For nearly three years, the Navajo Area Indian Health Service (NAIHS) has worked to establish a clear organizational structure that fosters improved business practices to support health care services throughout the Navajo Region. We continue to monitor the COVID 19 Pandemic and shift our focus on test to treat modalities. Our health care system has learned a lot from the COVID 19 Pandemic and we continue to use the partnerships and creative solutions to maximize our health care services, resources and staffing. The overall success of our efforts during this time is a direct result of work produced NAIHS staff, contractors, volunteers as well as our partnership with the Navajo Nation and Tribal Health partners.

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

**Navajo Area Office, Arizona**

- The Navajo Area Indian Health Service (NAIHS) and the Office of Indian Self-Determination (OISD) are focused on assisting as many Navajo families as possible with water and sanitation connections. OISD is working internally with other components of NAIHS to address the very large workload, and all construction options are being explored. In addition, NAIHS and OISD are communicating externally with the Navajo Nation, Navajo Tribal Utility Authority (NTUA), Navajo Engineering and Construction Enterprise (NECA) and other collaborators in the non-profit sector and state-level governments related to sanitation construction matters. OISD eagerly awaits Indian Health Service allocation decisions for the unprecedented sanitation funding included in the Bipartisan Infrastructure Bill.

- In comparison to prior years of almost non-existent tele-medicine and that we are halfway through the Fiscal year, NAIHS will surpass the amount of Tele-Health/Medicine visits in FY 2020 of 21,213 visits. We are currently at 20,894 visits for 2022.
One of the objectives is to ensure the Gallup Regional Supply Service Center (GRSSC) team works in a cross-functional, effective work environment for efficient, transparent, and successful outcomes. To assist the team in expanding their understanding of work processes, the Director holds team meetings to discuss the challenges and develop action plans to hold each other accountable. Staff are reminded about displaying positive and professional communication styles and having a deeper appreciation of cultural awareness. As a result, teams are communicating more and resolving work inefficiencies without my immediate intervention. Furthermore, the staff is more open to communicating with the vendors to resolve shipping and payment issues. Providing guidance to the staff and share that enhancing collaboration with the vendors is essential to tackling the supply chain issues. Leadership will continue to work with the team to ensure that positive interactions occur, whether in phone calls, video calls, or meetings. The primary objective is to continue to progress towards having sufficient supplies for the customers.

The Sanitation Deficiency System (SDS) listing of projects is reported to the Navajo Nation annually. This past year, the SDS listed 349 water and wastewater infrastructure projects totaling approximately $543.3 million. At this time, the DSFC staff completed construction project documents for Fiscal Year 2021 funds which includes $6.4 million in Housing Support and $29.6 million in Regular Fund. In addition, the DSFC received Fiscal Year 2021 IHS ARPA funds which includes $1.7 million in Housing Support and $35.9 million in Regular Fund. The DSFC staff at this time are completing construction project documents for the additional IHS ARPA funds. The DSFC received $2.69 million for the Fiscal Year 2021 IHS ARPA for the “delivery of potable water” in which the DSFC staff are working on completing construction project documents.

The Office of Indian Self-Determination (OISD) staff continue to work with the Navajo Nation on the implementation of the Diné Action Plan (DAP). This multi-disciplinary collaboration seeks to identify prevention and intervention strategies to fight the effects of substance use, violence and suicide. The DAP team is now working toward building year-one implementation strategies and action plans.

The Navajo Area is currently completing planning documents for a new health facility located in Bodaway-Gap, Arizona. The New Bodaway-Gap Health Center is projected to be 123,565 square feet in size, with approximately 82 Staff Quarters. The Program Justification Document (PJD) for the Bodaway project was approved in January 2008 and included basic health services for the projected population and service area. A PJD Amendment #1 which reflects updates to the user population, scope of services, staffing, and space in addition to inclusion of space for Navajo Nation tribal health programs, was completed and approved by IHS Headquarters (HQ) on May 12, 2021. The Program of Requirements (POR) Amendment #1, which details the required space for each department, was sent to HQ in February 2021 and is under review. The POR will be finalized once the Bodaway/Gap Health Center and Quarters project budgets are updated. The budgets are currently being updated by HQ. The Site Selection and Evaluation Report (SSER) Phase I was completed in November 2020. The SSER Phase I identifies and studies a number of potential sites for the new Health Center and recommends and ultimately identifies the most suitable site. The most suitable site was determined to be the Bodaway-Gap site, which is located next to the current Bodaway-Gap Elementary School. As part of the planning phase, the primary focus is on the development of the SSER Phase II report. This involves land studies to evaluate
construction feasibility on the site and includes land surveys, geotechnical analysis, flood plane analysis, archaeology assessment, environmental studies, etc. The Phase II report was completed January 2022.

- Navajo area continues the support of the Transitional Watering Points Project, which includes increasing access to safe drinking water and the safe water storage program during COVID-19. Staff continue to support activities with the Navajo Nation, federal partners, universities, and others through the Water Access Coordination Group meetings. At this point, the Navajo Area IHS OEHE, continues triaging inquires and responding to mission activities associated with this project and IHS Headquarters is engaged in managing this effort.

**Chinle Service Unit, Arizona**

- The Rock Point Dental Clinic opened and currently serving students of Rock Point school. Tsaile will expand to provide care to all ages when fully equipped. The Chinle Service Unit is zeroing in on caring for our most at-risk populations. During the last six weeks the dental clinics have conducted “Give kids a Smile” Events where we have targeted those of the ages 18 and under providing exams, x-rays, sealants and cleanings as well as other treatment. In May there will be another event to begin making dentures for those in need from the Chinle service unit. A Periodontist has been hired to care for our elderly and those who are diabetic, who are more likely to have periodontal diseases and need the care of a specialist. Scheduled for July we will employ a pediatric Dental Specialist and open a state-of-the-art Pediatric specialty practice in Chinle to care for young children and reduce phobias. The Service Unit is working to hire a cardiologist. Continuing partnership with University of Utah to provide adult and pediatric rheumatology services. In response to the rapid increase in cases of syphilis on the Navajo Nation, the Public Health Nursing Department, working with our Public Health Maternal Child Coordinator, is expanding home visits to include syphilis treatment in the field.

- The Tsaile dental clinic has been redesigned to be able to remain completely open during the ups and downs of the COVID-19 pandemic and will be reopening the end of this month. Collaborative effort between Clinical services, Public Health, and Nursing is providing rapid connection to treatment for patients who are positive for COVID-19. The dental clinics had 1,987 patient visits and performed 16,035 procedures during the first quarter of this year. As dental staff come back to the department from other areas where they assisted in the COVID-19 response, and Tsaile reopens we will see a further increase in these numbers.

- The Chinle dental program provided 1,741 sealants placed/repaired during the 1st QTR 2022. In Office Fluoride treatment given to 608 patients. Since February 2022, there have been local site level improvements in patient screening measures as services are re-opening to address patient care, e.g., well child exams, DM eye (JVN) and foot exams, and outpatient visit mental health screening questions.

- Mobile mammography services continue at the Pinon Health Center. The PHC is looking forward to having patient visit numbers increase since the health center is progressing towards normalcy. Next services are April 26, May 24, and June 14, 2022.
• The Chinle Service Unit division of Public Health – The Mobile Clinic Unit team is resuming the delivery of health care services back into our communities and chapters by working with our Navajo Nation partners (chapter officials, senior centers, and community health representatives). The mobile health unit team is also partnering with Navajo Housing Authority (NHA) housing to expand care to the NHA communities with our Chinle Service Unit.

Kayenta Service Unit, Arizona

• February 2022, Inscription House Health Center provided community businesses and chapter houses with Halyard N-95 face masks and COVID-19 home test kits. We continue to offer patients, visitors, and guest’s ongoing supplies.

Crownpoint Service Unit, New Mexico

• The new Pueblo Pintado Health Care Center design was awarded on April 20, 2021. The conceptual, schematic, and the design development phase (the internal layout) of the design is complete. The next phase is the 65% design completion, which is expected June 2022. The design and construction estimate for the project are being updated at this time. The design completion date is estimated for October of 2022. The Navajo Area Indian Health Service has included the Pueblo Pintado Steering Committee. The Navajo Nation Department of Health, and the Navajo Nation Health Programs in the design development. The Pueblo Pintado Steering Committee includes members from the communities of Canoncito, Whitehorse Lake, Torreon, Ojo Encino, and Pueblo Pintado. The participation of the NAIHS, the Navajo Nation Health Programs, and community members will help design a state of the art health center that is both functional and respectful of the community and their cultural beliefs.

• Crownpoint Service Unit Division of Public Health Services (PHS) staff are developing plans to go back to the field. The Division of PHS staff have been members of the Epi team and Incident Command (IC) operations during the COVID-19 pandemic. They contributed enormously to the Service Unit through data management, COVID-19 case management, and serve as Section Chiefs for IC operations. The staff look forward to returning to “normal” operations and working in the field with the communities and the people we love to serve.

Gallup Service Unit, New Mexico

• The Traditional Native Healing had a total of 36 patient encounters from January 2022 to March 2022. Due to COVID-19, patient services are via telehealth until further notice. The Navajo Wellness Model components are incorporated into traditional native healing and traditional native counseling.

• The Gallup Indian Medical Center, Emergency Department received an Opioid Prevention Initiative Grant for $140,000. This funding is to support the creation and evaluation in emergency departments to understand opioid prescribing trends, develop new systems of care and best practices that improve care coordination between transitions of care, improve clinical care pathways following patient overdose resuscitation, and evaluate opportunities to improve withdrawal management within emergency departments.
Shiprock Service Unit, Arizona

- In January 2022, the Department of Defense deployed a U.S. Army military medical team for 30 days to provide medical care support to the Shiprock Service Unit’s response to the COVID-19 omicron variant surge. The military medical team assisted in the Northern Navajo Medical Center patient care wards and the outdoor COVID-19 services (car triage screening, COVID-19 testing, COVID-19 & flu vaccination clinic, etc.).

- The Northern Navajo Medical Center Sih Hasin Street Medicine Clinic is an innovative practice to reach the homeless in their environment like street life, shelters, parks, etc. Sih Hasin Street Medicine Clinic has expanded its outreach service to Farmington, NM. Physical exams, wound care, and treatment of acute and chronic medical conditions are offered. Chronic conditions may include high blood pressure, diabetes, asthma, and HIV. The team also provides COVID-19 testing, COVID-19 vaccines and flu vaccines. Each Tuesday, the team is in the Shiprock area and on Wednesdays in downtown Farmington.

- The Four Corners Regional Health Center launched Tele-psychiatry services for child and adolescent patients through the Albuquerque IHS’s Tele-Behavioral Health Center of Excellence. Tele- psychiatry is offered two days/month; patients make appointments and connect at the Mental Health department. Show rate for this service line has been positive with a decreased no-show rate to <10% for FY21 Q3 to FY22 Q1.

- The Northern Navajo Medical Center Health Promotion Disease Prevention (HPDP) Program is one of the leading community health drivers to engage community members to perform regular physical exercise and take control of their health for long-term health benefits. HPDP organizes the Just Move It (JMI) yearly events and they celebrate 30 years of JMI promoting physical activity through running, walking and other educational activities. HPDP partners with Navajo Nation Chapters and community agencies to host the JMI event to increase participation and education in personal healthy habits.

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

Navajo Area Office, Arizona

- Navajo Area Indian Health Service co-hosted with Centers for Medicaid and Medicare Services (CMS) to conduct the virtual CMS IHS, Tribal and Urban (ITU) Training in March 21-30, 2022 with 14 training sessions. There were over 1,053 ITU staff that received training in CMS Tribal Affairs, Outreach and Enrollment, Medicare 101, Office of Inspector General, Social Security and Disability 101, Arizona, New Mexico, Utah and Colorado Medicaid 101, Coding in podiatry, surgical tools and updates, Billing and Third Party Managing Backlogs in the Business Office. This is an excellent annual training resource for updates and newly hired ITU staff in Health Information Management, Business Office, Finance, Purchased/Referred Care and similar staff to earn Continuing Education Unit credits.
• In response to short staffing within the Navajo Area IHS Acquisition Program, the Acquisition Leadership Team along with the Navajo Area Executive Leadership Team seek best practices within the service unit to streamline acquisition practices across Navajo Area. Currently, there are several best practices developed from the Gallup Service Unit that appear to control their number of backlogged requisitions and continue to meet immediate patient care needs. The best practices include a streamlined approach in meeting competition needs, obtaining internal peer reviews, and organization and sequencing of meeting necessary procurement steps. Therefore, it is the Navajo Area Acquisition Program’s intention to review and implement several of the developed practices. The effort is aimed to assist other service units address backlogged requisitions and meet their immediate patient care needs with limited amount of staffing.

• A significant hindrance within the Gallup Regional Supply Service warehouse is the lack of automation for shipping and receiving products. A critical trigger point in resolving shipping discrepancies is the shipping tracking number. The inability to justify when and how many products arrived at a given time contributed to multiple issues, such as missing products, inaccurate inventory count, lack of payment, or short payments to vendors. Within the last three weeks, using the revised inspection and receiving form to identify discrepancies, inventory all inbound shipments, document the returns, and receive replacements have helped reconcile several accounts worth an estimated $115,000. The warehouse team has embraced the change and understands the critical roles and how the appropriate actions to account for product transactions contribute to prompt payment. In addition, the team is aware that they should notify the suppliers of any shipping discrepancy within 24 hours of receipt. In return, the modified process has helped suppliers to provide quality replacement products in real-time. As a result, receiving quality products and paying suppliers have improved, as evidenced by closing out about twenty Morris Systems purchase orders.

• The Navajo Area has a new leadership team called Cross Functional Acquisition Team (CFAT), which consists of team members from Acquisition, Finance, Receiving, Department Supervisors, requestors, Contracting Officer Representatives (CORs), Project Managers, and various Subject Matter Experts (SME). The purpose of the team is to provide education and pass on the knowledge of the Procure-to-Pay process to employees. Monthly meetings are held to share updates, policy changes, presentations on processes, and also ask questions in hopes to improve communication. There are areas that management is working on and naming a few such as undelivered orders, unauthorized commitments, interest payments and invoices on hold.

• Area quality manager and nurse consultant continue to provide support to Gallup Indian Medical Center, Kayenta and Crownpoint Service with their Patient Centered Medical Home (PMCH) certification process. Several best practices were identified during their 6-month review in March 2022. GIMC implement the health literacy component in their PMCH by utilizing the AHRQ health literacy toolkit. Additionally, Crownpoint incorporated self-management goal in their Electronic Health Record.

• In February, a meeting was held to address the Purchase Referred Care (PRC) audit that was conducted by IHS Headquarters’. This meeting was coordinated by Navajo area Public Health Analysis to develop an action plan for the Navajo area. A presentation was provided by NNMC PRC case manager on their process, challenges and benefits to PRC referrals.
Chinle Service Unit, Arizona

- The Opiate prescribing at The Chinle Service Unit is at an all-time low according to data from Q1 of 2022. Narcotics: Controlled Substances

![Outpatient Discrepancies](image)

- Patient Satisfaction – The Chinle Service Unit Family Practice and Internal Medicine continue to perform surveys by telephone, with excellent comments and feedback from patients. The information is reviewed at monthly Primary Care Leadership meetings.

Kayenta Service Unit, Arizona

- On-going assessments are conducted at the Kayenta Service Unit for the opening of their In-Patient Unit. In addition, preparation for their Joint Commission Resources (RJC) CMS and JCR mock survey are schedule for April to attain Joint Commission Accreditation. The Area Nurse Consultant participated in two JCR mock survey at Chinle and Northern Navajo Medical Center in February and March. In March 2022, a site visit to Pinon Health Center was made to assist and guide the new nursing supervisor in developing a plan of action on their Joint Commission mock survey findings. Area of focus are on suicide risk assessment questionnaire, infection control protocol for the Trophon unit, PCMH re-certification, and medication room. Recommendations were provided to the nursing supervisor and Health Administrator.

- February 2022, the Kayenta Service Unit School Health Education Program collaborated with the Kayenta Boarding School to celebrate February’s “HEALTHY HEART” month by having a student poster contest. Each K-8th grade classes participated in the contest and each student received an incentive for their hard work. The Kayenta Boarding School finished the month of February 2022 with activities by hosting a one-mile walk on Feb. 28, 2022 for all students and staff to promote physical activity and heart health.

Crownpoint Service Unit, New Mexico

- Crownpoint Service Unit has established a monthly Community Resource Meeting to bring together our stakeholders/organizations to exchange information and provide updates on programs and projects that will benefit the patient population. The Service Unit currently have more than 50 participants which best supports the entire effort and includes many stakeholders. The Service Unit will continue to grow and...
facilitate this meeting as additional stakeholders take interest in providing care or services to the patients.

**Gallup Service Unit, New Mexico**

- On February 24, 2022, the Gallup Service Unit Executive Leadership Team approved the Gallup Service Unit Incident Command “Moving Forward” plan on the reallocation of space and staff. The Incident Command will continue with COVID-19 functions and support with the flexibility of expanding as COVID surges occur and there is a need for increased response in a critical COVID operational area such as Car Base Testing, Vaccination clinic, call center, etc. In addition, the planning effort would allow detailed staff to return to their administrative and clinical service areas who assisted tirelessly when the surge was at its peak in response to the pandemic.

- The Gallup Service Unit has adopted Patient Centered Medical Home (PCMH) as the model for the provision of patient health care. Such model uses a team-based approach to deliver medical care that is culturally and linguistically sensitive. On August 16, 2022, the Pediatric Clinic went live and we began to receive patient care received through the PCMH model. GIMC will continue to evaluate and improve this health care model in collaboration with all members of the health care team. The ultimate goal is to integrate PCMH into our Internal and Family Medicine Clinics areas, as well as, the Tohatchi Health Center.

- The Tohatchi Health Center (THC) received the Government Performance and Results Act (GPRA) results from the Quality Improvement Nurse. The results provided 2022 Targets and a draft of the GPRA strategic plans to improve “Not Met’ measures. THC Health Systems Administrator will meet with local Leaders and staff to develop strategic plans for improving the GPRA measures.

**Shiprock Service Unit, Arizona**

- The Four Corners Regional Health Center improving continuity of care for Veterans work included creating a continuity of care dashboard and closer service line collaboration. Eighty-five Veterans were identified as living within the service area. The Public Health Nurse, Rehabilitation, and Primary care team collaborated to provide COVID-19 vaccines, update immunization, and post COVID-19 functioning score. There were improvements in COVID-19 vaccination from 59% to 82% fully vaccinated and 15% to 55% in flu vaccination. Four Veterans received rehab services post COVID (4 of 85 Veterans contracted COVID-19).

- The Dzilth-Na-O-Dith-Hle Health Center Lab department submitted their application to receive lab accreditation by the Centers for Medicare & Medicaid Services (CMS). Clinical Laboratory Improvement Amendments (CLIA) Certificate of Registration was received on 4/6/2022. The Health Center is now working towards providing more complex lab services, in order to increase access to quality care. Policies and Procedures are also being updated to meet accreditation standards.
Goal 3: To strengthen IHS program management and operations

Navajo Area Office, Arizona

- Staff from the Office of Indian Self-Determination (OISD) are actively engaged with the 24th Navajo Nation Council in providing essential information regarding ongoing federal COVID-19 response activities; funding summaries and opportunities; and IHS consultation efforts related to the American Rescue Plan Act and Bipartisan Infrastructure Bill. Examples of this engagement include:
  - NAIHS/OISD completed a Purchased/Referred Care (PRC) presentation to the Nabik’iyati Committee and Health, Education, Human Services Committee (HEHSC) regarding the PRC process.
  - Additionally, the Office of Indian Self-Determination (OISD) has met with various Navajo Nation Council Delegates to address concerns related to public safety and local community constituent health care questions and concerns.

- Navajo Area nurse recruitment, retention, and relocation policy was approved and implemented on March 18, 2022. The policy is a standardized process for the Navajo area to improve nursing vacancies, turnover rate, and staff morale. Additionally, recruitment effort includes two advertisements with New Mexico and Arizona Board of Nursing for nurse vacant positions.

- The Office of Indian Self-Determination (OISD) is facilitating conversations with the Navajo Nation Emergency Medical Services (EMS), Navajo Area Federal Service Units and 638 facilities to discuss a range of topics related to EMS’s daily operations. These topics include improving inter-facility transport, sourcing pharmaceuticals and other critical medical supplies, and facilities-sharing agreements.

- The Area Nurse Consultant coordinated and collaborated with IHS Headquarters’ Senior Nurse Consultant for Public Health Nursing (PHN) to provide a virtual training session on PHN Data Mart. The training provided detailed analysis on each PHN program in Navajo Area and how the data is reported for budget formulation including congressional testimonial at the headquarters level. Concurrently, PHN programs reviews are in progress with our four federal IHS programs.

- The Navajo Area Information Security Systems Officer (ISSO) continuously provides support to the Federal sites to mitigate ongoing security vulnerabilities. Pursuant to Binding Operational Directive BOD-22-01, IHS is required to remediate these vulnerabilities before the specified due date. In addition, supports Service Units with transition to new Integrated Access Management system for all current and new employees.

Chinle Service Unit, Arizona

- The Tsaiile Quarters Project was selected to receive $21.5M in non-recurring expense funds (NEF) to construct approximately 30 new quarters and all required infrastructure. The Program Justification Document for Quarters (PJDQ) and the Program of Requirement for Quarters (PORQ) show a total need of 98 new quarters needed to house staff of the Tsaiile Health Center. This first phase of the project will design and construct approximately 30 new quarters. This project will help in the recruitment and
retention of health professionals for the Tsaile Health Center. The PJDO/PORQ is being amended to adjust the type of quarters, from single family homes to apartment buildings, multiplex homes, and a quarters warehouse/work building. Once approved the project will be submitted for a design-build contract.

- Tsaile health Center acquired two FEMA trailers. One trailer will be used to enhance Maternal Health & Pediatric Department. This will offer a sanctuary for these patients with their own, isolated, department. It is our objective to restore a sense of normalcy, providing patient care in such a way as to help patients feel safe returning to the facility for care for these two specialties.

Kayenta Service Unit, Arizona

- The Kayenta Service Unit (KSU) HPDP/School Health Program continues to collaborate with local service unit schools by providing virtual school-based education through virtual presentations on a monthly basis. The KSU School Health Program ensured all families are educated on various intervention/prevention strategies to prevent current/future injuries, including COVID-19 safety and awareness.

- The Kayenta Service Unit (KSU) has been part of the beta testing of the Electronic Dental Records implementation of MiPACS as the x-ray image storage and viewer as a standard. There have been some issues at KHC but most of have been resolved. At Inscription House Health Center (IHHC), there are still some problems because they have to connect remotely to KHC to chart but the system has to open images stored at IHHC.

Crownpoint Service Unit, New Mexico

- Crownpoint South Quarters Repair-by-Replacement Design was awarded in August 2021. The design kickoff meeting was held on September 23, 2021. The scope of work for this project is to complete a design for the replacement of 33 quarter units. The current Longmark units were built in the 1950s and are beyond their useful life. The new quarters will be energy efficient and bring the quarters into the current century. The project design will include the evaluation of the existing infrastructure, replacement of infrastructure if needed, and a complete design package for the construction of 33 new quarter’s units. These new units will help with recruitment and retention of staff for the Crownpoint Hospital. During the design process, the Service Unit collaborated with the local CLUPC group to make decisions on building color schemes for the updated look of the community. The Crownpoint Service Unit is building coalitions to help incorporate stronger relationships with the community. The project has reached the 99% Construction Document milestone. The design is projected, and currently on schedule to be completed May 2022. In conjunction with the IHS A/E Design Guideline, the review of design has highlighted the energy efficiency and long-term sustainability of the updated Government Quarters subdivision. With the availability of funding, we anticipate construction to begin in the fall of 2022.

- The Crownpoint Service Unit Team has been very involved in preparations to obtain Patient Centered Medical Home (PCMH) certification. The Service Unit has been successfully making improvements from the last program review by developing best practices in self-management goals which are shared with
other service units. CPSU is also planning to develop a Health Literacy taskforce to enhance education supporting our PCMH model. In addition, training has been provided to administrative staff on their roles within the PCMH model. The service unit has educated frontline staff, i.e. patient registration, patient benefit coordinators, etc. on their roles and responsibilities within the PCMH model. The service unit enjoyed a positive response and achieving support and buy in from staff.

**Gallup Service Unit, New Mexico**

- The Gallup Indian Medical Center (GIMC) Emergency Department (ED) Expansion and Renovation project design was awarded September 10, 2021. Notice to proceed was issued on October 4. A kick off on-site workshop was held on October 7. The project is being designed to incorporate this project with the new Emergency Department Modular building to ensure both buildings operate together. The updated design will meet current codes and meet suggested changes to the layout per GIMC ED staff. The new completion date for the design is July 12, 2022. The GIMC project design includes renovating approximately 6,060 building gross square feet (BGSF) and the expansion of 2,282 BGSF of new space. The new ED will be approximately 8,342 BGSF. This new renovated and expanded space will help alleviate the space deficiencies, as they exist today with the ED, Observation Unit, and the Urgent Care. The renovation /expansion project will increase patient capacity and enhance patient care services.

- On February 28, 2022, the Gallup Service Unit was able to fill a permanent key position at the Tohatchi Health Center. We are pleased to announce the selection of Ms. Zondra Bitsuie as the Health System Administrator. Ms. Bitsuie comes with a wealth of knowledge to lead her team in the areas of healthcare management and operation.

**Shiprock Service Unit, Arizona**

- The Four Corners Regional Health Center leadership team demonstrate their commitment by supporting the organization to learn about errors and near misses, investigate errors to understand their causes, develop strategies to prevent error recurrence, and share the lessons learned with staff so they recognize the value of reporting their concerns. The work begins with assessing status of facility through surveys and created a baseline on October 2021. Review concepts (building awareness) of Just Culture at staff meetings and supervisors meetings; and started implementation of policies that support Just Culture.

- The Dzilth-Na-O-Dith-Hle Health Center established a new position and hired a full time Supervisory General Engineer to oversee the evaluation of design and engineering services.