2 4 The Sanitation Facilities Construction Program of the Indian Health Service

Public Law 86=121.

NOTE TO THE READER:

This is the annual report published by the Indian Health Service Sanitation Facilities Construction (SFC) Program. Detailed information concerning the SFC Program is available on the website, http://www.dsfc.ihs.gov.

Additional questions regarding the SFC Program can be directed to Headquarters or Area Offices by writing to the following address:

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Cover photo: Construction of 175,000 gallon water storage tank in Santo Domingo Pueblo, New Mexico

CONTENTS

•	-1	PREFACE 2	
	Ш.	SFC PROGRAM MISSION	
	. ال⊘	AUTHORIZING LEGISLATION.	
	I <u>V</u> .	IMPLEMENTATION 8	
	V. 3	PROGRAM FUNDING AND IMPACT	
	VI.	AREA ACCOMPLISHMENTS AND CHALLENGES 20	
	VII.	PROGRAM DOCUMENTS	
	VIII.	PARTNERSHIP ACTIVITIES	
	ĨΧ.	PROGRAM INITIATIVES	
	χ.	AREA SFC PROGRAM DIRECTORY	

This report is intended to provide a description of how the Sanitation Facilities Construction (SFC) Program is implemented and to present a snapshot of each Indian Health Service (IHS) Area's work during Fiscal Year 2014.

The IHS SFC Program identifies and reports the sanitation needs of American Indian and Alaska Native (AI/AN) while carrying out a program to meet those needs in cooperation with tribal governments meeting the physical goal of the IHS mission. The Program's challenges include improving community water supplies, wastewater treatment systems, and solid waste disposal facilities in culturally diverse and oftentimes remote areas—from Alaska to Florida and from Maine to California.

Since the passage of Public Law (P.L.) 86-121 in 1959, the SFC Program has worked in partnership with tribal governments to construct essential sanitation facilities. As a result of cooperative efforts, many tribes have developed the administrative and technical capabilities to construct their own sanitation facilities with engineering support from IHS.

PREFACE

IHS personnel work cooperatively, as close partners, with tribes...

SFC PROGRAM MISSION

The mission of the Indian Health Service is to raise the health status of AI/AN people to the highest possible level. To carry out its mission, IHS provides comprehensive primary and preventive health services. The SFC Program supports the mission of IHS by working in partnership with tribes and other federal agencies to help ensure tribal communities have access to safe drinking water and basic sanitation. The SFC Program is an integral component of IHS disease prevention activities.

The components of the SFC Program include:

- 1. Development and maintenance of an inventory of sanitation deficiencies in AI/AN communities to be used by IHS and to inform Congress.
- 2. Provision of environmental engineering assistance with utility master planning and sanitary surveys.
- 3. Development of multi-agency-funded sanitation projects;

accomplishment of interagency coordination; assistance with grant applications; and leveraging of IHS funds.

- 4. Provision of water supply and waste disposal facilities.
- 5. Provision of professional engineering design and/or construction services for water supply and waste disposal facilities.
- Provision of technical consultation and training to improve the operation and maintenance of tribally owned water supply and waste disposal systems.
- 7. Advocacy for tribes during the development of policies, regulations, and programs.
- 8. Assistance to tribes with sanitation facility emergencies.

The SFC Program is unusual among federal programs because IHS personnel typically live close to tribal communities and work cooperatively with tribes in Program delivery. Enhancing tribal capabilities and building partnerships based on mutual respect are the major keys to the success of the SFC Program.

AUTHORIZING LEGISLATION

SFC Criteria

The foresight of the U.S. Public Health Service and Congress helped a generation of AI/AN children to escape the hardship and poor health that accompany life without a safe and adequate water supply. Today, most Indian people need not fear becoming unable to carry water into their homes. A major step toward addressing this deficiency was the enactment in 1959 of P.L. 86-121, which authorized the Surgeon General to construct safe water supplies and sanitary waste disposal facilities for AI/AN homes and communities. The law's passage came only four years after creation of the Division of Indian Health, which later became the Indian Health Service. Over the succeeding years, the authority vested in the Surgeon General was transferred to the Secretary, Health, Education, and Welfare, then to the Secretary of Health and Human Services and, in 1988, to the Director, IHS. A time line summary of the legislation that created and impacts the SFC Program's implementation is included below.

Key Legislative Ac	s Impacting	Sanitation	Facility
Construction			

Year	Name	Citation	Description
1959	Indian Sanitation Facilities Act	P.L. 86-121	Authorized the Surgeon General to construct essential sanitation facilities for AI/AN homes and communities.
1976	Indian Health Care	P.L. 94-437	Authorized implementation of federal responsibility for the care and education of Indian people by improving the services and facilities of federal Indian health programs.
	Improvement Act and amendments		Also established the requirement for an annual report to be submitted by the Secretary of HHS to the President on the level of sanitation deficiency and funds necessary to address these deficiencies.

	1		
Year	Name	Citation	Description
1988	Indian Health Care	P.L. 100-713 amended Section 302 of P.L. 94-437.	Congress reaffirmed the need for provision of safe water supply systems and sanitary sewage and solid waste disposal systems serving Indian homes as primarily a health consideration and function.
1992	Improvement Act and amendments	P.L. 102-573 amended Section 302 of P.L. 94-437.	It authorized, but did not appropriate, the Secretary to provide funds to support the cost of operating, managing, and maintaining the facilities provided. It also established the definition of the sanitation deficiency levels.
1992	Indian Self- Determination and Education Assistance Act	P.L. 93-638, as amended	Congress recognized the importance of tribal decision-making in tribal affairs by giving federally recognized tribes the option of entering into self-governance compacts to gain more autonomy in the management and delivery of their health care programs.
2010	Indian Health Care Improvement Act of 2009	P.L. 111- 148 Section 10221 enacted Section 1790 into law.	Congress reaffirmed the need for the provisions of necessary sanitation facilities and services, including financial and technical assistance in the establishment, training, and equipping of utility organizations to operate and maintain facilities provided and operation and maintenance assistance for tribal sanitation facilities, when necessary, to avoid a health hazard or to protect the federal investment in sanitation facilities.





There is an SFC Program in each of the 12 IHS Area Offices.

Program Structure

The SFC Program is part of the IHS Office of Environmental Health and Engineering (OEHE). The SFC Program's activities are supported by engineers, engineering technicians, clerical staff, and skilled construction workers.

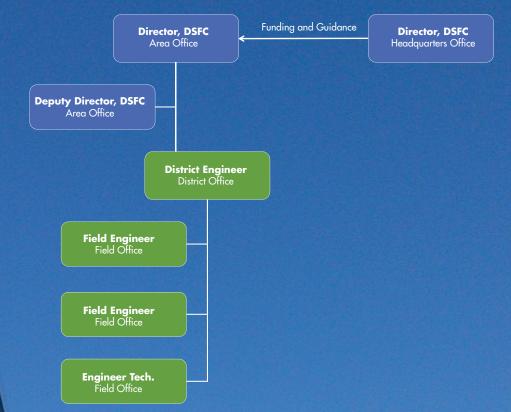
There is an SFC Program in each of the 12 IHS Area Offices. The Program's Headquarters component, located in Rockville, Maryland, assists the Area Offices by allocating project funding, establishing policies, reviewing Area program implementation practices to ensure consistent and equitable program implementation nationwide, and collaborating with other federal agencies. In FY 2014 the SFC Program included over 245 engineers, 175 technicians and 95 support staff. This comprises both federal and tribal program and project staff.

The SFC Program's efforts to provide sanitation facilities for AI/AN homes and communities benefits 566 federally recognized tribes and tribal organizations located in 38 states.

Sanitation facilities are prioritized for implementation, at the request of federally recognized tribes, bands, or groups, for eligible homes owned and occupied by AI/AN people. Projects for the provision of water, wastewater, and solid waste facilities for commercial and industrial purposes are not authorized for funding under P.L. 86-121.

IMPLEMENTATION

INDIAN HEALTH SERVICE SFC ORGANIZATION CHART



2.5

Eligible sanitation facilities projects that are approved for implementation are classified under one of the following categories: 1) projects for essential sanitation facilities for new (non-HUD-funded) and like-new Indian housing (Housing Support Projects), 2) projects to serve existing homes and communities (Regular Projects), and 3) Special/Emergency Projects.

NULLUS -







Projects are executed using a combination of P.L. 86-121 Memorandum of Agreement (MOA) utilizing federal construction and Indian self-determination (P.L. 93-638) construction project agreements. SFC projects can be managed by IHS directly (Direct Service), or they can be managed by tribes who elect to use Title I or Title V authorization under P.L. 93-638, the Indian Self-Determination and Education Assistance Act, as amended. The overall SFC goals, eligibility criteria, and project funding priorities remain the same, regardless of the delivery methods chosen by a tribe. A list of the tribes that managed the SFC Program under a Title I or V of P.L. 93-638 is included in the table below.

Tribes or Tri Program	bal Organizations in FY 2014 Man	aging the SFC						
Area	Tribe / Tribal Organization	Agreement Type						
Alaska	Alaska Native Tribal Health Consortium	Title V						
Bemidji	Grand Traverse Band of Ottawa and Chippewa	Title V						
Billings	Confederated Tribes of Salish & Kootenai (Flathead)	Title V						
-	Rocky Boys (Chippewa-Cree)							
California	Hoppa Valley Tribe	Title V						

Area	Area Tribe / Tribal Organization							
Nashville	Mississippi Band of Choctaw Indians	Title V						
	Seminole Tribe of Florida	Title V						
	St Regis Mohawk	Title V						
	Eastern Band of Cherokee	Title V						
Navajo	Navajo Nation	Title I						
	Cherokee Nation of Oklahoma	Title V						
	Absentee Shawnee Tribe of Oklahoma	Title V						
	Chocataw Nation of Oklahoma	Title V						
Oklahoma	Chickasaw Nation of Oklahoma	Title V						
	Citizen Potawatomi Nation	Title V						
	Wyandotte Tribe of Oklahoma	Title V						
	Modoc Tribe of Oklahoma	Title I						
Phoenix	Gila River Pima-Maricopa Indian Community	Title V						
Portland	Lummi	Title V						

Tribal Involvement

Each sanitation facility construction project is initiated at the request of a tribe or tribal organization and in coordination with the tribal government is maintained through project planning, design and construction. The SFC Program works to ensure that tribal utilities and homeowners have the necessary training to appropriately operate and maintain the facilities constructed.





Needs Identification Priority Process

The Indian Health Care Improvement Act (IHCIA) requires IHS to have a funding plan to provide safe water supply and waste disposal facilities to existing AI/AN homes and communities, and to new and renovated homes. In accordance with those requirements, the SFC Program annually estimates the total need to provide safe and adequate sanitation facilities for AI/AN homes and communities.

Sanitation deficiencies are reported as proposed projects or project phases. These projects represent all unmet needs eligible for IHS funding. However, some projects are prohibitively expensive to construct and/or operate and are considered to be economically infeasible.

In an effort to reflect the relative impact on health of various water supply, sewage disposal, and solid waste deficiencies to be addressed, sanitation deficiency levels are determined for each project or project phase. The IHCIA defines the following deficiency levels:



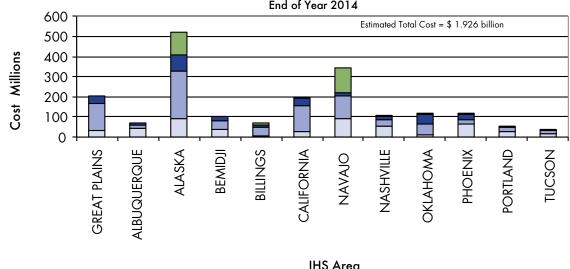
Level I: The deficiency level describing an Indian tribe or community with a sanitation system that complies with all applicable water supply and pollution control laws, and in which the deficiencies relate to routine replacement, repair, or maintenance needs.

Level II: The deficiently level that describes an Indian tribe or community with a sanitation systems that complies with all applicable water supply and pollution control laws, and in which the deficiencies relate to capital improvements that are necessary to improve that facilities in order to meet the needs of such tribe or community for domestic sanitation facilities.

Level III: The deficiency level that describes an Indian tribe or community with a sanitation system that has an inadequate or partial water supply and a sewage disposal facility that does not comply with applicable water supply and pollution control laws, or has no solid waste disposal. **Level IV:** The deficiency level that describes an Indian tribe or community with a sanitation system which lacks either a safe water supply system or a sewage disposal system.

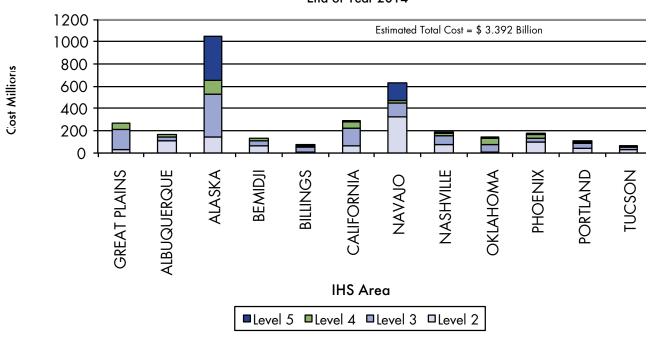
Level V: The deficiency level that describes an Indian tribe or community with a sanitation system which lacks a safe water supply system and a sewage disposal system.

A project's deficiency level is determined by the deficiency being resolved at the majority of the project homes. Projects are divided into phases, as appropriate, to provide logically independent and functional segments that can be funded in one year and which generally address one level of deficiency. Each proposed project or project phase will not necessarily bring the facilities for a community or tribe to level I deficiency or better. However, the goal is that a combination of all projects reported for each community will bring the deficiency level to level I or better.

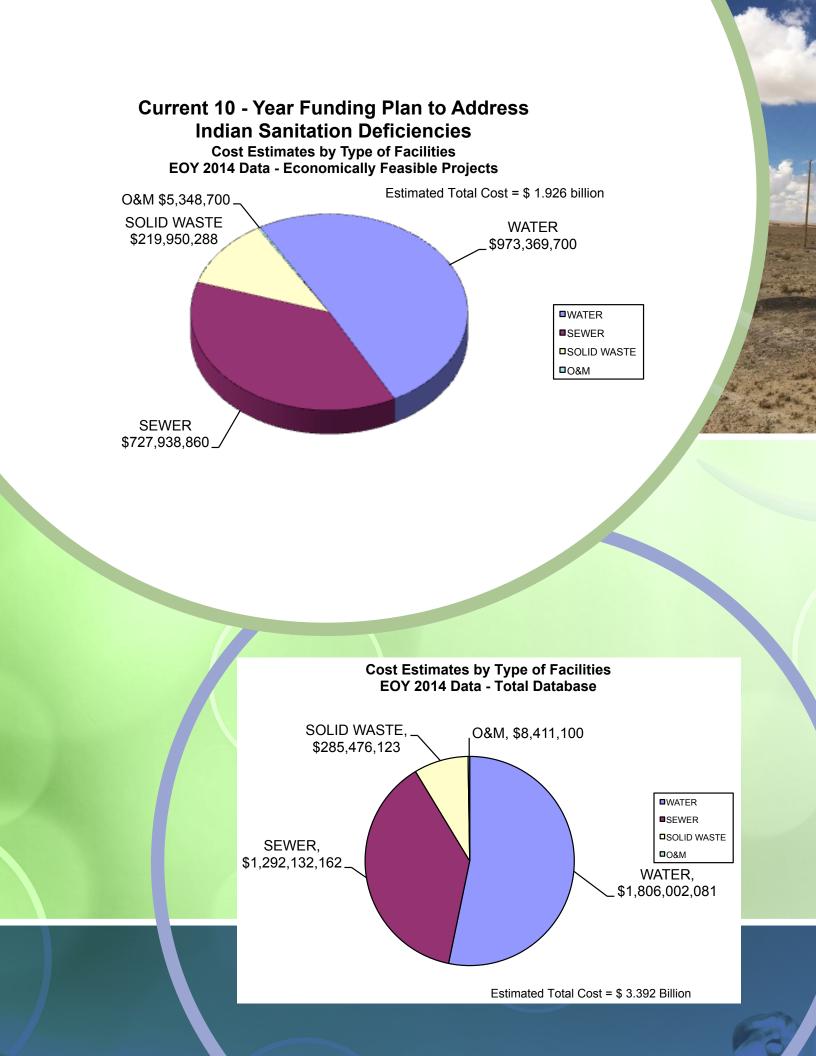


Feasible Project Costs for Indian Sanitation Facilities End of Year 2014

IHS Area



Total Project Costs for End of Year 2014





Prioritization

Projects to address the sanitation deficiencies identified are evaluated against eight factors that include: health impact, existing deficiency level, adequate previous service, capital cost, local tribal priority, operations and maintenance capability, contributions, and local conditions. Additional information on these factors can be found in the Sanitation Deficiency System Guide for Reporting Sanitation Deficiencies for Indian Homes and Communities. Points are assigned to each project based on these factors. Areas then assign each project a priority order based on the project's score. Projects are then implemented in rank order up to the level of project funds available within an Area. In FY 2014, the SFC Program was appropriated \$79M and received \$89M in contributed funding from other federal, state and tribal entities. These funds were used to provide or improve sanitation facilities to 16,998 American Indian and Alaska Native homes. The average project undertaken by the SFC Program took 3.69 years to complete construction following agreement with the tribe.

At the end of FY 2014, the percent of AI/AN homes with sanitation facilities was 91.2%. The sanitation facility needs for the remaining 8.8% of AI/AN homes and sanitation facility needs to maintain continued access to safe drinking water and waste disposal services are summarized on the charts included on the previous pages.

PROGRAM FUNDING AND IMPACI

At the end of FY 2014, the percent of AI/AN homes with sanitation facilities was 91.2%.

AREA ACCOMPLISHMENTS AND CHALLENGES

ALASKA

STAFF

Number of Engineers: . . . 53 Number of Technicians: . . 14 Number of Support Staff: 21

ACCOMPLISHMENTS

Saxman community members celebrated the city's innovative new water treatment plant and water distribution system. Alaska Native Tribal Health Consortium (ANTHC) helped build the state-of-theart digital water system, which will serve the town's 400-plus residents. The facility uses a magnetic ion exchange system, the first of its kind in Alaska, to pretreat the water prior to filtration.

ANTHC was able to complete a water treatment plant and provide water service to the remaining 24 homes located within the community of Golovin. Construction activities included the installation of a buried water main to the 24 home subdivision and water service lines to each home.

CHALLENGES

Erratic weather conditions proved to be a challenge to providing sanitation improvements to Alaskan communities, such as floods in 2013 which caused extensive damage to Kotlik. Following the flood, ANTHC construction crews and Alaska Rural Utility Collaborative (ARUC) staff have completed water and sewer services for 52 homes, clinic, and the AC store. ANTHC crews also led a community wide debris cleanup effort which removed over 2,000 cubic yards of flood debris.



FY2014

Final Reports Completed: 108 IHS Funds Received: . . . \$14,283,000 Contribution Received: ... \$13,187,946 Number of Projects Funded/Tribes SDS Total Cost: \$1,082,176,947 SDS Feasible Cost: \$520,410,766 Number of Homes Without Potable Water: 2,313



ALBUQUERQUE

ACCOMPLISHMENTS

The Area has completed all projects to address elevated arsenic levels with the exception of one that is currently under construction with anticipated completion in early summer 2015. The Area has worked closely with EPA Region 6 in providing them with updates on the number of systems that are in compliance with the Arsenic Rule through water treatment technology, blending of water sources, and systems where completely new sources have been connected.

In late 2014 the Area completed a project for the San Ildefonso Pueblo to bore under the Rio Grande and connect east and west water systems thereby removing 45 homes from deficiency level 4. The project required some creative maneuvering and management because it combined the resources from EPA funding via a direct tribal grant and an interagency agreement. Construction is substantially complete now with some minor scope items remaining.

The Mescalero Apache Tribe continues to be very active in pursuing contribution funds for the completion of major community water supply and waste disposal construction projects. Funding partnerships are very important to the completion of these projects and for the three largest projects IHS Regular Funding accounts for only 20% of the total. Many of these funds are administered by the Mescalero Apache Tribe. There is a total of \$12.6 million in active projects at Mescalero including scattered homes.



CHALLENGES

The Albuquerque Area faces challenges with the regulatory changes to the Surface Water Treatment Rule and ongoing compliance with the Arsenic Rule. Both Rules require installation of more advanced water treatment technology. With more advanced treatment comes the need for better trained and certified utility operators. This also places a greater financial burden on tribal systems with small user populations.

STAFF

Number of	Engineers:	.13	
Number of	Technicians:	. 7	
Number of	Support Staff:	. 3	

FY2014

Final Reports Completed:
IHS Funds Received:\$3,891,000
Contribution Received:
Number of
Projects Funded/Tribes Benefiting:
SDS Total Cost:\$168,192,969
SDS Feasible Cost:





BEMIDJI

ACCOMPLISHMENTS

The Area managed 46 construction projects to completion, totaling just over \$13 million with an average project duration of 2.88 years and reducing project debt by 24 projects. The Area served 5,847 native american homes with new or improved sanitation facilities. The Area completed and published final reports for all American Recovery and Reinvestment Act (ARRA) funded projects and populated the Home Inventory Tracking System for 32 of the 34 Tribes assigned to the Area. The Area also hosted two Environmental Health Support Center sponsored Operation & Maintenance (O&M) trainings, processed 120 requests from operators to attend various trainings totaling \$40,000. Twelve (12) operators passed the wastewater certification exam and 8 operators passed water certification exam. The Area provided 117 field visits to provide O&M technical assistance and completed O&M surveys for 33 tribes.



CHALLENGES

Area serves 34 Tribes over a three-state area. The Area is balancing the planning, designing and project management of the construction of safe water and sewer facilities to serve these homes while also working to reduce the backlog of final reports. The Area is working to provide cost effective sanitation facilities in the face of increased stringent regulations. Sustainability of O&M tribal programs is often a major hurdle as most tribal systems do not charge for services. The Area continues to work on motivating and educating tribal leaders on the benefits of a self-sustaining utility practices.

STAFF

Number	of	Engineers:									.2	5
Number	of	Technicians: .									. 1	4
Number	of	Support Staff:						 				5



FY2014

Final Reports Completed:147
IHS Funds Received:\$4,613,142
Contribution Received:\$7,541,410
Number of Projects Funded/Tribes Benefiting:
SDS Total Cost: \$138,774,014
SDS Feasible Cost:\$101,870,014
Number of Homes Without Potable Water:



BILLINGS

ACCOMPLISHMENTS

Blackfeet, Crow, Northern Cheyenne, Ft. Washakie, Ft. Peck, and Ft. Belknap Reserva on community water systems are fully automated with remote control and monitoring features. The Area has focused on fully populating their data system to improve productivity. The Rocky Boy's SFC program received emergency funds from IHS, BIA, and FEMA to replace a wastewater plant damaged by landslides. Capital improvement projects were completed at 10 water plants, and 7 wastewater systems through out the Billings Area. Water and wastewater facul es were provided to 125 new homes.



CHALLENGES

The remoteness of many of the systems proves to be a challenge to obtaining qualified contractors to make sanitation improvements. The Bakken oil field expansion has had a impact on construction costs of water, and well system improvements.

STAFF

Number of Engineers:									. 1	2
Number of Technicians:									. 1	1
Number of Support Staff:										8

FY2014

Final Reports Completed:146
IHS Funds Received:
Contribution Received:
Number of Projects Funded/Tribes Benefiting:16/8
SDS Total Cost:
SDS Feasible Cost: \$68,782,316
Number of Homes Without Potable Water:





CALIFORNIA

ACCOMPLISHMENTS

Governor Jerry Brown declared a drought state of emergency in January 2014 and the State has entered its fourth consecutive year under extreme drought conditions. In response to this declaration in March 2014 the Area developed and managed initial and follow-up assessments of 148 tribal drinking water systems. The purpose of this assessment was to determine the severity of the drought's impact on their communities, the risk/vulnerability, and to evaluate what plans tribes have in place to address drought impacts. Identified 46 tribal water systems at moderate and high risk and established a website to disseminate drought information to tribes through drought summary maps.

As a result of the extreme drought conditions and the tribal drinking water assessments, 4 emergency drought projects were funded for new water supplies and 17 tribal water systems received water system improvements to increase water production. The Area SFC Program established itself as a lead agency, among all state and federal agencies in California, to monitor and address the drought impacts on Indian lands. The SFC Program established relationships with other primary stakeholders such as the tribes, Governor's Office of Tribal Affairs, California Office of Emergency Services, U.S. Environmental Protection Agency, and all other federal agencies under the Region IX Department of Health and Human Services.



CHALLENGES

The tribes in the California Area continue to be impacted by the drought conditions. The Area's effort to coordinate an effective response to this situation will continue with the help from the State of California and other federal agencies. Additionally, sustainability of tribal O&M programs are often a major hurdle as most tribal utility organizations do not charge for services. The Area continues to work on motivating and educating tribal leaders on the benefits of self-sustaining utility practices while providing assistance within the limits of the appropriated funding.

STAFF

Number	of	Engineers:										. 1	4
Number	of	Technicians: .										. 1	2
Number	of	Support Staff:											6



FY2014

Final Reports Completed:
IHS Funds Received:\$3,583,000
Contribution Received:\$2,262,840
Number of Projects Funded/Tribes Benefiting:
SDS Total Cost: .\$298,803,358
SDS Feasible Cost:\$197,646,393
Number of Homes Without Potable Water: 5,029



GREAT PLAINS

ACCOMPLISHMENTS

The Area awarded 30 construction contracts for a value of nearly \$15 million in funding that will provide or improve access to water supply and/or waste disposal facilities for approximately 4,412 American Indian homes at 17 tribes. These project totals were a result of the funding from the IHS and the collaborative funding provided by the Department of Housing and Urban Development, the US Department of Rural Development and the Environmental Protection Agency.

The Area negotiated the first mutual agreement between the Sisseton Wahpeton Tribe, IHS, and the City of Sisseton to provide services to those tribal members living within the city, which will impact 522 homes. The Area also worked with the Omaha Tribe to assist them in meeting their requirements under an EPA issued Administrative Order on Consent to help ensure continued access to safe drinking water for the 2,940 residents of the tribe.

During the same period the Area worked to close out projects that have been active for greater than 3 years from 20 in FY 2013 to 6 by the end of FY 2014. Additionally, the Area provided 248 utility operators and staff trainings that assisted in safe work environments, improving the operation and maintenance of sanitation facilities.



CHALLENGES

Sustainability of O&M tribal programs is often a major hurdle as most tribal systems do not charge for services. The Area continues to work on motivating and educating tribal leaders on the benefits of a self-sustaining utility practices.

STAFF

Number of Engineers:									.2	25
Number of Technicians:									. 1	6
Number of Support Staff:										7

FY2014

Final Reports Completed:
IHS Funds Received:
Contribution Received:
Number of Projects Funded/Tribes Benefiting:41/17
SDS Total Cost:\$265,527,837
SDS Feasible Cost: \$205,369,225
Number of Homes Without Potable Water:





NASHVILLE

ACCOMPLISHMENTS

SFC program completed water testing and prepared a Preliminary Engineering Report to plan for a community water system for the Tuscarora Nation which will serve 450 homes. Additionally we began construction on the first-ever SFC projects for the Shinnecock Nation, a newly federally recognized tribe in New York, serving 25 scattered homes. Also the Area extended the community water and sewer to a new subdivision on the Alabama-Coushatta Reservation which served 12 homes.



CHALLENGES

The Nashville Area serves 29 tribes scattered across 14 states. Whether in the Florida Everglades, the North Carolina mountains, or along the Maine coastline, the Nashville Area continues to face unique construction and logistical challenges due to its very diverse service area that spans from Texas to Florida to Maine. To help meet these challenges, the Area is in the process of opening additional field offices. This will allow for the "forward deployment " of SFC staff to locations closer to our tribal customers resulting in reduced travel and response times and improved customer service.

STAFF

Number of Engineers:											9
Number of Technicians: .											2
Number of Support Staff:											2

FY2014

Final Reports Completed:
IHS Funds Received:\$4,062,000
Contribution Received: \$250,000
Number of Projects Funded/Tribes Benefiting:26/18
SDS Total Cost:\$177,776,565
SDS Feasible Cost: \$101,530,169
Number of Homes Without Potable Water:





NAVAJO AREA

ACCOMPLISHMENTS

Construction within the Area SFC Program continues to work at a high rate with the Navajo Nation to serve Indian homes with water supply and waste disposal facilities. In FY 2014 the SFC Program coordinated \$24 million in construction expenditures which included over \$14 million IHS funding and \$10 million in funding from other federal partners to construct 94 miles of water main (10", 8", 6", 4", and 2"); 14.2 miles of 4" sewer service line; 0.5 miles of sewer main; 150 houses plumbed; 686 septic and drain field installations; 116 cistern water systems; 855 house water service connections. In addition, final inspections were completed for 41 projects.



There are over 4,000 Navajo homes without access to safe drinking water and/or basic sanitation. The Area is balancing the planning, designing, and overseeing construction of safe water and sewer facilities to serve these homes while also working to reduce the backlog of project final reports under the constraints of less support staff resulting from an Area wide reorganization.

STAFF

Number of Engineers:									 	33
Number of Technicians: .									 . (66
Number of Support Staff:									 -	16

Final Reports Completed:118
IHS Funds Received:
Contribution Received:
Number of Projects Funded/Tribes Benefiting:
SDS Total Cost:
SDS Feasible Cost: \$344,709,986
Number of Homes Without Potable Water: 4,084





OKLAHOMA CITY

ACCOMPLISHMENTS

The Area completed a project to support the Sasakwa Rural Water District (RWD) to provide better quality water from a new source, including two wells, a pump house, chlorination and controls. This project served 72 tribal homes, with an estimated population of 252 Native Americans.

A project to rehabilitate an existing lift station with flow direction to a new set of lagoons was also completed for the Sac and Fox Nation of Oklahoma. This project served 34 tribal homes, with an estimated population of 119 Native Americans.

Within the small community of Kenwood, located in the Cherokee Nation, a project providing a new water treatment plant that served 220 existing tribal homes was completed. This project served an estimated population of 770 Native Americans.



The Area serves 44 tribes over a four-state area. The greatest challenge faced is the sheer diversity of the various tribes that are served, each with its own cultural dynamics, requiring a sense of adaptability that is necessary to meet individual needs for each tribe or nation.

Because of this diversity and large Native American populace, another challenge faced within this Area is finding a way to work with different tribes to adequately identify the sanitation facility needs of the more than 154,000 individual tribal homes.

STAFF

Number of Engineers:									.13
Number of Technicians:									.15
Number of Support Staff:									.16

Final Reports Completed:
IHS Funds Received:\$10,592,000
Contribution Received:
Number of Projects Funded/Tribes Benefiting:60/33
SDS Total Cost:\$138,885,033
SDS Feasible Cost: \$115,019,699
Number of Homes Without Potable Water: 6,381





PHOENIX

ACCOMPLISHMENTS

The Area managed 37 construction projects to completion (final report stage) totaling approximately \$14 million and completed multiple planning projects resulting in engineering reports and master plans for approximately \$34 million in proposed projects on the Big Pine, Chemehuevi, Colorado River Indian Community, Fort McDowell, Hopi, Quechan, San Carlos Apache, and Yavapai Apache Indian Reservations. The Area populated the Home Inventory Tracking System (HITS) with over 22,000 home locations for a majority of the tribes served. The Area continued robust partnerships with the Environmental Protection Agency, Rural Development, and the non-profit Operation and Maintenance (O&M) service providers they fund, hosted four meetings of this Technical Assistance Providers (TAP) group in two states, and cooperatively delivered trainings with the Rural Community Assistance Corporation (RCAC) and the Inter-Tribal Council of Arizona (ITCA). The Area continued its annual \$60,000 contractual arrangement with ITCA resulting in instructor and operator travel reimbursements for multiple operator trainings and certification exam events. The Area provided routine and comprehensive technical assistance to five tribes operating relatively new arsenic, iron/ manganese, and nitrate removal plants in Nevada and Arizona.



The Area serves 50 tribes over a four-state area. The Area continues to balance the design and construction management of funded projects with the need to collaborate with Tribes to complete advance planning for proposed/future projects. Although there has been some success in assisting tribes with implementation of user rates, most notably on the Hopi Indian Reservation, a number of Tribes do not charge or collect meaningful revenue for sustainable operation of facilities. The Area continues to work collaboratively with our O&M service partners and Tribal leaders to complete rate studies and implement meaningful user rates.

STAFF

Number	of	Engineers:											.2	4
Number	of	Technicians:											. 1	1
Number	of	Support Staff:												9



Final Reports Completed:
IHS Funds Received:\$5,329,000
Contribution Received:\$3,602,969
Number of Projects Funded/Tribes Benefiting:
SDS Total Cost: .\$183,603,509
SDS Feasible Cost:\$120,894,187
Number of Homes Without Potable Water: 4,306



PORTLAND

ACCOMPLISHMENTS

Individual Site Sanitation Facilities Construction: Served over 100 tribal members' homes with individual site sanitation facilities.

Arsenic in Water Supplies: Initiated and made progress on the following major projects to resolve deficiencies related to arsenic in existing community drinking water supplies:

- On the Colville Reservation, new water wells have been drilled to serve 113 existing homes, and construction was underway in 2014 to build the facilities needed to place new wells into service.
- On the Spokane Reservation, IHS has completed the design and construction documents to allow the tribe to begin construction and place new wells into service for 105 existing homes.
- For the Simnasho water supply, IHS completed a major project aimed at eliminating and replacing an arsenic- containing drinking water source with a source that meets national drinking water standards. IHS and the tribe have assured the water quality being supplied to 76 homes of Simnasho and Schoolie Flats meets national drinking water standards.



Portland Area IHS serves 43 Tribes over a three-state area (Washington, Oregon and Idaho). The needs of the 43 Tribes exceed available IHS funding, and to offset the impact, Portland Area is working to connect Tribes with non-profit organizations that have the explicit purpose of facilitating cooperative project funding opportunities for water and wastewater infrastructure.

STAFF

Number of Engineers:										. 1	5
Number of Technicians: .											4
Number of Support Staff:											3

Final Reports Completed:
IHS Funds Received:
Contribution Received:
Number of Projects Funded/Tribes Benefiting:24/15
SDS Total Cost:
SDS Feasible Cost:
Number of Homes Without Potable Water:





TUCSON

ACCOMPLISHMENTS

With IHS assistance, the local utility authority was awarded a \$500,000 grant from the U.S. Department of Agriculture (USDA) Rural Development to construct modular bathroom structures for homes on the Tohono O'odham Nation that lack indoor plumbing. Community water improvements on the Tohono O'odham Nation include equipping and connecting a water supply well for the community of Gu Vo, upgrading the pressure-reducing station for the Sells/Big Fields water system, and coordinating a multi-agency project resulting in the completion of an emergency water supply connection for the community of San Xavier in response to elevated uranium levels in their existing water supply. Wastewater improvements include a lift station upgrade, and scattered work includes the installation of a water service connection and/or a septic system for 30 individual homes. Additionally, a plan to increase the production of final reports has been developed and implemented resulting in draft final reports for 44 projects, which are expected to be finalized in 2015.

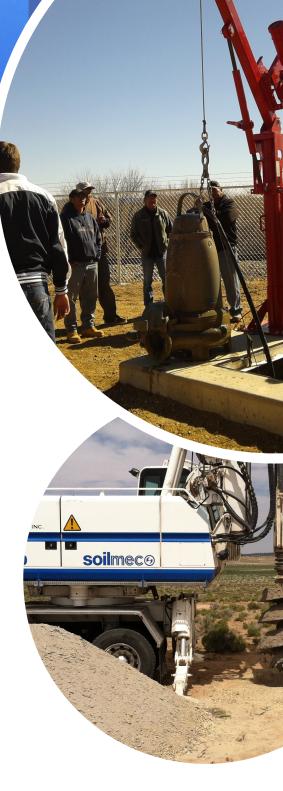


Among the challenges are procedural changes for obtaining easements/rights-of-way, which has led to delays in the construction of projects and the spending of allocations.

STAFF

Number of Eng	gineers:				 				8
Number of Tec	hnicians: .				 				6
Number of Sup	port Staff:				 				2

Final Reports Completed: 1
IHS Funds Received:
Contribution Received:
Number of Projects Funded/Tribes Benefiting:11/2
SDS Total Cost:\$64,462,400
SDS Feasible Cost:
Number of Homes Without Potable Water:





The SFC Program has developed program guidance and technical assistance documents to help ensure consistent and equitable implementation nationwide across the 12 Area Offices. Additional information and copies of these documents can be found at http://www.ihs.gov/dsfc/.

Indian Health Manual

This manual is the reference for IHS employees regarding specific policy and procedural instructions. The SFC Program is described in Part 3, "Professional Services," Chapter 11, "Environmental Health."

Criteria for the Sanitation Facilities Construction Program

This document describes the criteria used by the SFC Program to develop, design, fund, and construct sanitation facilities for American Indian and Alaska Native homes. The document also describes the technical assistance available to tribes to help them properly operate and maintain those facilities. The document sets forth the policies, procedures, and legal requirements of the SFC Program. It defines who can be served, what facilities can be provided, and how the services are provided. It also describes the different types of funds and how they are allocated for projects and other program-related activities. Program administrators and project managers (both federal and tribal) must adhere to these criteria in order to assure effective, equitable, and consistent utilization of resources available for sanitation facilities construction among all tribes.

PROGRAM DOCUMENTS



IHS personnel work cooperatively, as close partners, with tribes...

Sanitation Deficiency System (SDS) Guide for Reporting Sanitation Deficiencies for Indian Homes and Communities

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This manual contains the standard procedures for IHS to report the facilities needed to address sanitation deficiencies impacting American Indian and Alaska Native communities. These facilities include water, sewer, and solid waste needed by existing homes for safe water supply and sanitary waste disposal. Projects that address these sanitation deficiencies are identified and entered into the SDS and are reported to Congress annually as required by the IHCIA, Public Law 94-437, as amended (25 U.S.C. 1601 et seq.). Information derived from the SDS project inventory is used by the SFC Program to allocate resources to support project construction and technical assistance for operation and maintenance of sanitation facilities serving Indian homes.

Memorandum of Agreement (MOA) Guidelines for the Public Law 86-121 Sanitation Facilities Construction Program

The MOA is a legal instrument that establishes a cooperative relationship between the signatories to create, fund, and sometimes construct, sanitation facilities and/ or technical assistance authorized by Public Law 86-121. The purpose of the MOA Guidelines is to set forth the policies and guidelines to be used by IHS when entering into these agreements. These guidelines are used by the SFC Program, Indian tribal leaders, and all other parties to an MOA, including the IHS staff and personnel in tribal sanitation facilities construction programs. The guidelines provide for a consistent and orderly approach in using the MOA to provide sanitation facilities and technical assistance to the American Indian and Alaska Natives.

Environmental Review Manual for Indian Health Service Programs

This manual describes IHS's policies for following the National Environmental Policy Act (NEPA), which is based on Council of Environmental Quality (CEQ) regulations, Department of Health and Human Services (HHS) policy, and U.S. Public Health Service (PHS) or HHS grants policy statements. The manual informs the program, facility, and project managers working within IHS about the requirements for complying with federal environmental laws, regulations, Executive Orders, and agency administrative policies and procedures.

Project Management Guideline

This guideline outlines the project management approach followed by the SFC Program. It describes the steps the SFC Program staff should undertake when developing, planning, and designing projects. The principle purpose of this document is to ensure sanitation facilities constructed by the SFC Program address the sanitation deficiency, can be operated and maintained by the appropriate management entity, and are built with minimal delay.

Technical Assistance Guide Public Law 93-638 Construction

This document provides IHS personnel with technical assistance to guide them when working with a tribe who has requested to construct sanitation facilities under either a Title I construction contract or a Title V construction project agreement under the Indian Self-Determination and Education Assistance Act, Public Law 93-638, as amended. This guide represents a compilation of tools that have been developed by tribes, tribal organizations, and IHS staff working on previous Title I construction contracts or Title V construction project agreements.



The SFC Program works cooperatively with many state and federal entities. The State of Alaska, through its Village Safe Water program, participates in many jointly funded IHS construction projects in Alaska Native communities. The SFC Program also routinely collaborates with U.S. Department of Agriculture (USDA), Environmental Protection Agency (EPA), U.S. Department of Housing and Urban Development (HUD), and U.S. Department of the Interior (DOI) to achieve program objectives. IHS, through the SFC Program, and these five federal partners are committed to jointly assisting tribes in improving their quality of life by providing infrastructure and promoting sustainable practices to support the provision of safe drinking water and basic sanitation for tribal communities. Additional information about this collaboration can be found here: http://www.epa.gov/tp/trprograms/infrawater.htm.

PARTNERSHIP ACTIVITIES



IHS personnel work cooperatively, as close partners, with tribes...



The following SFC Program Initiatives that support this collaboration are as follows:

Home Inventory Tracking System (HITS): In 2010, the SFC Program began the HITS initiative to improve the transparency and accuracy of the tribal housing data used by the SFC Program when reporting sanitation facility needs and program measures. This effort required the population of geospatial coordinates at more than 390,000 individual tribal homes. Identifying eligible Indian homes with geographic attributes will allow the SFC Program and tribes to assess the program's impact at the household level by allowing easy linkage of proposed, ongoing, and historic project needs to homes. These changes will enhance program management and reporting of tribal homes with sanitation deficiency needs to Congress. Starting in Fiscal Year (FY) 2015, IHS will begin using HITS data for SFC Program implementation to allocate over \$100 million in IHS and EPA project funding.

Asset Inventory: The SFC Program is undertaking the development of an asset inventory pilot tool to collect information about the water, wastewater, and solid waste infrastructure owned and operated by tribes. This pilot tool is being developed to examine the feasibility of collecting and maintaining a data set containing information about the age and condition of sanitation facilities owned and operated by tribes. This information, collected in a standardized way, will be useful for the



SFC Program and stakeholders because it will improve:

- Sanitation facility project planning and design
 - Transfer of knowledge among SFC Program and tribal staff
 - Understanding about future sanitation facility needs
 - Targeting of technical assistance resources to augment operations and maintenance (O&M) training to protect federal investments in sanitation facilities

Full implementation of an asset management approach has not been established by the SFC Program. The tool will be evaluated based on the staffing demands necessary to maintain data quality.

O&M Cost Assessment: The SFC Program, in collaboration with EPA and USDA, has developed a methodology to assess the cost associated with operating and maintaining water and wastewater disposal utilities owned by American Indians and Alaska Native Villages. The purpose of this assessment is to document the best practices associated with minimizing O&M cost and to target technical assistance and infrastructure funding resources with a goal of increasing the sustainable operations of these facilities. The SFC Program, USDA, and EPA will continue to work toward implementation of this assessment in FY 2015. The ultimate goal of the SFC Program is to provide adequate water supply and waste disposal facilities for all existing Indian homes. However, despite current funding levels, there are numerous factors that will continue to create additional sanitation facility needs in the future. These factors include population growth and the corresponding additional need for homes. The number of Indian families is increasing faster than new homes are being constructed, making it especially difficult to meet critical sanitation needs in many Indian communities (Trends in Indian Health 2002-2003 Edition).

Another factor is the need to upgrade or replace existing sanitation facilities when their useful design life is reached; IHS began providing water supply and waste disposal systems to AI/AN communities over 50 years ago. This factor becomes increasingly critical as existing sanitation facilities become

REMAINING CHALLENGES

The ultimate goal of the SFC Program is to provide adequate water supply and waste disposal facilities for all existing Indian homes. less reliable and the cost of operating and maintaining older sanitation facilities increases. Despite an IHS emphasis on designing systems that are simple and economical to operate and maintain, the reliability of most community water supply and waste disposal systems in Indian country needs to be improved. The aging national water and infrastructure needs are documented by EPA, the Government Accountability Office, and the American Water Works Association.

More stringent environmental standards and more difficult site conditions will challenge the SFC Program as it endeavors to provide needed sanitation facilities in years to come. Standards for public water systems, solid waste disposal facilities, and sewage treatment facilities are continually being modified by legislation and regulation. The impact of these changes is generally most severe on small utility systems such as those serving AI/AN people. As a result of more stringent regulations, small systems will cost more to build, operate, and maintain.

In the future, the technical and managerial skills of IHS and tribal staff to design, construct, and operate needed sanitation facilities in an environment with more fiscal and regulatory challenges will be tested. A true partnership among tribes, Congress, and IHS is needed if we are to meet these challenges successfully. Anchorage Area/DSFC 4141 Ambassador Drive Anchorage, AK 99508-5928 Ph. (907) 729-3540

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AREA SFC PROGRAM DIRECTORY





Department of Health and Human Services Indian Health Service Sanitation Facilities Construction (SFC) Program

www.dsfc.ihs.gov