach about correct child safety seat use.

In an effort to decrease misuse or nonuse of child safety seats, each participating program had a certified Child Passenger Safety (CPS) Technician educate parents and caregivers about the correct use of child safety seats. Through our collaborative efforts, we distributed 1,260 child safety seats to families residing in the Great Plains Area.

Gina Yellow Eagle, Injury Prevention Coordinator and CPS Instructor, recently trained 13 CPS Technicians to continue the mission to save lives and prevent injury and death due to misuse or nonuse of child safety seats.

GPTCHB plans to apply for additional funding from the Tribal Injury Prevention Cooperative Agreement Program to continue to provide outreach, education, child safety seat distributions, and SNAP trainings to families residing in the Great Plains.
Tribal Injury Prevention Cooperative Agreement Program (TIPCAP)

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Tribal Injury Prevention Cooperative Agreement Program (TIPCAP)

Tuba City Regional Health Center

Success Story

Quote from
Tuba City IP Coordinator:
“Coming into this position, I had no idea how important car seats and seatbelts were. Now, teaching kids about Motor Vehicle Safety has become a passion.”

Motor Vehicle Safety

The Tuba City Injury Prevention (IP) Team had great success in promoting Motor Vehicle Safety within the Tuba City, AZ, Service Unit communities. Topics included child passenger safety, all-terrain vehicle (ATV) safety, teen driving, dangers of cell phone use while driving, and seatbelt safety. Every year, the IP Team participates in the following events: Walk-to-School Day, Law Day, Red Ribbon Week, Child Passenger Safety Week, Click-It or Ticket-It, and the Tuba City Fair-Kids Day. In addition, on a routine basis, the Team conducts car seat clinics, police checkpoints, and Car Seat Thursdays (the IP Team is available two Thursdays each month for those needing education on car seats). IP has worked hand-in-hand with the Pediatric Clinic, Women’s Clinic, Obstetrics Unit, and Pediatric Unit, in addition to the Temporary Assistance for Needy Families program and the Women, Infants, and Children program. IP has also collaborated with local schools, county offices, Head Start centers, police officers, Bureau of Indian Education schools, and local government officials.

Tuba City Service Unit Car Seat Use
The IP Team consists of 13 Child Passenger Safety Technicians (CPSTs), 21 committee members, and many more volunteers. Besides providing education and enforcing the law, the Tuba City IP Team provided several teaching tools to Head Start centers and local schools. The IP Coordinator assisted with the hospital’s Level III trauma designation, and gave quarterly presentations to the hospital’s Board of Directors and local government officials.

**Elder Falls**

The creation of education flipcharts and continuous fall prevention education to elders by public health nurses, community health representatives, senior citizen center staff, and the IP Coordinator have made an impact in decreasing elderly falls. The strong Geriatric Clinic at Tuba City Regional Health Care center provides a comprehensive exam for elders.

**Suicides**

The Tuba City Regional Health Center has established a strong partnership with the Navajo Department of Behavioral Health Services Tuba City Office in hosting bimonthly “Question, Persuade, and Refer” suicide trainings.
The Kaw Nation Injury Prevention Program hosted an impaired driving activity for Tribal youth in Kay County, OK, on May 9, 2015, at the Foursquare Church in Ponca City, OK. The title of the event was, “My Future is too BRIGHT, to be ruined by ONE Night!” The impaired driving activity aimed to educate Tribal youth about the dangers of driving impaired or riding with an impaired individual. Hearing a message about making positive life choices can encourage them to live the life they want for themselves.

The attendees listened to a presentation conducted by Oklahoma Highway Patrol (OHP) Trooper Russell Callicoat. Trooper Callicoat currently serves as the No. 1 Driving Under the Influence (DUI) Trooper, and impaired driving prevention is his primary focus. Trooper Callicoat gave the Tribal youth a tour of the ENDUI vans; the Oklahoma Highway Safety Office purchased these vans as a tool for the ENDUI campaign. The youth were able to see the new devices and tactics that the OHP use during DUI checkpoints and patrols. The Tribal youth in the picture above were the first youth to ever tour the ENDUI vans and receive a hands-on educational presentation about the ENDUI campaign. This impaired driving educational activity was coordinated through the Southern Plains Tribal Technical Assistance Program at Oklahoma State University and Tribal Safety Circuit Rider, Tabatha Harris.

The Tribal youth also had the opportunity to listen to a Victim Impact Panel that was coordinated by Valerie Rudman for the Kaw Nation Injury Prevention Program. The youth listened to a panel of victims, an offender, a first responder, and a mother who lost her son. This activity was conducted to show Tribal youth that their life could be changed forever if they choose to drive impaired or ride with an impaired person.

With coordination through the Tribal Safety Circuit Rider, the Kaw Nation Injury Prevention Program, Oklahoma Highway Safety Office, and Oklahoma Highway Patrol are able to develop a partnership for impaired driving prevention. The State agencies’ work with Tribal programs plays a role in ending the DUI problems that exist within Oklahoma. The Tribal Safety Circuit Rider Program is designed to provide resources and assistance with coordinating safety and prevention activities. For more information about the Southern Plains Tribal Technical Assistance Program, please go to https://ttap.okstate.edu; for more information about the Oklahoma ENDUI campaign, please go to http://enduiok.com.
Greetings from Pueblo of Jemez, New Mexico

The Pueblo of Jemez Injury Prevention Program (JIPP) has flourished for the past 15 years due to the insightful management of Mara Benton. Under her consistent leadership and direction, the program has had much success. Some notable accomplishments include:

- The program provided 429 car seats to keep our children safe while traveling. Car seat use also complies with Tribal Traffic Codes.

- Home Safety was made available to the community, including 111 elderly. The program installed 494 smoke alarms in the homes of Head Start children, the elderly, and the larger community. Installation of these smoke alarms has decreased the injury rate among the elderly.

- The program fitted 422 children and youth with bicycle helmets and 22 youth with all-terrain vehicle (ATV) helmets.

- Sustained effort by the dedicated Tribal Injury Prevention Cooperative Agreement Program (TIPCAP) employees have led to seatbelt use rates of 87 percent this year, exceeding the goal of 85 percent. In addition, child restraint use increased to 82 percent. The program supports two of its staff members as Certified Car Seat Technicians and routinely assists the community not only by providing car seats for infants and youth but also by training families in the correct use of the receive car seats they receive.

- The JIPP reached more than 2,100 individuals through education sessions, which provide ongoing and multiple educational classes to community youth, from Head Start through elementary school. Children are assessed at the end of the year to determine how much of the information they retained and actively utilize.

- The Jemez TIPCAP Program and the Coalition team composed of Tribal police, emergency medical personnel, and health and safety officials was responsible for the adoption of Tribal resolutions and enforceable ordinances related to seatbelt use, having earned the support of the Tribal Government and the community. Ms. Benton did an excellent job of including program sustainability as part of her planning; this includes ensuring that the two additional employees are Tribal employees, providing ongoing training for staff members so they understand the program and how it works, and leveraging Federal funding to convince Pueblo of Jemez leadership of the importance of continuing the program after the Federal grant expires.

This is our farewell to TIPCAP because our contract expires in August. Marlon Gachupin and Antonio Blueeyes will continue under the Tribal sustainability plans. Ms. Benton will be retiring this year after completing 15 years with JIPP.

This is a great example of a successful Tribal Injury Prevention Program. Through its accomplishments and planning, JIPP will continue to take care of our elders and children.
The Oglala Sioux Tribe (OST) believes in education and enforcement. Education is the key for changing behaviors.

Accomplishments during our baseline years, 2010–2014, include:

- The number of motor vehicle crashes decreased from 315 to 226.
- The number of fatalities decreased from 15 to 2.
- The use of adult seatbelts increased from 11.9 percent to 52.5 percent.
- Child safety seat use increased from 8 percent to 78 percent.

The land base on our reservation is 3.1 million acres/4,844 square miles. Our reservation has nine districts, and each contains communities.

Our population is about 49,000 (enrolled members).

The service population is about 35,000.

Educational opportunities utilized by our program included:

- Community—Provided two trainings for Child Passenger Safety Technicians (CPSTs), bringing to a total of eight CPSTs on our reservation.
- Schools—grades K-12.
- Broadcasting on our local radio station KILLI once a week, reaching about 6,000 per airtime.
- Health fairs.
- Wacipis.
- Athletic events.

We provide education at each opportunity that presents itself.

Child safety seat distribution took place in all nine districts.

The total number of seats distributed to OST members since 2011 includes:

- Infant (156)
- Convertible (934)
- Boosters (1,041)
- Combo (128)

We have helped our children by providing a safe ride and education to parents, caretakers, and grandparents.

With our birth rate at more than 300 for the past 5 years, this is a program that is needed by our people on the Oglala reservation.

Sustainability will be our goal for providing and continuing this service to the residents on the Pine Ridge Indian Reservation.
The Tribal Injury Prevention Cooperative Agreement Program (TIPCAP) Pre-Annual Workshop was held on June 16, 2015, at the Indian Health Service (IHS) Headquarters in the Reyes Building in Rockville, MD. The Pre-Annual Workshop focused on the Injury Prevention (IP) Fellowship Symposium and the Advisory Committee Meeting.

IHS IP Fellowship Symposium

- The IHS IP fellowship program was initiated to address the high disparities of injury-related morbidity and mortality among American Indians and Alaska Natives. This year's TIPCAP Fellows graduates included Julie Adams, IP Coordinator from California Rural Indian Health Board, Lyndee Sue Hornell, IP Coordinator from Hualapai Health Department, Adrianna Gibson, IP Coordinator from Tule River Indian Health Center, Inc., and Gina Yellow Eagle, IP Coordinator from Great Plains Tribal Chairman’s Health Board. The project studies conducted by each of the fellows are highlighted below:

  - Julie Adams, *Securing Two Worlds*: Improve child passenger safety (CPS) by increasing knowledge and correct usage of car seats by American Indian families in California.
  - Lyndee Sue Hornell, *Measuring the Reach of the Hualapai Elder Falls Prevention Program*: Identify and increase the reach of the services provided to the elders of the Hualapai Indian Tribe of Arizona.
  - Gina Yellow Eagle, *Distracted Driving Toolkit*: Increase awareness on the life-threatening dangers of distracted driving and develop a toolkit for Tribal colleges and communities to promote responsible driving behaviors.

The fellows were recognized for their participation and success in program completion. Several TIPCAP peers attended the presentations to help gain a better understanding of the IHS IP fellowship program and its expectations. The presentations were a learning opportunity to incorporate findings and best practices at their communities.

The session was also held on [www.adobeconnect.com](http://www.adobeconnect.com).

The culmination of the Injury Prevention Specialist Program Development Fellowship is the graduation symposium where the fellows present their injury prevention projects. This is a recording of those presentations.

The Advisory Committee Meeting

The Advisory Committee meeting focused on feedback from the group to assist the program for the next cycle. The discussion items are presented below:

- Tribal IP Coordinator’s Experience Survey: Their group consensus is to conduct an IP Coordinator Experience Survey before the end of the cycle. In collaboration with IHS and the Advisory Committee, Econometrica will develop and distribute the survey via SurveyMonkey by July 2015. Survey results will help inform program improvement and needs for the future TIPCAP cycle.

- Recommendations for the new cycle regarding the Advisory Committee: Group members were all in favor of continuing the Advisory Committee in the upcoming grant cycle. They confirmed the value of the committee to serve as a vital link between TIPCAP grantees and IHS. The group shared the importance of increased communication and engagement from all stakeholders, and the need to develop a mentorship program to help guide new TIPCAP Coordinators.

- TIPCAP Data Online Feedback: As the first trial of TIPCAP Data Online ended on Friday, May 29, Econometrica was interested in seeking the group's feedback and recommendations for improving the utilization of the Web-based forms. Overall, the group felt the tool was helpful with managing and reporting data on occupant restraint activities. The group agreed that the Seatbelt form was good and simple to complete. However, many suggested changes to revise the Child Safety Seat form based on the various methods used by sites to conduct Child Safety Seat events. Econometrica will work closely with IHS to address these suggestions in order to meet the needs of the future TIPCAP program.

Site Visit

Following the Advisory Committee meeting, the TIPCAP grantees participated in a group visit to the National Museum of the American Indian (NMAI) in Washington, DC. The group commuted to the museum via the Washington Metropolitan Area Transit Authority Metro Rail System and was accompanied by Econometrica staff. The Office of Interpretive Services provided a scheduled guided tour. NMAI has one of the most extensive collections of Native American arts and artifacts in the world!
The TIPCAP Annual Workshop convened June 17-18, 2015, at the Washington/Rockville Hilton Hotel in Rockville, MD. The event had 79 participants. The meeting packets that were distributed at registration consisted of the Program Agenda, TIPCAP Member Profiles, a handbook presenting each site's program and major accomplishments, a Washington, DC, Visitor’s Guide, TIPCAP 2010–2015 Success Stories, and Workshop Evaluations.

The theme of this year's workshop was “Reporting Program Findings.” The workshop served as a platform for TIPCAP grantees to report program findings about IP activities conducted throughout the grant cycle, which included highlighting program implementation strategies, challenges, impact and outcome evaluation, best practices and lessons learned, and plans for sustainability. The workshop session topics included the following: Occupant Restraint, Child Passenger Safety, Community Networking, Elder Fall Prevention, and Suicide and Bullying Prevention. Presentations were conducted in an oral panel and/or poster format. Additionally, the workshop included keynote speakers: Tareka Wheeler (Safe Kids Worldwide), Lawrence Robertson (Bureau of Indian Affairs (BIA)), Tabatha Harris (Southern Plains Tribal Technical Assistant Program (TTAP)), Bruce Finke, M.D. (IHS), and Cynthia LaCounte (Administration on Aging). Each speaker presented on areas for sustaining existing partnership and IP programs, and provided tools and resources about additional funding to support IP activities beyond the grant.
Annual Workshop Panel Presentations

Day 1 of the workshop focused on motor vehicle injury prevention, and Day 2 primarily presented on programs about elder fall prevention and suicide and bullying prevention, along with poster presentations about program accomplishments. The following are the common themes on program effective strategies, best practices and lessons learned, and sustainability efforts from the TIPCAP Coordinators’ panel presentation sessions:

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Effective Program Strategies

- Conducted comprehensive media campaigns—such as billboards, handouts, and radio public service announcements—to help increase program awareness.
- Produced handout materials in both English and Native languages.
- Tailored a TIPCAP program to fit the needs of other IP efforts—such as Healthy Start and Early Head Start Programs—in the community.
- Utilized standardized data collection methods to observe occupant restraint usage.
- Hosted community outreach and education events that target program population.
- Established mandatory occupant restraint use primary laws to help increase rates when enforced by law enforcement.

- Conducted car seat distribution along with education training programs that provide demonstration on how to properly install seats.
- Provided training to staff or partners on becoming certified CPS Technicians and/or Instructors.
- Offered exercise training that improves mobility, strength, and balance, and that are taught by trained, nationally certified exercise instructors or physical therapists. Exercise programs include Tai Chi and Matter of Balance.
- Conducted home safety assessments and home modifications with other health care professionals with specialized training to identify and modify home hazards that can increase older adults’ risk of falling.
Best Practices

- Collaborating with other TIPCAP, Tribal, and State programs proved to be an effective and beneficial strategy for increasing program awareness, advocacy, coalition recruitment, and community partnerships.
- Engaging with families and announcing programs during school and community events provided an opportunity to educate and advocate IP.
- Create program materials available for all age levels and culturally appropriate to the target audience.
- Present and market program results to the community stakeholders.

Successes

- Strong relationships built with IP Coalition Team, Tribal leadership, and law enforcement, partnerships that have been sustained beyond the program.
- Community has local access to the IP knowledge and resources needed to maintain achieved program outcomes.

Sustainability

- Fully funded IP positions by the Tribe.
- Institutionalized IP positions and resources within the agency/organization.
- Identifying other funding opportunities to support the costs of IP programs and services.

- Developed primary occupant restraint laws to enforce seatbelt law.
- Enhanced professional skills and capabilities. Many TIPCAP Coordinators have become certified CPS Technicians and/or Instructors, Tai Chi Instructors, or Matter of Balance Instructors.
- Increased adult and child restraint usage rates by more than 5 percent over the course of the grant cycle.
Fourteen posters highlighting the TIPCAP 5-year program’s accomplishments and successes were presented over the course of the 2-day workshop. Seven sites—Colorado River Indian Tribe, Indian Health Council, Inc., Kaw Nation Injury Prevention, Kiowa Tribe of Oklahoma, Reno-Sparks Tribal Health Center, Maniilaq Association, and Sisseton-Wahpeton Oyate of Lake Traverse Reservation—presented posters on Day 1. On Day 2, seven additional sites presented—Choctaw Injury Prevention Program, Northwest Portland Area Indian Health Board, Northwest Washington Area Indian Health Board, Tuba City Regional Health Care Corporation, Quechan Indian Tribe, Ho-Chunk Nation, and San Carlos Apache Tribal Police Department.

The individuals who presented posters and the IHS Areas they represented were as follows:

**Alaska**
- Pauline Clark

**Bemidji**
- Candice Green and Rob Voss

**California**
- Rick Romero

**Great Plains**
- Vivienne Tateyuskanskan and Cheyenne Ironheart

**Navajo**
- Tara Clitso

**Oklahoma**
- Valerie Rudman
- Stoney Trusty and Derek Anderson
- Yvette Zotigh

**Phoenix**
- Lisa Aguerro
- Carrie Brown
- Jaymee Li Moore
- Jessica Haozous
- Portland
- Bridgett Caniff
- Gloria Point
The following notes were taken during the keynote speaker presentations during both days of the workshop:

Safe Kids Worldwide and IHS: Connecting Communities to Keep Safe Kids
Tareka Wheeler, Safe Kids Worldwide

Presentation highlights:

- Safe Kids is a foreign body for CPS.
- Safe Kids coalitions in the United States work to provide proven and practical ways to keep kids safe.
- Activities conducted by the coalition include:
  - Hosting safety events.
  - Distributing safety devices, such as car seats, smoke and carbon monoxide alarms, helmets, and personal flotation devices.
  - Conducting workshops in various settings, such as schools and hospitals.
  - Advocating for effective legislation.
  - Educating parents, caregivers, and children about how to use safety devices and equipment correctly.
- Collaborate with local Safe Kids Coalition to support IP programs.
- Three things to do to connect with a coalition:
  - Participate in Safe Kids coalition meetings.
  - Identify why you want to partner with a Safe Kids coalition.
  - Access data and pull them together to make a case for where you need additional partnerships and resources.
- Safe Kids provides a standardized way of collecting data. Forms are tested and evaluated.
- Partnering with the coalition can potentially support sustainability efforts. For example, you can partner with the coalition for future funding opportunities.
- For more information about the Safe Kids coalition, access Safe Kids Website: www.safekids.org. Click on a “State” and it will bring up State coalitions as well as all the coalitions in that particular area.

Building and Sustaining Partnerships
Lawrence Robertson, BIA, Indian Highway Safety Program (IHSP)

Presentation highlights:

- IHSP mission is to “reduce the number and severity of traffic crashes in Indian Country by supporting Education, Enforcement and Engineering as well as Safe Tribal Community Programs.”
- Results on data regarding Native American fatalities reveal that of the BIA’s records, 1,834 total traffic fatalities occurred from 2009–2013. 42.6 percent were unrestrained occupants.
- Based on IHSP Tribal program performance, in FY2014, Indian Country seatbelt usage increased 73.4 percent. Although the usage rates are steadily increasing, the rate is still under the national average.
BIA IHSP funding opportunities for grantees to consider as it relates to traffic safety include the following:
- Police Traffic Services grants: Traffic enforcement grants that are awarded to Tribal Police Departments.
- Occupant Protection grants: CPS grants to Tribes for the purchase of child safety seats and CPS educational brochures and educational items.
- Impaired Driving Court grants: Help Tribes establish or expand DUI Court programs.
- The IHSP is currently working on a process to allow Tribes to apply for Traffic Records grants to improve traffic data collection.

Building and Sustaining Partnerships

Tabatha Harris, Tribal Safety Circuit Rider (TSCR), Southern Plains TTAP

Presentation highlights:
- Southern Plains TTAP provides IP technical assistance to Tribes in three out of seven TTAP centers and partners with Western and Northern Plains TTAP Regions.
- Purpose of the Tribal Safety Circuit Rider program is to promote and strengthen the Tribal safety culture.
- Main focus of the TSCR services is the behavioral aspects of safety:
  - Child safety seats.
  - Impaired driving.
  - Distracted driving.
  - Motor vehicle safety.
  - Seatbelt usage.
- TSCR has effective partnerships with various local, State, and Federal safety agencies, schools, and law enforcement, including Oklahoma SAFE Kids, Oklahoma Highway Safety Office, National Highway Traffic Safety Administration, and Tribal Police.
- The program assists Tribes with education, emergency response, engineering, and enforcement to improve safety as well as building safety coalitions in Tribal communities. A wide range of technical assistance, community outreach planning, and education services are provided by TSCR.
- TSCR program is another avenue for TIPCAP grantees to consider to continue IP efforts.

Elder Fall Prevention Sustainability Over the Long Term

Dr. Bruce Finke, IHS

Effective community-based elder fall prevention programs are:
- Education about falls and fall risk factors.
- Exercises that improve mobility, strength, and balance.
- Medication review to identify side effects or drug interactions that may contribute to falls.
- Vision exams.
- Home safety assessment and home modification by health care professionals to identify and modify home hazards that can increase older adults’ risk of falling.
- Physical therapy, vitamin D supplementation, and multifactorial risk assessments are clinical interventions to prevent falls in adults age 65 and older at increased risk for falls.
- Use data to present program findings and success stories. Data sources on fall-related injuries include Tribal Emergency Medical Services (EMS), county EMS, injury coding, Tribal survey, etc.

**Elder Fall Prevention Sustainability Over the Long Term**  
*Cynthia LaCounte, Office of American Indian, Alaska Native and Native Hawaiian Programs*

Presentation highlights:

- Office of American Indian, Alaska Native and Indian Health Programs, Administration on Aging funded 264 Title VI A/B programs (nutrition and supportive services) and 232 Title VI C programs (caregiving) to Tribal communities.
  - Provided more than $35 million to fund programs for the timeframe spanning April 2014 to March 2016.
- Elder abuse is a knowing, intentional, or negligent act by a caregiver or any other person that causes harm or a serious risk of harm to a vulnerable adult.
- Screening for elder abuse and asking questions creates a potential to catch abuse in its early stage and prevent it from escalating.
- Provided an overview of funded Tribal sites implementing evidence-based elder falls prevention programs. Programs mentioned include the following:
  - Hardrock Council on Substance Abuse
  - Little Traverse Bay Band of Odawa Indians
  - Match-E-Be-Nash-She-Wish Band of Pottawatomi Indians
  - Mole Lake Sokaogon Chippewa
2015 TIPCAP
Annual Workshop

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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 future TIPCAP program. Please feel free to contact your local Advisory Committee representative to share your suggestions and ideas about the TIPCAP program.

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The following new resources are available from the TIPCAP Technical Assistance Team:

ARTICLES


REPORTS


DEADLINES

- Year 5 Semi Annual Report—The reporting period is March 1, 2015–August 31, 2015. The due date for the report is [November 30, 2015](http://www.grantsolutions.gov). However, reports can be submitted prior to the grant ending date of August 31, 2015. Reports should be submitted at [www.grantsolutions.gov](http://www.grantsolutions.gov).

If you would like a copy of an aforementioned resource, please contact Doyin Idowu at oidowu@econometricainc.com.

TIPCAP General Announcements

- If you would like to share general announcements with TIPCAP, please provide your information to Doyin Idowu at oidowu@econometricainc.com.
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Do you have a newsletter article that you would like to submit?

Please send your article and pictures to Doyin Idowu at oidowu@econometricainc.com.