

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

Burns-Paiute Tribe

Chehalis Tribe Coeur d'Alene Tribe Confederated Tribes of Colville Confederated Tribes of Coos, Lower Umpqua, and Siuslaw Indians Confederated Tribes of Grand Ronde Confederated Tribes of Siletz Indians Confederated Tribes of Umatilla Confederated Tribes of Warm Springs Coquille Tribe Cow Creek Band of Umpqua Cowlitz Indian Tribe Hoh Tribe Jamestown S'Klallam Tribe Kalispel Tribe Klamath Tribe Kootenai Tribe Lower Elwha Klallam Tribe Lummi Nation Makah Tribe Muckleshoot Tribe Nez Perce Tribe Nisqually Tribe Nooksack Tribe NW Band of Shoshone Nation Port Gamble S'Klallam Tribe Puyallup Tribe Quileute Tribe **Ouinault Indian Nation** Samish Indian Nation Sauk-Suiattle Tribe Shoalwater Bay Tribe Shoshone-Bannock Tribes Skokomish Tribe Snoqualmie Tribe Spokane Tribe Squaxin Island Tribe Stillaguamish Tribe Suquamish Tribe Swinomish Tribe Tulalip Tribe Upper Skagit Tribe Yakama Indian Nation

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RESOLUTION # 18-04-03

[The Health Board's Opiod/Addiction ECHO: Capacity Expansion and Collaboration in Indian Country]

Targeted Capacity Expansion: Medication Assisted Treatment – Prescription Drug and Opioid Addiction (Short Title: MAT-PDOA) Department of Health and Human Services – Substance Abuse and Mental Health Services Administration, Funding Opportunity Announcement (FOA) No. TI-18-009

WHEREAS, the Northwest Portland Area Indian Health Board (hereinafter "NPAIHB" or the "Board") was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

WHEREAS, the NPAIHB is a non-governmental "tribal organization" as defined by the Indian Self-Determination and Education Assistance Act (P.L. 93-638 seq. et al) that represents forty-three federally recognized tribes in the states of Idaho, Oregon, and Washington; and

WHEREAS, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USCS § 450b, a tribal organization is recognized as a governing body of any Indian tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

WHEREAS, the NPAIHB is dedicated to assisting and promoting the health needs and concerns of Indian people; and

WHEREAS, the NPAIHB's Project Red Talon has worked with tribes and tribal clinics throughout the U.S. for over 28 years to improve, and is authorized to operate nationally to carry out the goals and objectives of the Targeted Capacity Expansion: Medication Assisted Treatment – Prescription Drug and Opioid Addiction grant; and

WHEREAS, The NPAIHB's HIV/STI/HCV Clinical Program seeks to prevent opiod abuse, increase access to opiod treatment and recovery services, and reduce the health consequences of opiod abuse; and

WHEREAS, this specific funding opportunity supports the prevention of opioid abuse, increased access to treatment and recovery services, and implementing strategies to reach, engage, and retain people who inject drugs in substance abuse treatment; and

Secretary

WHEREAS, the goals of this initiative are consistent with the goals and objectives of both the NPAIHB and the *NW Tribal EpiCenter*; and

THEREFORE BE IT RESOLVED that the NPAIHB is committed to and supports efforts by staff of the EpiCenter, under the guidance of the Executive Director, to pursue funding through the Funding Opportunity Announcement (FOA) No. TI-18-009 – Targeted Capacity Expansion:

Medication Assisted Treatment – Prescription Drug and Opioid Addiction (Short Title: MAT-PDOA) Department of Health and Human Services – Substance Abuse and Mental Health Services Administration opportunity.

CERTIFICATION

NO. 18-04-03

	ution was duly adopted at the regular session of the Northwest Indian Health Board. A quorum being established; of for, against, abstain on, 2016.
	Andrew C. Joseph Dr.
	Chairman
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