Area Tribal Representatives:
Chief William Harris, Catawba Indian Nation
Lance Gumbs, Trustee Shinnecock Indian Nation
(Alternate)

Federal Liaison:
Vickie Claymore, PhD. Director Field Operations
Ashley Metcalf, Director, Office of Tribal Affairs
(Alternate)

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 Nashville Area continues to work to develop a workforce dedicated to delivering quality care and good customer service. There were 10 vacancy positions advertised and 13 selections made during this quarter, including direct care positions. The Nashville Area implemented a process to fully credential and privilege providers before they enter duty.

In conjunction with hiring an effective workforce, the Nashville Area has reviewed and updated New Employee Orientation. During the orientation session, the Area Director shares her leadership philosophy and the Nashville “Must Haves” which are a set of behavior guidelines that each employee is being asked to review and ascribe to in an effort to build on organizational culture and belief in delivering the IHS mission. The philosophy and “Must Haves” were reviewed with all staff during the implementation of the employees 2020 Performance Management Appraisal Program (PMAP). Individual Development Plans (IDP) were also reviewed/implemented at this time to ensure employee have opportunities for continued workforce development and training.

Monthly Area Management meetings are hosted to communicate updates and important information from Area Director, Human Resources, Information Technology, Contracting, Finance, Office of Public Health, and Field Operations.

Beginning March 23, 2020 the Nashville Area has collaborated to conduct joint organization meetings with the United South and Eastern Tribes, Inc. and Bureau of Indian Affairs – Eastern Region for a collective response and relief call for Area Tribal Nations. These calls have been critical in ensuring broad consistent communication opportunities during the ever changing COVID-19 response efforts.

Increasing access to care during COVID-19 via Telehealth has helped Service Units (Lockport, Mashpee, Catawba and Unity) to maintain essential services and patient care coordination. Services include Behavioral Health, Pharmacy, Dental and Primary Care.

Unity Youth Regional Treatment safely discharged residents at the end of March due to COVID19 response. They have continued to provide support and aftercare with residents through telehealth. These include individual therapy, family session and case management.

The Nashville Area conducted a tribal consultation session with the 7 Tribal Nations served by the Richmond Service Unit in the 3rd quarter, focusing on future service establishment and the re-designation request for each of their Purchased/Referred Care Areas to be statewide.

Shinnecock Service Unit continued to collaborate with Stoney Brook/Shinnecock Health Clinic regarding increasing access to dental care services.
Goal 2: To promote excellence and quality through innovation of the Indian health system into an optimally performing organization

Mashpee and Catawba developed emergency response plans related to COVID-19. The plan focused on developing processes to maintain essential services and minimize patients and staff exposure to COVID-19. Exposure was minimized through the use of field tents, drive up services and testing, maximizing telehealth, extending pharmacy refill days and calling patients to provide support and care coordination.

Shinnecock Service Unit working with K&M Transportation program implemented stand-by service to meet the needs of the community in response to the COVID-19 pandemic. Compliance with Tribal and State Stay-at-Home orders was maintained, however a trips were required for medical appointments and emergency food and supplies. Additionally, K&M assisted the Nation and volunteers to distribute over 70 emergency meals daily, to Elders, disabled and disadvantaged who were in need. This service has been instrumental in social distancing efforts for stopping the spread of disease. Deliveries are being made during week-days on-territory as well as off-territory nearby.

Service Units have partnered with Tribal and State Emergency Response Teams to share information, resources, community education as well as equipment and supplies for COVID-19 response.

Project TransAm continues to provide equipment and PPE to Service Units and Tribes. Service Units and Tribes can visit their website (http://www.ihs.gov/transam) to view what items are available and order them to be delivered.

The Lockport Service Unit provided approximately 500-700 masks and gloves to the Tuscarora Nation. Richmond Service Unit has delivered gloves to the Mid Atlantic Tribes, and is monitoring other available requested supplies.

Mashpee Service Unit continues to support OSHA training, Incident Command training and infection control training to reduce risk and promote excellence as we service the Community. They use CDC resources for Public education.

Catawba Service Unit continues to utilize Consolidated Mail Outpatient Pharmacy (CMOP) program at CSU. Currently, >477 patients are enrolled in CMOP. In addition, 59 patients temporarily enrolled in CMOP due to COVID-19 response efforts with anticipation that many of these patients will become permanent CMOP patients. Regular plus COVID CMOP patients = 536 patients, which is 29.6% of the CSU user population.

Unity Youth Regional Treatment Center in order to maintain staff competencies and provide quality care has provided training this quarter in:

- HIPAA (12/2019)-All staff
- Fire Safety (coordinated with ECBI)
- Matrix Model review- SSA/Clinical
- Medication Management (Feb 5&6)-SSA
- Question, Persuade, Refer (QPR)-All
• Youth Mental Health First Aid (01/30)-All
• Child Abuse Reporting (Dr. Milam) 01/07-08/2020-All
• Infection Control (02/25/20)-All
• CPR-All
• CPR instructor-Rec Specialist
• Columbia Suicide Severity Risk Screener C-SSRS-Clinical
• Crisis Intervention Prevention-All
• Progress Level System-SSA/Clinical

Area GPRA progress- 4 measures met, 4 within 5%, 11 within 10%, 6 greater than 10%. Service Units are continuing to monitor and develop action plans to meet GPRA measures.

Goal 3: To strengthen IHS program management and operations

Nashville Area Purchase and Referred Care Program and the Nashville Area Business office provided training to Service Units and Tribes on PRC process, Revenue Generation, Competencies, and running data reports.

- January 6 and January 8, 2020: PRC training provided to Health Director at Jena Band.
- February 25-26, 2020: Collaboration training with NABO provided for PRC.
- March 9 and March 11, 2020: PRC training provided to staff at Passamaquoddy Pleasant Point.

The Substance Abuse Specialist at Lockport was detailed to the Unity Youth Regional Treatment Center to assist with clinical care; the employee was transferred to Unity permanently in March 2020.

The Lockport Service Unit Clinical Psychologist along with the Nashville Clinical Psychologist Consultant facilitated three FEVS focus group discussions regarding the results of the 2019 survey. The focus group results will assist in improving the management and operations. Service Units are developing plans to address results and will share them at the next Nashville Area Office In-Week meeting.

Lockport Service Unit Staff attended a Culture Competency workshop at Native American Community Services (NACS). Pre-COVID-19 the Clinical Psychologist was invited to offer services at the Tonawanda Community House. This opportunity will be re-visited after the NYS shelter-in-place directive is lifted.

Catawba Service Unit has developed a partnership with the NAO business office to cover such functions as Billing, coding and Accounts receivable. The NAO is currently billing Medicare. DT-Trak will continue to assist in the functions until NAO has completely taken on all duties.

Unity Youth Regional Treatment Center participated in Joint Commission Mock Survey, Pharmacy Review, and Facility Conditions Survey to prepare for re-accreditation scheduled for May, 2020.

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.

The Nashville Area received a total of $6,258,998 for COVID-19 related program funding for Area Direct Service Tribes, this total includes Families First Coronavirus Response Act, Preparedness and Response Supplemental Appropriations Act, and CARES Act funding totals.