

**Arizona Department of Health Services
Native American Semi-Annual Report
July - December 2005**

OFFICE OF THE DIRECTOR

Native American Liaison

The Native American Liaison participated in the following major activities and events:

- Attended the Four Corner Public Health Bio-terrorism Conference in Durango, Colorado in July 2006.
- Assisted in the hiring process for the Bureau of Emergency Preparedness and Response (BEP&R) Native American Coordinator position.
- Assisted the BEP&R in the sponsorship of five Native American Public Health Bio-terrorism Emergency Preparedness and Response Regional training sessions held between July-September in Flagstaff, Hon Dah, Ft. Mojave, Salt River, and Casa Grande.
- Assisted and participated in on-site trips to Navajo and Hopi Indian Reservations by the Governor's Advisory Council on Health, Physical Fitness & Sports (GACHPF&S).
- Assisted and participated in the GACHPF&S Native American Task Force sponsorship of the 1st Annual Native American baseball day on October 15th in cooperation with Major League Baseball's Arizona Fall League.
- Assisted the Indian Health Service (IHS) Pathways into Health (PIH) Project by functioning as the Chairman of the Governance Committee and serving on the PIH Interim Executive Board.
- Attended Nation Indian Health Board Consumer Conference held in downtown Phoenix in October 2006.
- Attended a Mass Vaccination Clinic Bio-terrorism Exercise sponsored by the Navajo IHS and Navajo Nation in November.
- Represented ADHS as a co-sponsor with the Inter Tribal Council of Arizona, Inc. in the sponsorship of the 2nd Annual Arizona - American Indian Health Conference in November 2006.
- Participated in planning meetings with the Commission of Indian Affairs for the 2006 Legislature Indian Nations and Tribes Day to be held in January, 2006.

DIVISION OF PUBLIC HEALTH SERVICES

Office for Children with Special Health Care Needs

The Office for Children with Special Health Care Needs (OCSHCN) received a Maternal and Child Health Bureau (MCHB) Integrated Services Grant in June, 2005, which required the creation of a statewide Task Force. The Task Force was charged with providing a forum where stakeholders from governmental and state agencies, local and community level providers, and youth with special health care needs and their families can review activities of the various agencies and communities, plan needs assessments, and study alternative funding for services.

Several task-specific subcommittees will conduct needs assessments, develop educational resources, and provide input and evaluation for quality improvement activities. These committees include Education, Cultural Competency, Parents, Youth, Quality Improvement, and Specialty Services with a focus on Telemedicine.

To help meet the Grant and Office goals, OCSHCN reached out to representatives of Arizona's Native American community. Roy Teramoto, MD, Indian Health Services/MCHB Regional Consultant, serves on the Task Force and has been instrumental in identifying potential committee members and partners including John Kittredge, MD, Tucson IHS/MCHB and Diana Hue, MD, Pediatric Consultant for the Navajo Nation. OCSHCN requested representation by the Pima/Salt River Tribe Mesa School District Liaison for our Education Subcommittee. One of the parent subcommittee members is from the Hopi Nation and represents their Office of Special Needs. Mark Carroll, MD is the Navajo Nation Telemedicine Director and will be participating in our Special Services Subcommittee.

Through ongoing outreach to educate communities about the needs of children and youth with special health care needs, OCSHCN presented information at the request of the Tohono O'odham Tribe Division of Special Services Office in Sells, Arizona. These two sessions were for educators, community providers and families. The requested topics were an overview of OCSHCN and two programs, Traumatic Brain Injury and the Community Development Initiative. OCSHCN also presented at and attended the Hopi Tribe Office of Special Needs 10th Annual Special Needs Day.

During the next six months OCSHCN specific planned activities include meeting with Integrated Services Task Force and subcommittee members that represent Indian Health Services/MCHB, the Hopi and Salt River Pima – Maricopa Indian Reservations. Another significant activity taking place over the next few months will be to increase current technical support for the Hopi Office of Special Needs to create a Community Action Team on their reservation per their request.

Office of Health Systems Development

A Native American Community Development Program was created under the Office of Health Systems Development; Ms. Kim Russell started as Program Manager on December 12, 2005. The Native American Community Development Program's overall goal is to improve the development and accessibility of primary health care for Native Americans throughout Arizona by working in collaboration with the 21 tribal nations, 3 urban centers, and 3 IHS Area offices. Ms. Russell's tasks include resource development, advocacy, training, technical assistance, outreach, assessment, coalition building, community development and planning. Currently, initial visits to the tribal communities are being conducted to introduce program services and to become familiar with the current services the tribal health care systems deliver. For additional information, Kim Russell can be contacted at 602-542-1292

The Primary Care Program, offering basic health care services to low income persons without health insurance in Arizona, awarded 20 contracts July 1, 2005. Most of these clinics serve Native American people. Three are particularly noteworthy: Native American CHC assists the Urban Indian Population in Phoenix; Canyonlands CHC serves the Navajo communities of Chilchinbeto and Kaibeto as well as in Page, AZ; and Northern Apache County Special Healthcare District is providing care in St. Michaels and Sanders. These contracts are in place for a year and are expected to be renewed July 1, 2006. For additional information, Gordon Jensen can be contacted at 602-542-1243

The Center for Minority Health (CMH), in partnership with the Center for Health Equality in Tucson, will be convening a group of public health professionals from all over the state to be a part of the Health Disparities Section of the Arizona Public Health Association. The CMH will ensure that public health representatives from the tribes and urban Indians are invited and participate in a process to develop a statewide agenda to address health disparities for all groups. This meeting will take place in early April, a date has not been set. For additional information, Suncerria Tillis can be contacted at 602-542-2909

The Community Development program, in partnership with the St. Luke's Health Initiatives and Arizona Health Facilities Authority, was able to offer a mini grant to the Gila River Health Care Corporation (GRHCC), HuHuKam Memorial Hospital to support a Breast Cancer Needs Assessment Survey to understand why Native American Women have such a high rate of non-compliance with keeping their scheduled mammogram appointments. Technical Assistance was provided by the ADHS Offices of Health Systems Development and the Office of Chronic Disease Prevention and Nutrition Services. The GRHCC Managed Care team wants to organize a Health Fair for women and the Community Development Program will continue to connect them to appropriate resources. For additional information, Ramnish Mandrelle can be contacted at 602-542-2902

The Health Care Shortage Designations Program submitted applications to the HRSA – Shortage Designation Branch to secure Health Professional Shortage

Area Re-Designations (HPSA) of the Navajo and Hopi Nations. For additional information, Colleen McGregor can be contacted at 602-542-2904.

Office of Chronic Disease Prevention and Nutrition Services (OCDPNS)

The Cardiovascular Disease (CVD) Program has established the Core Advisory Team (CAT). There are several workgroups, each chaired by 2 or more individuals. The CVD program invited Dr. James Galloway to co-chair the health disparities committee with a distinct focus on the Native American issues related to cardiovascular disease.

The Nutrition and Physical Activity Program provided sponsorship for the Live Long, Live Strong! youth summer camp. Native American youth from the Colorado Indian Reservation participated in skill-building sessions that increased hand-eye coordination, maintained concentration, and increased self-esteem, while incorporating the Mohave language and native crafts. This activity was provided through the Colorado River Indian Tribe Recreation Department. For additional information, Rena Van Fleet can be contacted at 928-669-1350.

The Arizona Diabetes Prevention and Control Program (DPCP) assisted with planning the agenda and topics for the 2nd Annual Arizona - American Indian Health Conference, and provided general diabetes information and financial support. DPCP and Nutrition and Physical Activity started discussion with Native Health (Native American Community Health Center, Inc.) to collaborate on diabetes prevention and management through a networking group that represents several Native American agencies in Arizona. On September 14-15, 2005 the Inter Tribal Council of Arizona sponsored a conference called "Steps to Nourish the Cycle of Life" in St. George, UT. Participants were Native Americans from several tribes in Arizona, Nevada and Utah. Two speakers were from ADHS Office of Chronic Disease and Nutrition Services. Magda Ciocazan, Manager, DPCP, was part of a panel presenting on "State Diabetes Programs Working with Tribes" and also hosted an exhibit. Sue Zevan, nutritionist for the ADHS Arizona Nutrition Network, gave presentations on "Healthy Menu Planning" and "Elderly Nutrition".

The Arizona Nutrition Network sponsored a two day training program with the theme of Culturally Appropriate Nutrition Education for Arizona Indian Tribes on the White Mountain Apache Reservation. Approximately 100 people attended from both urban and rural areas of Arizona. Four tribes presented information on their native foods, including harvesting and preparation with samples of some of the foods. There were also two presentations on working with Native Americans. Throughout the summer of 2005, the Arizona Nutrition Network also provided training and equipment to do demonstrations about healthy foods, including samples and recipes of foods which are available at reasonable prices. Seven agencies from throughout the state received equipment and training.

The Steps to a Healthier Arizona (STEPS) continued to work with the Tohono O'odham Nation to assist in getting program activities underway. Highlights include the participation of adult and adolescent community members in a series of focus groups conducted in October 2005 to gather relevant health and cultural information to be utilized for the Steps health marketing campaign. In addition, the Tohono O'odham Nation Steps program staff has been participating in various conferences and trainings coordinated and sponsored in part by ADHS. These activities support the Tohono O'odham Nation's work in the community and schools and include the 8th Annual National Community Health Workers/Promotores Conference; the 6th Annual Border Health Information For Action Conference; a Southern Arizona Walkable Communities Workshop; and CDC School Health Index training. A joint presentation on community and school based programs was also given by Frances Kaplan, MPH and Michael Bitrick, Tohono O'odham Nation Department of Health (TODHS), at the 2nd Annual Arizona - American Indian Health Conference in November 2005. The presentation focused on community and school-based programs. The TODHS and their local Steps program are in the process of preparing to conduct the Behavioral Risk Factor Surveillance System (BRFSS) survey in the Spring-Summer 2006. ADHS and CDC provided technical assistance to TODHS to adapt the BRFSS to best fit with the Nation's cultural, programmatic and resources concerns.

The Well Woman Health Check Program is working with the CDC and contractors to increase the recruitment of Native American Women into the program. At quarterly meetings, contractors have been educated on many issues related to Native American women, including health status, health beliefs, and access-to-care issues. All contractors, along with member of the Comprehensive Cancer Control Coalition and several ADHS employees, will attend a training presented by the National Indian Women's Health Resource Center, Inc., entitled "Working Effectively with American Indians: A Cultural Competency Training" in January 2006.

The Arizona WIC Program has been working closely with the Navajo Nation and Inter Tribal Council of Arizona, Inc. WIC Programs to finalize our Arizona State Nutrition Action Plan. The plan is designed to encourage partnerships and collaborative interventions between nutrition assistance programs and other groups (e.g., Arizona Department of Education), which promote healthy eating and healthy weight. Our next join meeting will be February 15, 2006, where all participants will discuss their successes in implementing their portion of the plan.

Office of Oral Health

Regarding the San Carlos Apache Tribe WIC Program, the Inter Tribal Council of Arizona, Inc. Dental Support Center trained a Tribal member of the San Carlos Apache Tribe as a dental health educator. She works out of the WIC Program in San Carlos and also provides service to the community of Bylas on Tuesdays.

The funding (\$12,000) was contracted to the Inter Tribal Council of Arizona, Inc, who sub-contracted the funding to the San Carlos Apache Tribe WIC Program. The Dental Health Educator provided oral health educational materials, oral hygiene instructions (OHI), diet and feeding practice information, and prevention supplies to clients of the San Carlos WIC Program. Fluoride varnish was applied to high-risk children enrolled in the WIC Program every 3 months. 1089 clients received oral health educational materials, oral hygiene instruction, diet and feeding practice information and prevention supplies. 655 applications of fluoride varnish were applied to children. The San Carlos Dental Health Educator also attended two community health fairs where she set up a dental health education booth. In addition, the San Carlos Dental Health Educator wrote an article in the local newspaper about fluoride varnish and information on preventing Early Childhood Caries.

Tobacco Education and Prevention Program

There are monthly ongoing program activities (on/off reservations) with our Native American contractors including community education, youth coalition groups, school intervention, cessation (Phoenix/Tucson), and collaboration meetings with county health departments, provider training/presentation, public services announcements, and events. For information, please contact: Beau Cordova (ADHS-TEPP) (520) 770-3109. Highlighted activities of the major collaborative efforts are as follows:

Ongoing Activities:

(Off Reservation) Monthly collaboration meetings with Phoenix Indian Medical Center (PIMC) and ITCA. Monthly meetings with Native Visions Coalition, meetings with Native Health, PIMC, and ITCA. Monthly collaboration meetings with Black Hills Center for Indian Health (CDC funded for Navajo Nation), Navajo County, Apache County, Coconino County, Native American for Community Action (NACA), and ITCA. Monthly American Indian Youth Conference Planning meetings with ITCA, Hualapai Tribe, Hopi Tribe, Native Health, NACA, Tucson Indian Center, Inc. (TIC), Salt River Pima Maricopa Indian Community (SRP-MIC), and Colorado River Indian Tribes (CRIT).

(On/Off Reservation): Quarterly Community Advisory Tobacco Coalition Meeting with ITCA, Gila River Indian Community, Hopi Tribe, Hualapai Tribe, Pascua Yaqui Tribe, SRP-MIC, CRIT, White Mountain Apache Tribe (WMAT), Kaibab-Paiute Tribe (KBPT), NACA, Native Health, TIC, I.H.S., and Black Hills Center for American Indian Health.

Activities for Past Six Months:

(Off Reservation) Staff attended 3rd Annual Hualapai Youth Conference in Phoenix with Arizona Tribes and ITCA in July. Staff attended National Native

Tobacco Conference in Portland, OR with US Tribes, Urban Indian Health Centers, US State Health Departments, and Indian Health Services in August. Staff attended Best of the West Coalition for Tobacco Free Arizona Conference in Phoenix in September. In November staff attended Great American Smoke Out at PIMC with Native Health and 2nd Annual Arizona - American Indian Health Conference in Phoenix.

(On Reservation) In October staff attended Red Ribbon Week with the Hualapai Tribe, Hopi Tribe, WMAT, SRP-MIC, PYT, and KBPT.

Planned Activities for Next Six Months:

(Off Reservation) In February staff will participate in the Tucson Indian Health Event with the TIC, PYT, Tohono O'odham Nation, I.H.S., AHCCCS, DES, ADHS, and UA College of Public Health. In July staff will participate in the Tobacco and Health Youth Conference with ITCA and tribal/urban Indian health center contractors.

Office of Women's and Children's Health

Regarding the Rape Prevention and Education Program (funded by Centers for Disease Control), Ama Doo Alchini Bighan, Inc. (ADABI) in Chinle receives funding to provide rape prevention and education (RPEP) services on the Navajo Reservation. ADABI is active in presenting rape prevention and education by providing prevention activities for schools, businesses, social service providers and others throughout the area. Additionally, they also disseminate information via community booths. For additional information, Carol Hensell can be contacted at 602-542-7343.

Regarding the Family Violence and Prevention Services/Rural Safe Home Network (funded by Dept. of Health and Human Services Administration on Children and Families), Ama Doo Alchini Bighan, Inc. (ADABI) in Chinle receives funding to provide domestic violence services on the Navajo Reservation. ADABI is active in the domestic violence task force, provides temporary emergency shelter through its safe home network, crisis counseling, case management and a 24-hour crisis line; provides prevention activities for schools, businesses, social service providers and others throughout the area. For additional information, J Ann Pope can be contacted at 602-542-7341

Regarding, Community Health Contractors (funded by Maternal Child Health Block Grant):

- Inter Tribal Council of Arizona, Inc. (ITCA) has a child car seat program and adult motor vehicle safety practices regarding seat belt use for pregnant women. ITCA distributes child car safety seats to certified technicians that, in turn, distribute the car seat with car seat safety education to any of the 19 tribes that request them. The tribe receiving the seats submits a list of installations completed/distributed to the ITCA

coordinator (Marianne Johnson, 602-307-1509.) During this time period, 2,059 car seats were distributed to several of the tribes, 20 advertisements demonstrating safe seat best use for pregnant women were published in various tribal newspapers/magazines (Au-Authm Action News, Arizona Native Scene Newspaper, Fort Apache Scout Newspaper, 2005 Native American Recognition Days Publication, Apache Gold Magazine, to name a few). Four Public Service Announcements have been aired and ten new car seat technicians have been trained and certified to serve the 19 tribes. During the past six months, thousands of brochures addressing child car safety seats using pictures of local tribal children have been distributed along with those demonstrating the proper use of adult seat belt placement for pregnant women. Large, professional posters on these same two topics have also been distributed to the tribes that request them and are often found in the various WIC offices. A child passenger safety conference is scheduled for year 2006 and is planned on being held in conjunction with a 4-day Child Passenger Safety Seat Training to help increase the number of certified technicians throughout the various 19 tribal communities by at least 10. Twenty additional newspaper ads are planned for 2006 and 2,500 additional car seats to be distributed. The brochures and posters will continue to be printed and distributed as has been done in the past.

- Apache County has a child car seat program and adolescent motor vehicle safety program. Through the Indian Health Services Environmental Health Division at Fort Defiance, the Northern Native American population is served. This population is also served every time a Native American comes into the Apache County office and requests child car seat services. Services are also provided to Navajo County through a sub-contract which also includes assistance to those community members of Native American ethnicity. During the past year, 33 child car seats with education have been distributed to parents/caregivers at Fort Defiance.
- Pinal County has a child car seat program and adolescent motor vehicle safety program. The high school students at the VHM Alternative School in Sacaton receive a yearly presentation on "Survival 101 – Staying Alive". This class teaches the importance of car seat belt safety and the dangers of alcohol use while operating a motor vehicle through an interactive/educational presentation. This contractor also provides car seats, forms, incentives and educational materials to the Gila River Police Department and the Gila River Fire Department. The two agencies provide education on and distribution of child car safety seats to parents/caregivers within their tribe.
- Mohave County has a child car seat program. This contractor assists with car seat events on the Hualapai Indian Reservation in Peach Springs in collaboration with the Indian Health Service Health Center. Mohave County provides car seats and certified technicians to assist with the education and installation of the car seats and also teaches the importance of using adult seat belts.

- Coconino County has child car seat program. Annual child safety seat classes are scheduled for the Havasupai Reservation. The trip is coordinated with the Arizona Department of Public Safety which helicopters the seats and teaching equipment to the community which is located at the bottom of the Grand Canyon. Services are also provided in Page, with Navajo Reservation residents participating. Coconino County administers a Governor's Office of Highway Safety CAPP (Children Are Priceless Program) in northern Arizona. Many of the participants are from the nearby reservations. For information contact: Patty Rhodes/Karen Kuhfuss, 364-1400

Office of Infectious Disease Services

In the Vector-borne and Zoonotic Diseases (VBZD) Section:

- In 2005, ADHS' VBZD staff participated with CDC, IHS, Whiteriver Apache and San Carlos Apache Tribes in controlling an outbreak of Rocky Mountain spotted fever (RMSF) in the White Mountains area. ADHS-VBZD printed/provided educational materials (over 10,000 fliers and 2,500 calendars/coloring books for kids), provided tick collars and sprays for dogs (over 4,000), provided pesticides (360 bags of permethrin granules) for tick control around homes, and staff assisted in the field with conducting tick trapping/risk assessments and putting tick collars on dogs. These efforts were funded through the \$50,000 from the Health Crisis Fund approved by the Governor earlier in the year for this purpose. (NOTE: most of the assistance in the field occurred in May)
- ADHS-VBZD staffs have worked with tribes and IHS programs throughout Arizona on West Nile virus surveillance and vector control. The program provided surveillance equipment, training, mosquito speciation and testing support, and larvicidal products.
- In 2006, ADHS' VBZD staff will continue to work with tribes and IHS in monitoring and mitigating the RMSF threat in the White Mountain Region (as resources allow). Additionally, VBZD and CDC staffs are working with humane societies, animal control programs, etc. in expanding the RMSF surveillance effort beyond the reservations through an ongoing canine serologic study. The program staff will also continue the West Nile virus partnerships with tribes and IHS in 2006 for purposes of surveillance and disease control.

In the TB Control Program:

- The TB Control Program provided financial support to two tribal health departments through supplemental Intergovernmental Agreements (IGAs) for TB control and prevention activities, including disease surveillance, education and the provision of directly observed therapy.
- The program co-sponsored the 11th Annual TB/HIV Four Corners Conference, which was held on October 27 -28 in Durango, Colorado.

Conference attendees included TB, STD and HIV staff from tribes and IHS.

- On December 15, the ADHS Deputy TB Controller presented "Fundamentals of Clinical / Medical TB: Update and TB Control" to the public health nurses of the Navajo Nation and Navajo Indian Health Service.
- The program coordinated monthly TB case conference calls with the Phoenix Indian Medical Center, tribal TB Control Programs, and county health departments for the purposes of coordinating Native American TB patient tracking and care across jurisdictional boundaries.
- The program provided food voucher incentives to local health department TB Control Programs, including tribal TB Control Programs. These vouchers were made available to TB patients to encourage compliance with taking their medicine.
- In 2006, the program will continue supporting specific tribes through IGAs. Additionally, the program will co-sponsor with other Four-corner states the 12th Annual TB/HIV Four Corners Conference 2006, which will take place in Flagstaff in October. The program will also co-sponsor with the Arizona Department of Corrections a statewide TB Conference on April 5, 2006 for correctional facilities and public health departments. All tribal health departments and Indian Health Services regional offices will be invited. Finally, the program will continue coordinating Native American TB case conference calls and provision of food vouchers depending upon availability.

In the STD Control Program:

- The program staff provided and/or facilitated the provision of staff and equipment for the Navajo Nation Health Fairs held in both Fort Defiance and Tuba City.
- The program hosted CDC's Advanced STD Interventions training and worked with the IHS and Navajo Nation to successfully encourage attendance of Navajo Nation Community Health Representatives.
- The program provided assistance for HIV Partner Counseling and Referral Services training of nurses at the White River IHS Hospital to address intervention in a cluster of HIV cases.
- The program arranged supervisory training at the Maricopa County Department of Health for one staff member of the Navajo Nation HIV Prevention Program.
- Program staff worked with staff of the Inter Tribal Council of Arizona and the IHS on the planning of a Phoenix Area STD/HIV Conference to be held in Phoenix in January 2006.
- Dr. Melanie Taylor, the STD Program's Medical Epidemiologist made presentations at the Gila River and the Whiteriver Reservation's IHS hospitals to over 45 physicians, clinic nurses and public health nurses. These presentations, offering CEUs for attendance, covered medical

diagnosis, treatment and follow-up of STDs, as well as providing Arizona STD morbidity data.

- In 2006, the program will work with Native American communities and the Arizona Family Planning Council to expand chlamydia screening in Native American communities. The STD Program will also continue to provide presentations to medical staff at IHS and tribal medical facilities and to increase contact with all Arizona Native American Tribal communities.

In the Hepatitis C Program:

- The program trained 21 persons in the Gila River Indian Community on Hepatitis C training.
- In 2006, the program will increase STD Awareness in Tribal Communities through participation in the Regional STD Conference. Judy Norton will present The ABC's of Hepatitis session on 1/25/06. The program will also conduct a Hepatitis C training class for Indian Health Service and PIMC staff.

DIVISION OF BEHAVIORAL HEALTH SERVICES

Division of Behavioral Health Services (DBHS)

Methamphetamine First Responder Training: DBHS provided the first of three planned technical assistance sessions to the Colorado River Indian Community in Parker during October 2005. The workshop was collaboratively planned by CRIT Behavioral Health, Social Services and local law enforcement and focused on community-wide planning to address methamphetamine.

Methamphetamine Initiative: DBHS provided funding in October to the Gila River Indian Community and three RBHAs to develop and launch a specialized outpatient treatment program for adults with methamphetamine use disorders. Gila River is establishing on-reservation specialized counseling services beginning in December. Cenpatico established a contract with a Native American consultant to develop culturally appropriate treatment programming with the San Carlos Apache Tribe and hired a specialized methamphetamine treatment provider to conduct three 2-day trainings for all providers and interested tribes during November. Value Options and CPSA will develop expedited referral linkages and specialized methamphetamine treatments for adults in the Pima county detoxification center and in Maricopa County drug courts. Both linkages serve a considerable number of urban Native Americans.

New/Unobligated Funds: DBHS conducts routine financial monitoring of RBHA and TRBHA contractors to identify funds that could be re-directed for greater efficiency. In addition, ADHS met with the Governor's Tribal Liaison and the Governor's Budget Director to finalize an appropriations request for the FY 2007 state budget that would include up to \$1.1M in General Funds to develop

additional methamphetamine treatment centers in rural regions of the state including services for tribal communities. Funds would be administered by the ADHS.

Governor's Office Anti-Meth Initiative: DBHS participated in two methamphetamine planning efforts launched by the Governor's Office, including an initiative to develop and support community and tribal anti-drug coalitions to address methamphetamine at the local level.

Native American Suicide Coalition Retreat: Planning for the semi-annual Coalition retreat began in early December. The retreat, scheduled for March 2006, will include a strategic planning session featuring Dr. Teresa LaFromboise from Stanford University. Dr. LaFromboise is the author of the Zuni Life Skills Development curriculum, a SAMHSA-endorsed evidence based practice for suicide prevention among native youth.

Child-Adolescent State Incentive Grant: ADHS/DBHS hosted the federal site visit for the grant in December. Gila River TRBHA, a grantee participant, participated in interviews with the site visit team on strengthening services for children using culturally acceptable approaches.

Northern Arizona- Navajo Nation Collaborative: Northern Arizona Behavioral Health Authority (NARBHA) held two collaborative meetings with tribal entities in northern Arizona in October and December. The focus of the meetings is providing technical assistance to strengthen local service delivery on reservation lands.

The Bureau of Contract Compliance recently hired Ms. Julia Ysaguirre, as a Contract Compliance Administrator, to work exclusively with Tribal Regional Behavioral Health Authorities (TRBHAs). In her role, Ms. Ysaguirre serves as the point of contact for the Gila River Indian Community and the Pascua Yaqui Tribe, who currently maintain signed intergovernmental agreements (IGA) with the Division for the administration, planning, coordination and monitoring of behavioral health services. The TRBHAs serve tribal members residing in each Tribe's respective geographical service delivery area. The IGAs provide Title XIX (Medicaid) and Title XXI (KidsCare) funding and requires the TRBHAs to administer a managed care behavioral health delivery system of care that provides services that are individual and family centered. Ms. Ysaguirre provides technical assistance to the TRBHAs and assists the TRBHAs in their program operations to ensure tribal community members have access to care and services are culturally relevant. She also coordinates internally to foster cooperation and coordination within the Division and assists with the oversight of contractual performance of the TRBHAs. The Division recently completed an administrative review of TRBHA financial and operational systems, as required by AHCCCS, and Ms. Ysaguirre will coordinate the communications regarding

final outcomes and any required corrective actions. Ms. Ysaguirre may be reached at 602-364-4739 or by email at ysaguij@azdhs.gov

Arizona State Hospital

Arizona State Hospital, located in Central Phoenix employs about 900 people, with operations 24 hours a day. Generally, the Hospital is divided into four populations: Forensics, Civil, Adolescents, and Sexually Violent Persons. The Arizona State Hospital is a publicly funded long-term hospital that provides services for those suffering from a severe mental illness, as well as people with a history of sexually violent crimes.

All patients are served through assessment and treatment planning processes that are patient and family centered, are clinically sound and build upon the identified strengths and needs of the patient, and are culturally and linguistically appropriate and responsive to the individual needs of the patient. All patient care services are provided by qualified and competent staff and are intended to meet the needs of the patient to achieve the highest level of functioning possible for the patient, so that he/she can achieve discharge, community reintegration, rehabilitation and recovery of his/her behavioral health and well-being.

The patient's inpatient clinical treatment team consists of a qualified psychiatrist (treatment team leader), family practice physician or certified physician assistant, registered nurse and mental health program specialist, social worker, rehabilitation professional, nutritionist, any involved family/guardian or other patient representative, community treatment provider representatives, and representatives of any other involved agencies or departments. The Hospital's Interdisciplinary Clinical Team assesses each patient upon admission to the Hospital.

The acuity of the patient's symptoms and condition, and legal status at the time of admission, provide the interdisciplinary clinical team with guidance in determining the least restrictive and most appropriate treatment methods and interventions to be utilized with the patient following admission to meet the patient's identified treatment needs.

Within 24 hours of an admission, psychiatric, medical, and nursing assessments are completed. Following admission, the Interdisciplinary Clinical Team meets with the patient to consider the initial assessments of the patient and to identify the patient's initial treatment needs for services during the hospitalization. The clinical team develops an initial treatment plan that is utilized for up to 10 days following admission, until the Master Individualized Treatment and Discharge Plan is developed and implemented. Psychosocial, rehabilitation, and other assessments as needed, are completed within 10 days of the admission.

Fifteen Native American patients were treated in 2005, nine were males and six were females. Six of the fifteen were treated by Serious Mental Illness status.

DIVISION OF LICENSING SERVICES

Medical Facilities

Gila River Healthcare Corporation has two dialysis facilities located on the reservation located in Sacaton and Laveen. The Corporation was provided extensive technical assistance to meet the federal ESRD regulations to be certified as an ESRD Medicare provider. Since these two facilities are located on the reservation they are not required to be state licensed. Sage Memorial Hospital has a facility located in Sanders, AZ which is not located on the reservation, however, it provides services to the Native American population. The facility was given technical assistance on services provided and there is no licensing requirement for providing only dental services.

Long Term Care

The White Mountain Apache Tribe wants to build a nursing home outside of a traditional nursing home. There has been discussion re: oversight/regulations and whether they will meet federal requirements. The tribe may apply for an exemption. Gila River Annual Survey (Medicare) conducted on December 6, 2005.

Assisted Living:

Assisted Living has had inquiries and been meeting with Navajoland Nursing Home Inc, with regards to an assisted living facility in Chinle on the Navajo reservation. There is an active application, Their building is built and sitting empty, since architecture (Special Licensing) is waiting for some documentation. The Office of Assisted Living and Special Licensure have been working diligently to help them get up and running. Assisted Living has also met with the White Mountain Apache Nation concerning an assisted living facility adjacent to the hospital in White River. Assisted Living has met with an unaffiliated group of Native Americans from Blue Gap which is north and west of Chinle and on the Navajo Reservation.

Special Licensing:

Special Licensing assisted Sage Memorial Hospital with the architectural aspect of the licensing requirements.

Child Care:

No activities with Native American tribes within last six months.

Behavioral Health:

No activities with Native American tribes within last six months. Planned Activities
- The Behavioral Health Program will be conducting surveys with two Native American tribes within next six months.