The following highlights the 4th quarter accomplishments for the **Colorado River Service Unit**: 

**Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people**

- Health education in Parker provided 7 health education classes to the Colorado Indian Tribe tribal corrections department. Peach Springs PHNs delivered trainings to the LGBTQ meeting for the Hualapai tribe.
- The Supai clinic expanded services to include Maternal Child Health services, improving access to women’s health and prenatal care.
- CRSU partnered with Ft. Yuma to share a provider for Optometry coverage after the CRSU provider unexpectedly passed away. Ft Yuma provider is travelling to Peach Springs and Supai.
- Peach Springs Health Center partnered with Kingman Regional Hospital to offer Monoclonal antibody treatment for eligible COVID positive patients. A streamlined process was put in place to assist with access.

**Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization**

- All findings from the Joint Commission survey in April have been corrected with quality process and monitoring in place for sustainability of corrections made.
- In July CRSU and Phoenix Area teams collaborated to reassess and revise the current Supai COVID Response Plan. This plan defines the steps needed to efficiently evacuate a COVID positive from the Supai village in the bottom of the Grand Canyon to protect the tribal members residing there.
- CRSU has been collaborating with the CRIT tribe, La Paz County Health Department, and Regional Center for Border Health to increase community vaccinations and decrease vaccination hesitancy in La Paz County. Currently three events for vaccinations have taken place in the community and three more are scheduled.
- BioFire respiratory panel of 21 organisms went live at Parker in September 2021. This panel is used to identify the cause of upper respiratory tract infections to improve antibiotic stewardship.

**Goal 3: To strengthen IHS program management and operations**

- In August, the IHS, BIA and BIE partnered with the Havasupai Emergency Operations Center Coordinator to establish weekly huddles that aim to improve communication related to COVID-19 response.
- Parker Property and Supply department assisted with training on new M-Systems supply ordering program with Ft. Yuma Clinic staff.
- CRSU rolled out the new Learning Management System and trained staff on the use for continuing education and competencies.
- The Nursing department developed awards for staff to encourage the use of the IStar incident reporting system and to thank staff for cross training and covering in other departments.
- Standardization of rapid intubation sequence kits throughout all facilities has been completed.

Submitted by: CDR Barbara Asher RN, Chief Executive Officer

The following highlights the 4th quarter accomplishments for the **Elko Service Unit**: 

...
Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people

- Coordinating with Te-Moak Tribe and Elko Band leadership regarding a tribal resolution for site designation of a replacement facility and modular building setup.
- Hosted a health fair on August 16th with a variety of events sponsored. The event was successful and we had the largest turn out in the history of the event.
- ESU led the effort to effectively coordinate with tribal public health authorities to mitigate the COVID outbreak in our tribal communities.
- In August we recruited and on-boarded a new Family Nurse Practitioner.
- Continued work to finalize the ESU PJD/POR, which will justify the development of a new health care facility for the Te-Moak Tribal communities.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

- In July, ESU installed space saving furniture to optimize use of limited facility space.
- Finalized procurement of a LED marquee sign that will be used to communicate important information from the health center to the community.
- A Supervisory Management Analyst position was filled and Don McKenzie started at ESU on August 17, 2021.
- Coordinated a meeting in August with Area Engineers & Modular Building Company to complete drawings and design for the new modular unit.
- Initiated planning and procurement of a modular dental unit to enhance dental operations.
- In September ESU met with Family Dental Group to finalize a rate quote agreement that will expand dental services and reduce wait times for appointments for patients.
- Successfully responded to a significant surge in COVID cases during the month of September and mitigated the impact of the outbreak on our communities.

Goal 3: To strengthen IHS program management and operations

- Successfully filled the Clinical Care Coordinator position in July.
- Conducted interviews for psychologist position in August.
- Co-sponsored a Zoom meeting with Area Planning and the INNOVA Group to finalize Phase IV of PJD/POR for the new facility.
- Successfully filled the LCSW position and candidate is expected to onboard in October.
- Participated in monthly Site Selection Evaluation Report (SSER) meetings with stakeholders in July, August and September.
- Participated in site visits with Tribal leaders and Phoenix Area leadership officials, to evaluate three proposed sites for the new facility construction at Battle Mountain and two sites at the Elko Colony.

Submitted by: Andrew McAuliffe, Chief Executive Officer

The following highlights the 4th quarter accomplishments for the Fort Yuma Health Center:

Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people
Phoenix Area Quarterly Accomplishment Report  
2021 4th Quarter (July 1, 2021 – September 30, 2021)

• Ensured communication, testing access and COVID-19 vaccine priorities for our tribal partners through biweekly joint Incident Command meetings and daily contact with tribal Emergency Managers.
• Contacted patients directly to consider receiving the COVID-19 vaccine; via phone calls, post cards, and Facebook, “Fort Yuma Native Connections” weekly videos posted on Facebook and produced by the Cocopah Tribe; flyers (posted on Tribal websites).
• Ensured patients have access to in-person services again. All clinics are now fully open/operational. Patients may choose a telephone or in-person visit when applicable.
• FYHC has provided 6,426 COVID-19 tests to date and alternative site lodging for 82 patients. COVID-19 positivity rates peaked in August during the fourth quarter with a 14-day positivity rate at 16%. Positivity rate has steadily declined in September (14-day positivity rate around 6%).
• At the end of the quarter, FYHC provided 7,287 doses of the COVID-19 vaccines. Vaccines have been offered/provided during home visits by PHN and CVEs are provided at numerous tribal events, homeless missions, and tribal casinos. 95% of FYHC employees have received the vaccine.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

• FYHC Pharmacy began offering curbside pick-up and 90-day prescriptions in response to the COVID-19 pandemic and due to the popularity with patients, a staffing pattern change was approved to support continuation of both services for the convenience of our patients.

Goal 3: To strengthen IHS program management and operations

• FYHC is working with Phoenix Area engineering on several facility-related projects including the Generator project, Photovoltaic (solar power) project expansion, and the Building Automation System project. The Facility Management department is educating existing staff and expanding staffing in an effort to be less reliant on costly and challenging contract services (HVAC, pest control, grounds maintenance, and electrician services).
• FYHC partnered with the Cocopah Tribe to produce a video campaign hosted by the CEO to educate patients and provide updates about COVID-19 and the approved vaccines. Pfizer 3rd dose and booster shots were implemented.
• Despite a slow start due to the pandemic, FYHC Patient Business Office collected $5.2M of our $5.2M goal (100%) to attain the FY21 goal.

Submitted by: Jeremy B. Woodruff, Chief Executive Officer (Acting)

The following highlights the 4th quarter accomplishments for the Hopi Health Care Center:

Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people

• The Hopi Health Care Center accomplished the 19th year of the Indigenous Pride Health Worker (IPHW) Program
  o The IPHW is an intensive summer program for high school students entering their junior & senior year and recent high school graduates. This challenging academic and professional enrichment program is designed to introduce young people to careers in the health care field by exploring health professions and developing the confidence and skills necessary to become successful health care professionals.
Additionally, the IPHW Program provides students with practical opportunities to develop group facilitation, professional customer service, peer-teaching, presentation and leadership skills. Students will gain experience that will be beneficial to their future.

**Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization**

- The Hopi Health Care Center Patient Centered Medical Home team and our collaboration with our Hopi Tribal Partners had a very successful AAP (American Academy of Pediatric) CONACH (Committee on Native American Child Health) site visit on July 23, 2021.
- The Hopi Health Care Center submitted Evidence of Standards Compliance to The Joint Commission, which were accepted, to achieve full accreditation for Critical Access Hospital, Patient Centered Medical Home, and Laboratory.

**Goal 3: To strengthen IHS program management and operations**

- The Hopi Health Care Center hired the following permanent executive staff positions: Chief Nurse Executive; Clinical Director/Chief Medical Officer; and Director of Quality Management. We also hired for the permanent Patient Advocate position.
- The Hopi Health Care Center collaborated with a Hopi University of Arizona medical student to print and distribute a Culturally Tailored COVID-19 Resource Magazine: *Health Education Spotlight: Mr. Allan Paxson, University of Arizona Student*

Submitted by: Mose Herne, Chief Executive Officer

The following highlights the 4th quarter accomplishments for the Phoenix Indian Medical Center:

**Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people**

- PIMC Operative Services reopened to urgent and emergent cases on August 10, 2021. Due to the COVID-19 surge, elective surgical services continued to be offered through our community partner surgical centers. Since reopening on August 10, 2021, a total of 160 cases have been completed at PIMC.
- In support of the PIMC’s vaccine initiative, all Adult Primary Care and Pediatric Certified Medical Assistants, Registered Nurses, and Licensed Practical Nurses have been trained and are providing COVID-19 vaccines and boosters at the point of care for patients presenting to the primary care clinics.
- The Office of the PIMC CEO provided COVID-19 support to the Tohono O’odham Tribe and the Pascua Yaqui Tribe through Public Health Authority agreements that supported their COVID-19 prevention and treatment efforts. In addition, the Office of the CEO provided over twenty COVID-19 prevention support sessions to six service unit tribes and two urban health programs in the 4th Quarter.
- CT Building Project ($992,000.00) – Construction started June 29th. The modular unit is 77% complete and is being built offsite, the site work and utilities preparation are 50% complete. Estimated time for modular units to be delivered is on our around November 18, 2021 with an expected completion date of on or around February 10, 2022.
Phoenix Area Quarterly Accomplishment Report  
2021 4th Quarter (July 1, 2021 – September 30, 2021)

- Elevator Modernization ($1,307,000.00) – Contract was awarded July 19, 2021, parts are being ordered and requires a significant lead time. Demolition is to be started at or around February 2, 2022 with an expected completion date of June, 2022.
- Fourth Floor OB renovation Phase 1A ($832,000.00) – Contract was awarded July 5, 2021 with asbestos abatement, mold abatement, and painting completed. The expected construction completion date is late December 2021.
- PIMC Rooftop project for Primary Care, Administration and Specialty buildings ($175,000.00) – Contract was awarded September 2, 2021, demolition of rooftop has commenced, with an expected completion for Primary Care clinic around October 23, 2021, Specialty Clinic will be next with an expected completion November 13, 2021 and Administration to be completed December 4, 2021.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

- To address the urgent need for expanded ED waiting area due to the increased demand of the latest COVID-19 surge in ED patient volumes, the previous medical records space was converted to ED waiting area. ED flow was adjusted and the change directly impacted patient safety by improving social distancing in an at risk area.
- With the expansion of tele-health services on the PIMC campus, we were able to continue care for Behavioral Health, Pediatric and Primary Care patients, to establish care with new patients and to continue chronic disease management throughout the pandemic.

Goal 3: To strengthen IHS program management and operations

- The PIMC surgery department renewed the collaborative agreement with Creighton University/Valleywise and St. Joseph’s surgery residency program. Surgical residents have returned to PIMC, improving collaboration with our community partners and allowing surgical residents exposure to the benefits of care for patients in the Indian Health Service.
- PIMC exceeded FY’21 collection goal of $103.9M; collections were $112.2M, exceeded by $8.3M.
- PIMC welcomed James Driving Hawk as the new permanent CEO on September 27, 2021.

Submitted by: Holly Elliott, Phoenix Area DFO on behalf of James Driving Hawk, PIMC CEO

The following highlights the 4th quarter accomplishments for the Uintah & Ouray Health Center:

Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people

- The U&O Health Center has continued to operate closely with our Tribal partners to offer COVID testing at the Clinic, and vaccinations both in the Clinic and at community vaccination events.
- We have improved the vaccination rate of our Tribal beneficiaries to 63% for those over 55 years of age, and to 48% overall. This is substantially higher than the overall vaccination rate of Native Americans in Utah (32.7%).

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization
• The U&O Health Center currently has several quality improvement initiatives underway, focusing on glycemic control and patient flow efficiency. The former study is modeled on the successful Blood Pressure Improvement study from 2019, and the latter involves the Lab, Nursing, and Dietetic departments at our Wellness Center.

• The U&O Health Center has contracted with a nurse practitioner for the public health nursing position.

• The U&O Health Center has been making good use of contract dentists to continue to meet patient care demands while we await the arrival of our recently-selected permanent Dental Chief.

Goal 3: To strengthen IHS program management and operations

• Two U&O staff members, a nurse and a provider, participated in a community health fair organized by the local council of governments. They were able to provide blood pressure checks and offer health education materials to those who attended, while advocating for the IHS to those who were also our beneficiaries.

• The U&O Health Center has incorporated the Relias training system to facilitate training and orientation programs for all employees. It will also allow supervisors to demonstrate compliance when necessary, such as during accreditation surveys, or compliance with mandatory recurrent training.

Submitted by: CAPT Lawrence M. Zubel, OD - Acting Chief Executive Officer

The following highlights the 4th quarter accomplishments for the Whiteriver Service Unit:

Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people

• The WRSU Community Nutrition department assisted the Whiteriver School District in collecting data for school health records for all of their incoming students. Serving a total of 1,163 students and administering measurement of Height & Weights, Pediculosis and Acanthosis Nigricans checks. Electronic Health Record is updated with the most recent measurement. We collaborated with 3 schools this quarter:
  ➢ September 08 & 09, 2021 - Whiteriver Elementary School - 303 Students
  ➢ September 15 & 16, 2021 - 7 Mile School - 356 students
  ➢ September 15 & 16, 2021 - Alchesay High School - 503 Students

• In a joint effort with the Rainbow Treatment Center’s Community Nutrition and Supervisory Dietitian, the WRSU dietary department assisted in reviewing and revising their 4 week cycle menu for clients of the treatment center and assisted them in preparing the approved menu to assist with patient recovery. The main objectives of the menu planning are to assist with healing and help nourish the body that may have been damaged by long-term substance abuse.

• The WRSU Pharmacy’s Hospital Immunization Clinical Coordinator (HICC) organized 25 COVID-19 vaccination and 5 school-based immunization events in the last quarter. Routine immunizations and COVID-19 vaccinations were available at every event. In spite of early vaccine challenges, the WRSU team managed to provide a total of 3,853 COVID-19 vaccinations, increasing the percentage of eligible patients vaccinated to 66%.

• The Pharmacy Director and Pharmacy PCMH leadership met with pharmacy leadership, administrators and clinicians for 2 different service units—Gallup Service Unit and Crow Service
Unit, to discuss WRSU Pharmacy’s best practices. These 1-hour discussions and presentations revolved around best practices for integrating pharmacists into the primary care team and successful pharmacist-driven innovations at WRSU. In addition, PCMH Pharmacists advanced their clinical competency by obtaining a National Clinical Pharmacist Specialist certification, an American Pharmacists Association Patient Centered Diabetes Care Certificate, and an Opioid Overdose Prevention Tele ECHO training completion.

- WRSU Social Service Department developed a strategic plan for the remainder of the fiscal year, which synchronized with the care, treatment, and service goals identified in the WRSU Strategic Plan. The team engaged in a project with nursing and discharge planning to revise documentation to eliminate redundancies in data collection during inpatient stays, thus promoting a person-centered approach to care.
- WRSU Emergency Department rolled out Naltrexone IM injection in the ER to enhance treatment options for Alcohol Use Disorder. This allows a coordinated treatment and followup for patients with alcohol addiction issues.

Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

- WRSU Informatics department participated in the Alpha test and are currently participating in the Beta for the latest iCare V2 Patch 1. This upgrade improved the immunization component of iCare as well as added the ability to create panels for specific immunizations. This was very important to our site because we can now easily find patients who are due for specific immunizations.
- WRSU Informatics is the national ASQ test site for ER documentation, metrics and continuity of care. According to the CDC, American Indian and Alaska Native Populations have the highest suicide rate of any race/ethnic group in the US. With involvement from IHS national headquarters and the National Institute of Mental Health (NIMH), the Ask Suicide- Screening Questions (ASQ) screening tool has been incorporated into everyday patient encounters. The immediate impact at Whiteriver is having a process in place to both better identify potentially suicidal patients and to identify/provide help to suicidal patients that would have gone unnoticed otherwise.
- WRSU Community Nutrition Department submitted two nutritional articles on “Summer Barbecue with 6 Healthy Tips” and “Healthy Meals & Snacks along with Exercise” through Apache Scout a local newspaper vendor and also posted nutritional information on Summer Barbecue with 6 Healthy Tips at the community Head Start building bulletin board.
- WRSU Community Nutrition assisted Cibecue Head Start with health screening, measuring Height, Weight and calculated BMI for students in upcoming school data. Screening in school is the opportunity to identify children at risk for obesity and allows to consult dietitians and community nutritionist in providing healthy lifestyle information.
- WRSU Public Health Nursing Department improved public health nursing consult management processes by reducing the number of consults with improper documentation by 75% to ensure appropriate documentation of services to communities.
- On September 11, 2021 Bradley Power, DPT received the Emory DPT Outstanding Clinical Instructor Award for 2020-2021. This award is for the excellent clinical instruction that he provided to doctoral PT students on rotations here at WRSU even through the challenges of COVID-19 in 2020.
- WRSU PGY-1 Pharmacy Residency Program prepared for and successfully completed the
ASHP’s reaccreditation survey. The PGY-1 program review was extremely positive with only minor areas of partial compliance and no areas of noncompliance. Pharmacy expects to receive the formal 8-year reaccreditation certificate in June of 2022.

- The WRSU PCMH Pharmacy team drafted and submitted a proposal for an Integrated Behavioral Health Pharmacist project to the national Indian Health Service Quality Innovations Grant. The WRSU PCMH Pharmacy proposal was selected for the $100,000 grant for FY 2022, which includes staff training in quality measures and reporting methods bringing additional behavioral health support to this WRSU team.
- WRSU Medical Imaging Department has new GE X-ray, Computed Tomography, and Fluoroscopy equipment installed and fully functional. All Diagnostic Radiologic Technologists have had training and are working on the new equipment.

Goal 3: To strengthen IHS program management and operations
- WRSU Pharmacy’s HICC provided in-service training to 4 nursing departments on the soon to arrive seasonal influenza vaccine. The HICC worked with nursing and Employee Health to best determine the plan for employee influenza vaccines access, which was successfully implemented on 9/20.
- WRSU Inpatient Pharmacy Department continues strengthening their department operations through cross training, all pharmacists who staff at Cibecue were trained to perform immediate use sterile compounding techniques to be in compliance with USP 797 and 800 requirements. Inpatient pharmacy leadership successfully reviewed and revised the inpatient orientation checklists and process for both technicians and pharmacists, and created a more comprehensive, streamlined on boarding process.
- WRSU Pharmacy Department leadership identified problems with missing reimbursements for pharmacy services caused by regulations in Arizona Medicaid and strict enforcement. The implications for this enforcement was up to $2.8 million per year in missed pharmacy revenue. Pharmacy leadership proposed process changes to address the deficiency, presented the proposed process change at the August P&T meeting and successfully implemented the changes to prevent further loss of reimbursement.
- WRSU Emergency Department had a surge in COVID cases in past 2 months. The regional transfer capacity was severely limited. We developed a transfer bed capacity document to identify regional capacity in real time. WRSU shared this process with the Parker and Phoenix Indian Hospitals. This developed a process for improved critical care of ICU patients with prolonged ER boarding times. All of these measures have helped assure the highest level of care during a time of nationwide limited capacity of ICU beds and limited availability of transport.
- WRSU ED Medical Director participated in 2 separate national IHS ECHO discussions in the newly created Emergency Department ECHO series. This is a way for different sites to exchange ideas and processes to make IHS more efficient in delivery of care.
- WRSU ED is utilizing the Emergency Department Chest Pain dashboard created by the Phoenix Area Office to track compliance with chest pain guidelines, which will help improve how we care for patients with chest pain.

Submitted by: Michelle Martinez FNPe MPH, Chief Executive Officer
The following highlights the 4th quarter accomplishments for the Phoenix Area Youth Regional Treatment Centers (YRTCs) - Desert Visions (DV) and Nevada Skies (NS):

**Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people**
- DV/NS increased admissions to new patients through implementation of a rolling admission process. Patients who presented with at least one COVID-19 vaccination at the time of admission were allowed to immediately join the cohort. Patients who declined the COVID-19 vaccination were admitted but were placed in the intake group for 10 days before they were introduced into the milieu. Providing patients and referral sources increased flexibility and ease in admitting patients to both DV and NS.
- DV/NS noted an increase in the number of vaccinated adolescents partly due to applicants either fully or partially vaccinated at the time of admission and as a result of patient education at both locations. DV/NS reported 72% of admitted patients had been vaccinated. COVID-19 vaccinations were also provided in partnership with the HuHuKam Memorial Hospital and Fallon Tribal Health Clinic.
- Many of the adolescents who are admitted to DV/NS are failing school or have dropped out. Both DV/NS work with local school to get patients enrolled and provide tutoring and high school credit recovery. Patients earn an average of 5 high school credits during their four month stay.

**Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization**
- DV/NS has continued during COVID-19 to demonstrate outcome-based effectiveness through medical, clinical, educational, familial, and evidence based measures. DV/NS recorded a total of 14 youth graduating successfully during this quarter. Utilizing the YOQ and the factor of Reliable Change, all youth treated during this quarter demonstrated a reduction in symptom presentation over the course of treatment, without regard to program completion.
- DV/NS strengthened ease and accessibility of patient information by setting up a process to scan sensitive information to confidential folders while maintaining HIPAA compliance. Training and competency validation provided to nurses, counselors, and intake coordinator.
- DV began offering Dialectical Behavioral Therapy (DBT) training to all night shift staff. Classes are offered four times a week and are consistent with DBT training offered during the day. Adding this class, ensures that all employees have an opportunity to engage in and learn how to apply the principles and techniques of DBT. DBT is the therapeutic modality of DV/NS.
- In August, 100% of employees at Nevada Skies were fit tested for the Halyard N95 masks to help protect health care workers in the event of a COVID-19 positive patient. Through ongoing screening and monitoring, DV/NS have implemented measures to mitigate the spread of COVID.
- DV/NS provides an avenue for interns and volunteers to learn the organizational culture to help attract new employees and improve loyalty. Sylvia Gomez completed her Clinical Internship at DV in July 2021. Savannah Boyd is a current intern at DV working on her Counseling practicum.
- During the 2021 4th Quarter, the YRTC collected $601,783 in third party resources. Total collections for FY 21 were $2,046,891. We continue working diligently to effectively maximize our collections.
Goal 3: To strengthen IHS program management and operations

- On August 16, 2021, Desert Visions and Nevada Skies consolidated staff resources in response to the global pandemic, as a way to mitigate COVID amid rising numbers of COVID positive individuals throughout the country. Patients were transferred from Nevada Skies to Desert Visions while adhering to CDC guidelines for infection prevention. Staff escorting patients were placed on a TDY and were instrumental in maintaining quality patient care with the increased number of patients at Desert Visions. The ongoing staff consolidation and scheduled TDY has increased efficiency and reduced the burden of staff burnout.

- In July 2021, DV/NS partnered with the Phoenix Indian Medical Center (PIMC) to obtain financial oversight and budgetary management services. PIMC assisted the YRTC by consolidating and analyzing data and taking into account the organization’s goals and financial standing. In September a new Financial Management Analyst was recruited and on-boarded to oversee financial services.

- DV/NS completed an audit of the patient monitoring camera system and worked with the PAO IT department to develop a business needs statement and cost estimate for new camera equipment, installation, and maintenance. This would enhance the current patient monitoring camera system and increase safety and security.

- In July 2021, Desert Visions experienced a power outage caused by torrential rain and gusty winds. In a collaborative effort between the YRTC and Phoenix Area OEH&E, an emergency generator was procured to provide power to the facility. The concerted effort ensured patient’s comfort and prevented patients from having to be discharged. All patients were able to remain on campus with minimal disruption to their prescribed treatment.

Submitted by: Michelle McGinn, Deputy Chief Executive Officer