

**Nashville Area  
Direct Service Tribes Advisory Committee  
FY2020 2nd Quarter Report  
October – December 2019**

<b>Area Tribal Representatives:</b> Chief William Harris, Catawba Indian Nation Lance Gumbs, Trustee Shinnecock Indian Nation	<b>Federal Liaison:</b> Dr. Vickie Claymore
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**Goal 1: To ensure that comprehensive, culturally appropriate personal and public health services are available and accessible to American Indian and Alaska Native people**

With continued focus on Human Resources effectiveness and customer service, the IHS made selections on 12 open positions across Nashville facilities. Many of these positions were in direct patient care and will help continue to build on the quality of care provided to beneficiaries.

The Catawba Service Unit collaborated with the Office of General Counsel on a rate quote for OB/GYN services, working towards increasing access to care to beneficiaries. The Service Unit has also funded a Medication Assisted Therapy (M.A.T) program contract.

The IHS was able to successfully utilize substance abuse telehealth services from the Nashville Area Office to provide services to the Unity Healing Center during staff vacancies. This collaboration helped ensure quality of care during staff recruitment efforts.

The Shinnecock Service Unit held multiple meetings to collaboratively work towards increasing access to care for beneficiaries. These meetings included

- Behavioral Health Workgroup meeting including representatives from SAMHSA, Suffolk County and Tribal Administration.
- Meeting with Dr. Paul Garson, Shinnecock Clinic Psychiatrist regarding accessing additional psychiatric services.
- Steering Committee and Workgroup, and Health Technology planning.
- Wellness Meeting with Jason Cofield, Wellness Coordinator for Shinnecock Indian Nation to discuss improving and increasing access to wellness programs and activities in the community.

The IHS Headquarters and Nashville Area Office PRC department conducted a site visit to Richmond, VA to provide education and training of the Purchased and Referred Care Program to external providers in efforts to increase access of care

Lockport Telehealth capability was implemented; the service unit is able to offer Behavioral Health services.

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

Catawba Service Unit continued to utilize the Consolidated Mail Outpatient Pharmacy (CMOP) program. Currently, 26% of the Catawba Service Unit user population, approximately 465 patients, are enrolled in the CMOP program. The Catawba Service Unit is also in the process of obtaining Governing Board approval for credentialing pharmacists, as per National Clinical Pharmacy Specialist (NCPS) recommendations. P4 Doctor of Pharmacy Candidates presented at local tribal programs including the Catawba Indian Nation senior center.

Unity Healing Center has continued implementing quality improvement efforts by executing a MOA/BPA with EBCI for housekeeping and food services for residents, continued monthly QAPI meetings, and requested a contract for Quality Assurance Review to review the review ordained training with EBCI Fire Department for Fire Safety Training child maltreatment policy/procedures and provide recommendations to assist program services in the future. Unity continues to receive support from the Nashville Area Office for preparation for upcoming Joint Commission Survey Spring 2020. In October 2019 the Nashville Area conducted a Pharmacy review and recently provided a mock survey for the upcoming Joint Commission Survey review in the Spring.

The Governing Board By-laws for Lockport Service Unit have been and approved, the Governing board report template was re-designed to create a more comprehensive reporting and monitoring system. The Governing Board has also approved Behavioral Health and Dental policies and procedures. Four staff members attending the Nashville Area Office new employee orientation and received the Area Directors Nashville Experience Must Have standards and philosophy statements designed to promote and increase excellence and quality within the region.

Mashpee Service Unit introduced the Continuous glucose monitoring system (CGM) into the community to reduce A1C levels for Type 1 and 2 Diabetics through the use of Continuous Glucose Monitoring Devices. The CGM devices have proven insightful for patients in identifying problematic behaviors given the ability of the device reader to show a causal relationship between intake and glucose levels and velocity of directional trend. The device also offers retrospective analysis of the data, which has proven useful in education and adjustments in medical treatment. The preliminary data show a two percent decrease in A1C levels over a short period. Education regarding diet and lifestyle as well as medication adjustments remain the key components in improving the quality of long-term health of our Diabetic population.

Mashpee Service unit is utilizing Dashboards to improve tracking such as the Environmental tracking of Infection control, Hazard vulnerability assessment etc. “The purpose of the dashboard is to provide real-time understanding of compliance with key institutional environment health and environment of care risk management accreditation benchmarks”. This tool and its purpose were received at the National CEO conference in Phoenix Area this year and has been implemented at the facility.

The Shinnecock HSA met with Shinnecock State Clinic Administrator and PRC staff regarding processing referrals, working to improve communication through referral cycle. Working towards improving quality of data, the Shinnecock HSA participated in training on use of NYSDOH Health

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Commerce System for immunizations Registry database, and participated in an IT Modernization Webinar.

Nashville Area Business Office Manager participated in the IHS Compliance Workgroup to begin creating a Site Review Template to assist in review of direct care programs compliance with the federal regulations and IHS policies and procedures. The Business Office Manager also represented the IHS Business Office Committee in participation of the IHS Office of Resource and Partnership meeting to discuss best practices, FY2020 workplan,

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

Service Unit CEO's participated with Area Leadership in an Area-wide strategic planning session, helping to identify various options for improving communication with stakeholders. Nashville Area also continued to hold monthly CEO meetings to ensure consistent information sharing, opportunities for sharing, and consistent review and focus on collections.

The Shinnecock Service Unit's HSA, Catawba Service Unit CEO, Nashville Area Director along with representatives from multiple Area Offices attended the USET Annual Meeting at Mississippi Choctaw. Including participation in four Tribal Delegation Meetings, as well as the Health Director's Committee meetings.

The Area Clinical Psychologist along with the Nashville Clinical Psychologist Consultant will be facilitating FEVS focus group discussions regarding the results of the 2019 survey. Feedback and recommendations from these groups will be summarized and reported to Area Leadership to continue to find valuable opportunities to strengthen and improve management/operations and employee engagement.

The Aroostook Band of Micmacs fully assumed operation of the Micmac Service Unit, beginning January 1, 2020. During the transition process, to ensure communication was a priority the Nashville Area Office Transition Team met biweekly to assist and ensure a smooth transition of the Micmac Service Unit to Tribal Operation as a Title I Contractor.

Collections from the Nashville Area Centralized Business Office for our Federal Sites are at an overall 21% of our FY20 Goal. Collections total \$407,159.11 With a reimbursement increase of 70% from Medicare and 22% increase from Private payers from the same period last fiscal year. Medicaid remains the top payer. There has been 8,292 Ambulatory visits including Pharmacy.