

Indian Health Service Press Release

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Indian Health Service board certifies 171 health aides in Alaska

Patients will benefit from increased access to health care workers and paraprofessionals

The Community Health Aide Program Certification Board, a federally authorized organization managed by the U.S. government's Alaska Area Native Health Service in partnership with tribal health organization representatives, certified 171 behavioral health, dental health and community health aides and practitioners during a recent meeting. Of these, 28 were certified for the first time, while 143 were certified at a higher lever or renewed their certification.

"Community health aides are proven partners in health and I am very happy to congratulate the newly certified health aides on their hard work to gain the skills necessary for this achievement," said Mary L. Smith, IHS principal deputy director. "This program to bring more health workers to Alaska Native communities has proven to be very successful. We are currently consulting with tribal leaders about the possibility of increasing the use of community health aides as part of IHS's ongoing commitment to provide access to quality health care to Alaska Native and American Indian patients."

"Community health aides are the back bone of care in remote Alaska and are selected by their communities to receive training," said Andrew McLaughlin, Community Health Aide Program certification board chair. "The CHAP program is proof that under geographical constraints, the Indian Health Service and tribal programs together accomplish and deliver a higher standard of medical care to underserved and remote populations."

Community health aides include workers in health education, communicable disease control, maternal and child health, dental health, family planning, environmental health and other fields. There are currently 489 certified health aides or practitioners in Alaska, all of them certified by the Alaska Area Native Health Service. Many community health aides filling jobs in the Native health system come from the local communities and immediate surrounding areas where job opportunities can be limited.

The Community Health Aide Program Certification Board was created in 1998 by the federal government and charged with formalizing the process for maintaining community health aides/practitioners, dental health aides and behavioral health aides/practitioners training and practice standards and policies. As the governing board of the community health aide, dental health aide and behavioral health aide programs, its function is to certify training centers and individual health aides at all levels of training. Members represent the Indian Health Service, state of Alaska, community health aide training centers, community health aide program directors and community health aides.

Examples of health aides across the national Indian health system include:

- A Dental Health Aide Program operated by the Alaska Native Tribal Health Consortium is a community-driven program providing culturally appropriate dental education and routine dental services in 81 Alaska Native communities serving over 40,000 Alaska Native people since 2004: http://anthc.org/dental-health-aide.
- The principal provider of health services at the village level in Alaska is the community health aide/practitioner. Chosen by the village council, the community health aide/practitioner is responsible for giving first aid in emergencies, examining the ill, reporting their symptoms to a physician, carrying out the recommended treatment, instructing the family in giving nursing care and conducting preventive health programs in the villages. Community health aides also store and dispense prescription drugs with physician instructions:

 http://www.ihs.gov/alaska/includes/themes/newihstheme/display_objects/documents/hf/area.pdf.
- A behavioral health aide is a counselor, health educator and advocate. Behavioral health aides help address individual and community-based behavioral health needs, including those related to alcohol, drug and tobacco abuse as well as mental health problems such as grief, depression, suicide and related issues: http://anthc.org/behavioral-health-aide-program.

As part of ongoing IHS efforts to increase access to quality health care, <u>IHS has proposed a draft policy statement to expand its community health aide program</u>, including exploring administrative requirements for this expansion. This could include the creation of a national certification board for community health aides in the IHS system.

The Alaska Area Native Health Service, one of 12 regional offices of the IHS, works in conjunction with Alaska Native tribes and tribal organizations to provide comprehensive health services to approximately 150,000 Alaska Natives and American Indians. At one time, IHS provided direct medical care services in Alaska. Through the provisions of self-governance, tribes and tribal organizations have assumed operation of all patient care facilities. IHS-funded, tribally-managed hospitals are located in Anchorage, Barrow, Bethel, Dillingham, Kotzebue, Nome and Sitka. There are seven tribally managed hospitals, more than 20 tribal health centers, more than 160 tribal community health aide clinics and five residential substance abuse treatment centers.

The IHS, an agency in the U.S. Department of Health and Human Services, provides a comprehensive health service delivery system for approximately 2.2 million American Indians and Alaska Natives.

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