

## Northwest Tribal Epidemiology Center (The EpiCenter) Projects Reports Include:

- ▲ Adolescent Behavioral Health
- ▲ Clinical Programs-STI/HIV/HCV
- ▲ Dental Support Center
- ▲ Epicenter Biostatistician
- ▲ Epicenter National Evaluation Project
- ▲ IDEA- Northwest (Tribal Registry Project)
- ▲ Immunization and Portland Area IHS IRB
- ▲ Medical Epidemiologist
- ▲ Native CARS & PTOTS
- ▲ Northwest Tribal Comprehensive Cancer Project
- ▲ Public Health Improvement and Training/Injury Prevention
- ▲ THRIVE
- ▲ WEAVE
- ▲ Western Tribal Diabetes Project
- ▲ Cancer Prevention and Control Research in AI/ANs
- ▲ Tribal Opioid Response (TOR)
- ▲ Enhancing Asthma Control for Children in AI/AN communities
- ▲ Northwest Native American Research Center for Health (NARCH)
- ▲ Response Circles
- ▲ Northwest Tribal Juvenile Justice Alliance
- ▲ ECHO

## Adolescent Behavioral Health

Stephanie Craig Rushing, PhD, MPH, Principal Investigator | Jessica Leston, MPH, PhD(c) Project Director  
 Colbie Caughlan, MPH, THRIVE Project Director | David Stephens, RN, ECHO Director  
 Danica Brown, MSW, PhD, Behavioral Health Manager | Michelle Singer, HNY Manager  
 Celena McCray, THRIVE Project Coordinator | Tommy Ghost Dog, WRN Project Coordinator  
 Paige Smith, Youth Engagement Coordinator + DVPI Coordinator  
 Corey Begay, Multimedia Specialist | Eric Vinson, ECHO Specialist | Roger Peterson, SMS Communication Specialist  
*Contractors: Amanda Gaston, MAT, Native IYG |  
 Nicole Trevino, Native STAND & We R Native Teacher's Guide | Jackie Johnson, TAM Research Assistant*

### Quarterly Report: October-December 2019

#### Technical Assistance and Training

#### Tribal Site Visits

- Confederated Tribes of Umatilla Indian Reservation.

#### October Technical Assistance Requests

- 3 NW Tribal TA Requests = Chemawa, Suquamish, Tulalip
- 5 = Harlan, ORAETC, Yalda, Jeff, PREP Eval

#### November Technical Assistance Requests

- 2 NW Tribal TA Requests = Nimiipuu | NARA
- 7 = Tesuque Pueblo | Johns Hopkins | NIH | WA DOH | Montana State University | Portland Public Schools | IHS

#### December Technical Assistance Requests

- 2 NW Tribal TA Requests = Colville | Nez Perce
- 2 = Johns Hopkins | NIH

#### We R Native

During the quarter, our staff participated in four partner meetings, including:

- Zoom: TAM study check-in with mHealth, October 9, 2019.
- Zoom: TAM study check-in with mHealth, Nov 20, 2019.
- Zoom: TAM study check-in with Jackie, Nov 22, 2019.
- Zoom: TAM study check-in with mHealth, Dec 11, 2019.

#### Gen I / Bootcamps

- N/A

#### Healthy Native Youth

During the quarter, Healthy Native Youth staff participated in nine planning calls with study partners, and the following trainings/events:

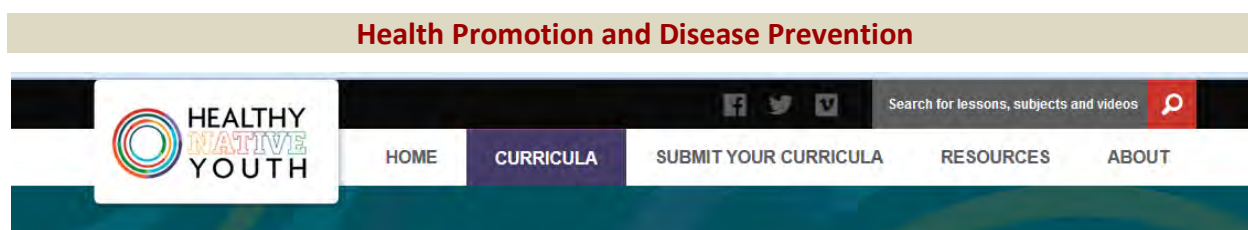
- Booth: Spirit of Giving Conference, Portland, OR. Nov 15, 2019.
- Meeting: Strategic Planning Day, Portland, OR. Nov 13, 2019.
- Participant: We R Native and HNY, NB7 Advisory Meeting. October 16-17, 2019. Albuquerque, NM. Approximately 30 participants in attendance.

- Presentation: Native STAND, We R Native, HNY and BRAVE Mental Health Study, NIEA Conference. October 9-11, 2019. Approximately 75 participants in attendance.
- Presentation: We R Native and Healthy Native Youth, NPAIHB Quarterly Board Meeting, Confederated Tribes of Umatilla Indian Reservation, Pendleton, OR, October 23, 2019. Approximately 30 participants in attendance.
- Zoom: HNY CoP (*Building Community Support*), Nov 13, 2019. Approximately 35 participants in attendance.
- Zoom: HNY CoP (*Intro to Evaluation*), October 9, 2019. Approximately 35 participants in attendance.
- Zoom: HNY CoP (*The Talk*), Dec 11, 2019. Approximately 35 participants in attendance.

#### ANA – I-LEAD

During the quarter, staff participated in three grantee call, six SMS text mentoring chats with 850 STEM and “healer” participants,” and the following I-LEAD meetings and activities:

- Committee: Youth Committee, NPAIHB Quarterly Board Meeting, Confederated Tribes of Umatilla Indian Reservation, Pendleton, OR, October 22, 2019.
- Zoom: Youth Delegate Monthly Check-in, Nov 3, 2019
- The 2<sup>nd</sup> cohort of Youth Delegates has been selected. [http://www.npaihb.org/youth-delegate/?fbclid=IwAR1MFNzWdo5bxocP9kiU63fhUeE\\_XiQ34TzU6STHX6aIVkXffjFdQn8PTg#FAQ](http://www.npaihb.org/youth-delegate/?fbclid=IwAR1MFNzWdo5bxocP9kiU63fhUeE_XiQ34TzU6STHX6aIVkXffjFdQn8PTg#FAQ)



**Website:** The Healthy Native Youth website launched on August 15, 2016: [www.healthynativeyouth.org](http://www.healthynativeyouth.org)

Last month, the **Healthy Native Youth** website received:

- Page views = 107
- Average session duration = 1:55



**Website:** The We R Native website launched on September 28, 2012: [www.weRnative.org](http://www.weRnative.org)

In July, the Monthly reach across the We R Native Channel: **217,579** (7,018/day)

In August, the Monthly reach across the We R Native Channel: **161,773** (5,218/day)

In December, the **We R Native** website received:

- Page views = 25,559
- Average visit duration = 6:59

- Top 10 Content Topics viewed:  
[https://datastudio.google.com/u/0/reporting/1p\\_hyONt3fRun\\_AdSFPySDITZI0tYsEvq/page/CO6g](https://datastudio.google.com/u/0/reporting/1p_hyONt3fRun_AdSFPySDITZI0tYsEvq/page/CO6g)

#### December Social Reach

- Twitter Followers = 6,664 **(16,200 Impressions)**
- YouTube: The project currently has 724 uploaded videos and has had 529,130 video views. **(19,997 views last month)**
- Facebook: By the end of the month, the page had 50,515 followers.
- Instagram: By the end of the month, the page had 9,926 followers. **(19,284 Impressions)**

#### December Text Message Service:

- Northwest Portland Area Indian Health Board has 10,088 active subscribers.
- We R Native has 5,700 active subscribers.
- The Text 4 Sex Ed service currently has 465 active subscribers, 769 total profiles.
- STEM has 488 subscribers.
- We R Healers has 352 subscribers.
- Youth Spirit has 34 subscribers.
- We R Dine has 226 subscribers.
- I Know Mine has 604 subscribers.
- Native Fitness has 704 subscribers.
- Hepatitis C Patient and ECHO project has 416 subscribers.
- Healthy Native Youth has 452 subscribers.

### Research and Surveillance

**Technology and Adolescent Mental Health (TAM):** The NPAIHB is partnering with the Social Media Adolescent Health Research Team and the mHealth Impact Lab to evaluate We R Native’s mental health messaging impact and efficacy. The project is recruiting youth for an efficacy study.

## Enhancing Perspectives in Clinics and Communities Programs

Jessica Leston, MPH, Clinical Programs Director – *Tsimshian*

David Stephens, RN ECHO Clinic Director

Eric Vinson, BS, ECHO Clinic Manager – *Cherokee*

Megan Woodbury – Opioid Program Coordinator

Danica Love Brown – Behavioral Health Manager – *Choctaw*

Morgan Thomas – CDC Presidential Fellow

Contractors: Brigg Reilley, MPH  
Wendee Gardner, DPT, MPH – Stockbridge-Munsee Band of Mohican Indians

### Quarterly Report: October – December 2019

#### Technical Assistance and Training

##### NW Tribal Site Visits

- Chemawa Two Spirit/LGBTQ Inclusive Environments on October 30, 2019 with ORAETC
- Suquamish: ATNI Meeting Presentation – Oct 8, 2019

##### Out of Area Tribal Site Visits

- ANTHC: HCV/SUD Clinical Training – Oct 8-9, 2019
- GPTCHB: HCV/SUD Clinical Training – Oct 23-24 2019

##### October Technical Assistance Requests

- Tribal TA Requests = 10 Jessica, 8 Brigg, 2 Megan, Danica, 1 Morgan
- Other Agency Requests = 3 (CDC, IHS, GPTCHB)

##### November Technical Assistance Requests

- Tribal TA Requests = 5 Jessica, 4 Brigg, 5 Megan, Danica, 1 Morgan
- Other Agency Requests = 5 (CDC, IHS, GPTCHB, GLITEC, UNM)

##### December Technical Assistance Requests

- Tribal TA Requests = 3 Jessica, 3 Brigg, 5 Megan, Danica, 1 Morgan
- Other Agency Requests = 4 (IHS, GPTCHB, GLITEC, SIHB, USET)

**During the quarter, project staff participated in 50 technical assistance calls and requests.**

#### Health Promotion and Disease Prevention

**HCV Overview:** Hepatitis C Virus (HCV) is a common infection, with an estimated 3.5 million persons chronically infected in the United States. According to the Centers for Disease Control and Prevention, American Indian and Alaska Native people have the highest mortality rate from hepatitis C of any race or ethnicity. But Hepatitis C can be cured and our Portland Area IHS, Tribal and Urban Indian primary care clinics have the capacity to provide this cure. Some of these clinics have already initiated HCV screening and treatment resulting in patients cured and earning greatly deserved gratitude from the communities they serve.



**Goals:** HCV has historically been difficult to treat, with highly toxic drug regimens and low cure rates. In recent years, however, medical options have vastly improved: current treatments have few side effects, are taken by mouth, and have cure rates of over 90%. Curing a patient of HCV greatly reduces their risk of developing liver cancer and liver failure. Early detection of HCV infection through routine and targeted screening is critical to the success of treating HCV with these new drug regimens.

It is estimated that as many as 120,000 AI/ANs are currently infected with HCV. Sadly, the vast majority of these people have not been treated. By treating at the primary care level, we can begin to eradicate this disease. Our aim is to provide resources and expertise to make successful treatment and cure of HCV infection a reality in Northwest IHS, Tribal and Urban Indian primary care clinics. More at [www.npaihb.org/hcv](http://www.npaihb.org/hcv)

Currently, the program has strategic partnerships with: Alaska Native Tribal Health Consortium, University of New Mexico, Cherokee Nation, Norther Tier Initiative for Hepatitis C Elimination, Oklahoma IHS Area, United Southern and Eastern Tribes TEC, Rocky Mountain TEC, Great Plains Tribal CHairmans Health Board and TEC, Great Lakes Inter Tribal Council TEC, and IHS.

**Text Message service/email marketing:** To date, the project has sent 18,819 and received 2,101 messages from 554 text message subscribers.

**HCV Print & Video Campaign:** In 2017, the project disseminated the Hepatitis C is Everybody's Responsibility Campaign <http://www.npaihb.org/hcv/#Community-Resources> To date, 10,000 items (posters, rack cards, pamphlets) have been printed, and the campaign (print + video) has received 944 video views on YouTube, and reached 5,515 on Facebook.

**Example of text message received in November 2018:** *"Thank you. I don't know if I am able to respond to you but I'm responding anyway. I just want to express my sincere appreciation for all you do. My CIHA (Cherokee Indian Hospital Authority) colleagues and I are energized with the possibility that we can eradicate Hep C in our community. We are meeting weekly to discuss Hep C treatment, patients, issues, ideas and complaints. We are, or I am preparing a presentation for one of our private recovery centers. Our goal in this is to reach out to as many people as we can to educate and spread awareness on all things Hep C. I am preparing the presentation because I am the performance improvement person for our primary care. The nurses are busy caring for our patients. I am also creating a hep B lab guide for our nursing staff to try and eliminate confusion over the hep B labs. I am by education an CLS( clinical laboratory scientist) formerly known as an MT ( medical technologist). I went to school to be a lab tech. Not just drawing blood but running the tests. So for once I am excited because the lab part of all this is right up my alley. My comfort zone, you could say."*

**Opioid Overview:** NPAIHB's Northwest Tribal

Epidemiology Center (TEC) has examined death certificate and hospital discharge data (corrected for AI/AN racial misclassification) to identify the burden and disparities in drug and opioid overdoses experienced by Northwest AI/AN. Since 1997, Northwest AI/AN people have had consistently higher drug and opioid overdose mortality rates compared to non-Hispanic Whites (NHW) in the region. From 2006-2012, AI/AN age-adjusted death rates for drug and prescription opioid overdoses were nearly twice the rate for NHW in the region. A higher proportion of AI/AN drug and opioid overdose deaths occurred in younger age groups (less than 50 years of age) compared to NHW overdose deaths. A more recent analysis of Washington death certificates found that although AI/AN and NHW had similar overdose mortality rates from 1999–2001, AI/AN overdose rates subsequently increased at a faster rate. From 2013–2015 mortality rates that were 2.7 times higher than those of NHW for total drug and opioid overdoses and 4.1 times higher for heroin overdoses.



**Goals:** Opioids and OUD (Opioid Use Disorder) historically has been more prevalent in AI/AN populations. In recent years, research has shown that OUD is not just a medical issue, but is more effectively treated when approached holistically. This has led to an increased move towards integrated care and harm reduction approaches to treat the whole individual, not just the disease. Harm reduction is defined as a way of reducing/ mitigating the negative consequences associated with OUD/ opioid misuse through a variety of intervention strategies.

While there are many resources available to the public on harm reduction, they are scattered at best. To ensure that the Tribes are not only aware of current and promising harm reduction practices and strategies for opioid response, both regionally and nationally, the Indian Country Opioid Response Monthly Newsletter and Community of Learning webinar series were developed. The goal of these two tools is to not only use them as a way to cultivate a community of practice, but also to disseminate the strategies and promising practices currently being implemented to address OUD/ opioid misuse across Indian Country. More at <http://www.npaihb.org/opioid/#communityresources>.

**Text Message service/email marketing:** The project sent 6 constant contact surges and had a reach of 292 through constant contact through the month of June.

**Opioid Print & Video Campaign:** In 2019, the project is developing a number of campaigns for community. Electronic and print material for several new resources including “A Trickster Tale – Outsmarting Through Education and Action”, “Words Matter When Providers Talk About Addiction”, “Words Matter When We Talk About Addiction – For Patients”, and “Supporting Someone with Opioid Addiction”, among others. More at <https://www.indiancountryecho.org/substance-use-disorder/community-resources/>.

Video footage shot at Siletz Community Health Clinic and didg<sup>w</sup>álič Wellness Center was used to develop 3 videos that address preventing, treating, and recovering from OUD. The first video is designed to provide tribal community members basic, potentially life-saving information about OUD, address common myths, and share information about effective treatments. The second video is geared toward healthcare providers. It provides recommendations for treating patients with OUD, encourages prescribing providers to obtain their DATA waiver, and offers insight into evidence-based and tribal community-tested methods for assisting patients to walk the road to recovery. The third video highlights the impressive work of didg<sup>w</sup>álič Wellness Center – a tribal-based substance use treatment center that in a year has helped reduce tribal opioid overdose deaths by 50%.

In December, staff learned that grant funding would be provided by North Sound Accountable Community of Health to work with didg<sup>w</sup>álič Wellness Center to develop a communications package to assist the Center with sharing its story of success. This collaboration will include developing 3 short videos highlighting important aspects of didg<sup>w</sup>álič's unique model of care. It will also entail creating high-quality fact sheets, a PowerPoint, and enhancing the Center's website such that it clearly communicates requisite information for those interested in replicating didg<sup>w</sup>álič's success at addressing OUD.

**e-Newsletter/ Community of Learning Reminders and Sessions:** The monthly [newsletter](#) is released at the beginning of each month to those subscribed through the Constant Contact listserv (n=396).

**LGBTQ & Two Spirit Overview:** Increasingly, healthcare providers across the United States are realizing that European concepts of gender identity (as a male-female binary) and sexual orientation (as attraction to the opposite sex) are too limited. They cannot account for the range of gender identities and sexual orientations people experience.

People who are LGBTQ or Two Spirit have gender identities and/or sexual orientations that exist outside of this limited, European conception. LGBTQ is a general acronym, which stands for lesbian, gay, bisexual, transgender, and queer. Two spirit is a term for a Native person who expresses their gender identity or sexual orientation in indigenous, non-Western ways.

Native people who identify as LGBTQ and Two Spirit face barriers to healthcare, including discrimination in healthcare settings and lack of cultural competency among healthcare providers. Overall, they also face health disparities, including increased risk of anxiety, depression, sexual violence, and suicide. However, research suggests that when people who identify as LGBTQ or Two Spirit are accepted by their communities and healthcare providers, these health disparities disappear. When affirmed by relatives, friends, and clinics, Native people who identify as LGBTQ or Two Spirit thrive. Several Native clinics have already begun developing supportive, affirming relationships with their LGBTQ and Two Spirit clients, earning their trust and gratitude.

NPAIHB now has a live Two Spirit/LGBTQ health webpage: <http://www.npaihb.org/2slgbtq>



**Goals:** Native American and Alaska Native people who identify as LGBTQ or Two Spirit face widespread discrimination. Discrimination in healthcare settings causes many people who identify as LGBTQ or Two Spirit to avoid or postpone treatment. Others do not feel safe fully disclosing their identities to their healthcare providers, which can result in incomplete or ineffective care.

We know this experience of discrimination has not always been true for Native people who are LGBTQ or Two Spirit. Prior to colonization, people who identified as LGBTQ and Two Spirit were often vital, celebrated parts of their Native communities.

To create tribal communities and healthcare settings in which Native LGBTQ and Two Spirit people again feel acknowledged and affirmed, we are creating two documentary-style films celebrating Native LGBTQ and Two Spirit identities and providing recommendations for healthcare providers working with clients who are LGBTQ or Two Spirit.

**LGBTQ 2-Spirit Print & Video Campaign:** We have created and published two documentary-style films focused on destigmatizing LGBTQ and Two Spirit identities. Both films include participants from various tribes and regions in the USA, including Alaska, Washington, Oregon, Oklahoma, and North Dakota.

In addition to these films, a print campaign, including 3 posters, 3 rack cards, and 3 instructional pamphlets promotes and supports the campaign. These print materials direct people to the two documentaries and provide introductory guidance for people who identify as LGBTQ or Two Spirit; their relatives, friends, and allies; and their healthcare providers.

Video views: <http://www.npaihb.org/2slgbtq/#film>

“There’s Heart Here” Documentary: 714 views

“Becoming Jane Doe” Video: 99 views

“See me. Stand with me.” Educational Video: 332 views

Print Materials disseminated:

Provider Educational Materials: 2314 print + 62 downloads

Ally Educational Materials: 2409 print + 55 downloads

2SLGBTQ Affirmational Materials: 2514 print + 60 downloads

Posters: 521 print + 7 downloads

Provider 101 Factsheets: 894 print + 55 downloads

**LGBTQ 2-Spirit Text Message Campaign:** Three text message campaigns are available to improve health care for LGBTQ and Two Spirit individuals. These campaigns offer information for providers, LGBTQ and Two Spirit individuals, and their families, friends, and allies. They educate recipients about best practices when caring for Two Spirit or LGBTQ patients, self-advocacy in clinical settings, and advocating for or supporting LGBTQ and Two Spirit persons, respectively.

Umbrella Campaign: 154 subscriptions  
 Provider Text Campaign: 24 subscriptions  
 Ally Text Campaign: 29 subscriptions  
 2SLGBTQ Text Campaign: 29 subscriptions

**Example of email message received in November 2019:** I would also like to thank you for making these resources available. I am Native American provider and ally and I am so thankful this resource is a comprehensive beautifully arranged and rich with information that I cannot wait to share with other providers in my clinic! J

**Celebrating Our Magic: A Toolkit for Transgender and Two Spirit Youth who are Transitioning:** Alessandra Angelino wrote a comprehensive toolkit with health and wellness information for Native youth, who are transitioning, their families, and their healthcare providers. Now available on the NPAIHB LGBTQ 2-Spirit webpage: [www.npaihb.org/2slgbtq/#print](http://www.npaihb.org/2slgbtq/#print).

Celebrating Our Magic Toolkit: 405 print + 616 downloads

**“Our Stories” Journal** – Six articles, telling the stories of the Two Spirit and LGBTQ Native Community, have been posted to the NPAIHB website under the “Journal” tab.

**CDC Opioid Response Strategy: 49 Days of Ceremony:** development of an innovative AI/AN community-based intervention to prevent or mitigate the effects of early adversity as a result of intergenerational/historical trauma and adverse childhood experiences (ACES) which includes opioid misuse and other health disparities with a focus on wellness.

**Work Plan:** The proposed 1-year plan is dedicated to the development of a comprehensive wellness intervention focusing on AI/AN TIK and adapting, or indigenizing, the frameworks of Information-Motivation-Behavioral Skills (IMB) model and a medicine wheel model, “49 Days of Ceremony”. A Community Based Participatory Research (CBPR) process during the development phase will guide community and stakeholder involvement to ensure that the outcome is consistent with the needs of AI/AN communities as well as individuals for whom the project will be piloted.

**Goal 1:** Conduct Community Based Participatory planning with key stakeholders:

**Objective 1.2:** Resource and infrastructure assessment: Ongoing

**Literature Review/Annotative Bibliography:** Identify and map existing curricula; Identify potential strengths and barriers to implementation; Identify the most appropriate strategy for referrals to trauma-informed counseling services.

**Objective 2.1:** Work with community stakeholders to develop 49 Days of Ceremony Intervention: Ongoing

**Obtain Elder and stakeholder input:** Continue to meet with and consult with Tribal elders, Tribal stakeholders and consultants.

**Health Website for AI/AN Adults:** a project to develop a comprehensive health website for American Indian and Alaska Native (AI/AN) adults that honors AI/AN traditions and cultural

perspectives, highlights the strengths of our communities, and amplifies positive health messages and norms. This site will be an adult companion to our youth website We R Native.

To create a site that is engaging, accurate, and based on AI/AN knowledge and worldviews, NPAIHB put out a call for adult AI/AN individuals who will contribute to adapting, editing, and writing content on various health topics. Additionally, project staff applied to several tribal health conferences – including the 2020 NIHB Tribal Public Health Summit and the 2020 Tribal Public Health Conference to conduct talking circles with the aim of gathering information about how Native adults use social media, how they prefer to receive important health information, and what health topics interest them most.

### Surveillance and Research

**STD/HIV/HCV Data Project:** The project is monitoring STD/HIV GPRAs for IHS sites throughout Indian Country. National standardized indicators on HIV, HCV, and STD screening are included in the national health informatics platform. These data are then used to identify leading facilities to identify best practices that may have potential to replicate in policy and practice in other I/T/U facilities. In response to national data, a new measure, HIV diagnoses among men 25-45 was added, as this group had significantly higher rates of HIV diagnoses. As per the national screening technical assistance project, data monitoring found that HIV screening coverage of 13-64 year olds increased from 52% to 55%, HIV screening of STI+ patients increased from 54% to 58%, and HCV screening of persons born 1945-1965 increased from 54% to 63%. The new measure, HIV screening coverage among men ages 25-45 is up from 44% to 48%.

**PWID Study:** To capture the heterogeneous experience of AI/AN PWID and PWHID, this project is being conducted in four geographically dispersed AI/AN communities in the United States using semi-structure interviews. The project is based on indigenous ways of knowing, community-based participatory research principles and implementation science.

### Other Administrative Responsibilities

#### Publications

- AI/AN PWID Results Paper in Review to Journal of AI/AN Mental Health Research
- Prescription and State Medicaid Paper to International Journal of Health and Equity
- ECHO and Prescription Paper submitted to Journal of Rural Health
- Working on Injection Indicators Paper with CDC

#### Reports/Grants Submitted

- Awarded for FY 2020 – FY 2022: IHS ETE – 343,000
- Awarded for FY 2019 – FY 2021: SAMHSA ECHO – 524,000
- Awarded for FY 2019– FY 2021: OMH ECHO – 349,000
- Awarded for FY 2019– FY 2021: CDC Opioid Response Strategy – 265,000

- Awarded for FYI 2019: IHS SMAIF HIV 1.3 Million
- Awarded for FY 2020: North Sound Accountable Community of Health Grant – 34,000

### **Administrative Duties**

- Budget tracking and maintenance: Ongoing
- Managed Project Invoices: Ongoing
- Managed Project Subcontracts: Ongoing
- Staff oversight and annual evaluations: Ongoing

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## **Northwest Tribal Dental Support Center Quarterly Report (October-December 2019)**

The Northwest Tribal Dental Support Center (NTDSC) has completed their 19th year of funding and will be applying for another five-year grant in 2020. The overall goals of NTDSC are to provide training, quality improvement, and technical assistance to the IHS/Tribal Dental programs, and to ensure that the services of the NTDSC result in measurable improvement in the oral health status of the AI/AN people served in the Portland Area. NTDSC activities are listed in categories corresponding to the current grant objectives.

**Ensure quality and efficient care is provided in Portland Area dental programs through standardization of care and implementation of public health principles to improve dental access and oral health outcomes.**

- NTDSC staff and consultants, in coordination with the Area Dental Consultant (ADC) have provided four site visits this past quarter. NTDSC consultants visited the Swinomish dental clinic in October 2019 and the Area Dental Consultant provided three program reviews for the Warm Springs dental program in October 2019, Yakama dental clinic in November 2019 and Ft. Hall dental clinic (Shoshone-Bannock tribe) in December 2019. This makes a total of four site visits for this fiscal year which began on 9/15/19.

**Expand and support clinical and community-based oral health promotion/ disease prevention initiatives in high-risk groups to improve oral health.**

- The work with ARCORA (The Foundation of Delta Dental of Washington) on our Baby Teeth Matter Initiative (BTM) is continuing with eight dental programs. The first in-person meeting for this fiscal year was 10/23/19 and a noon webinar on 12/17/19. The next in-person meeting is scheduled for February 12, 2020. NTDSC has completed a program manual for new programs.
- The Elder Initiative is continuing with 10 dental programs, which include dental staff, Elder Coordinators as well as elders from various tribes. The first in-person meeting for this fiscal year was on 10/30/19 and a noon webinar on 12/18/19. The next in-person meeting is scheduled for February 26, 2020.

**Implement an Area-wide surveillance system to track oral health status.**

Data from the surveillance system will be used to identify vulnerable populations and plan/evaluate clinical and community-based prevention programs.

- The screening of 0-5 year olds in medical and community settings is complete and survey results have been released. There is a documented decrease in dental caries and also in the number of children needing dental treatment.

**Provide continuing dental education to all Portland Area dental staff at a level that approaches state requirements.**

CDE: NTDSC tracks the number of participants and CDE credits provided through the Update on Prevention Course provided during site visits, the Baby Teeth Matter and Elders Initiatives, and the annual Portland Area Dental meeting. The 2020 Portland Area Dental meeting is scheduled for June 2-4, 2020 in Suquamish, WA.

During the 2018-2019 fiscal year, NTDSC provided 233 dental staff with 1,818 continuing dental education credits.

NTDSC consultants participate in email correspondence, national conference calls, and respond to all requests for input on local, Portland Area, and national issues.

**Epicenter Biostatistician**

**Nancy Bennett**

Conference Calls:

- ✚ eMars conference call w/ Cayuse to review product and discuss changes

NPAIHB Meetings:

- ✚ All staff meeting – monthly
- ✚ Biostat meeting – bi-weekly
- ✚ Onboarding committee meeting
- ✚ Safety meeting
- ✚ Staff retreat
  - Held retreat
  - Follow up survey
- ✚ NARCH meeting planning
- ✚ Asthma project meeting
  - Work on database
- ✚ TPHEP conference
  - Set up location for conference
  - Toured museum for possible fireside chat

Conferences/QBMs/Out of area Meetings

- ✚ AIHC meeting w/ DOH in Sequim, WA

#### Miscellaneous

#### Reports:

#### Site Visits:

- ✚ Little Creek, WA site visit for Emergency preparedness conf.

## **EpiCenter National Evaluation Project** **4th Quarter Activity Report**

October – December 2019

#### **Staff:**

Birdie Wermey – Epicenter National Evaluation Project Specialist

#### Technical Assistance via telephone/email

October – December

- Ongoing communication with NPAlHB EpiCenter Director
- Ongoing communication with Tribal sites regarding project updates, information and technical assistance
- Email correspondence with four programs regarding T.A., reporting and program implementation and their LDCP.

#### Reporting

October

- DVPI call on 10.16 @ 9am
- MSPI call on 10.17 @ 9am

November

- MSPI and DVPI calls were cancelled for the month of November.

December

- MSPI call on 12.18 @ 9am
- Call w/ APO & Quileute on 12.18 @ 11:30am
- DVPI call on 12.19 @ 9am

#### Updates

Birdie – continuing to provide evaluation TA to MSPI/DVPI service areas and GHWIC NW WEAVE Project.

- During October I completed Lower Elwha Family Advocacy (LEFA) Program evaluation reports 2016, 2017, 2018 and 2019.
- I responded to Coquille regarding future evaluation work.

- I did not attend the October quarterly board meeting.
- During November, the APR was due for MSPI/DVPI programs – there were issues with the portal and the saving of documents. This was resolved on Friday 11.29.
- New contact for Quileute MSPI/DVPI program.

### Challenges/Opportunities/Milestones

Milestone: Completed my 13 years of service at NPAIHB in November!

I received the LEFA evaluations from Beatriz in August and I was able to enter all survey evaluations (99) into SurveyMonkey. I ran separate reports for each year (2016, 2017, 2018 and 2019) and then ran a collective report for all 4 years. I analyzed the data and provided a written report along with the survey results from each year and then compiled a collective report for all 4 years and provided each document to Beatriz for the LEKT DVPI program.

Challenges: In November there were issues with the portal regarding the saving of documents for the APR. I do not have access to the portal but was able to confirm with one of our DVPI programs that they weren't able to access the webpage or sign in. I emailed our APO and she was able to determine the same issues with other programs; the matter was being resolved on Friday 11.29 with project leads.

Opportunities: NPAIHB will be hosting the Second Annual MSPI/DVPI Convening in 2020.

### Meetings/Trainings

- All staff retreat @ Sunriver 10.01-10.04
- All staff meeting on 10.07 @ 10am
- Wellness Meeting on 10.14 @ 1pm
- Webinar on 10.16 @ 12pm
- Webinar on 10.29 @ 12pm
- Webinar on 10.30 @ 11am
- Webinar on 10.31 @ 10am
- All staff meeting on 11.04 @ 10am
- Wellness Meeting on 11.12 @ 1:30pm
- Spirit of Giving Conference; Portland Or. 11.13-11.15
- Webinar on 11.19 @ 8:30pm
- Webinar on 11.21 @ 11:30am
- CPR/First Aid Training on 11.26 @ 8am
- All staff meeting/presentations on 12.02 @ 9am
- Webinar on 12.10 @ 11am
- Webinar on 12.13 @ 10am
- Webinar on 12.18 @ 12pm

### Site Visits

- None

**Upcoming Calls/Meetings/Travel**

- All staff meeting on 1.06.20 @ 10am
- Wellness meeting on 1.07 @ 1pm
- DVPI training on 1.13 @ Tulalip
- QBM @ Tulalip 1.14-1.16.
- MSPI call on 1.15 @ 9am
- DVPI call on 1.16 @ 9am
- NPAIHB presentation on 1.22 @ 12pm

**Publications**

- NONE



**Improving Data & Enhancing Access (IDEA-NW)/  
Northwest Tribal EpiCenter (NWTEC) Public Health  
Infrastructure**

**Quarterly Board Meeting Report – January 2020**

Reporting period: October - December 2019

Victoria Warren-Mears, Principal Investigator  
Sujata Joshi, Project Director  
Chiao-Wen Lan, Epidemiologist  
Heidi Lovejoy, Substance Use Epidemiologist  
Joshua Smith, Health Communications/Evaluation Specialist  
Karuna Tirumala, Project Biostatistician  
Natalie Roese, MCH Consultant  
Email: [IdeaNW@npaihb.org](mailto:IdeaNW@npaihb.org)

Data reports, fact sheets, and presentations are posted to our project website as they are completed:

<http://www.npaihb.org/idea-nw/>

Please feel free to contact us any time with specific data requests.

Email: [sjoshi@npaihb.org](mailto:sjoshi@npaihb.org) or [IdeaNW@npaihb.org](mailto:IdeaNW@npaihb.org)

Phone: (503) 416-3261

**Staff Updates**

- No updates

**Current status of data linkage, analysis, and partnership activities**

*Northwest Tribal Registry (NTR) data linkages & data acquisition*



- No linkages completed this quarter
- Obtained the following new datasets
  - Updated data from Indian Health Service for creating new Northwest Tribal Registry
  - Obtained Oregon Violent Death Reporting System Data (2003-2017, AI/AN records only)
  - Obtained access to Washington BRFSS and Death Certificate files

#### *Dataset Cleaning and Preparation*

- Completed preparation of three datasets
  - Three-state state cancer registry dataset
  - Updated Oregon death records dataset with additional injury and cause of death variables
- Worked on preparing two datasets for analysis
  - Washington CHARS (hospital discharge) 2015
  - Idaho births 2006-2017

#### *Data Analysis, Visualization, and Report Preparation Projects*

- Data Projects in Progress
  - Maternal & Child Health Data Profiles and Analyses
    - Worked on manuscript entitled “Disparities in Mental Health Disorders and Linkage to Services among American Indian and Alaska Women”
    - Continued work on manuscript describing rates and factors associated with smoking cessation during pregnancy
    - Continued analysis of Oregon and Washington PRAMS data, including comparisons to birth certificate data, breastfeeding, stressors, and other indicators
  - Tableau Dashboards
    - Continued working on datasets for Tableau dashboard
  - Substance Use Analyses
    - Continued work on manuscript describing co-morbidities for substance use hospitalizations in Washington
    - Continued work on analysis of self-inflicted harm and risk factors among AI/AN youth in Washington
    - Submitted an abstract to the Council of State and Territorial Epidemiologist (CSTE) 2020 Annual Conference, entitled “Racial Disparities in Opioid Use Disorder Hospitalizations among American Indian and Alaska Natives”
  - Gynecologic Cancer Analysis
    - Re-ran cancer incidence and mortality data using additional years of data (1996-2016)
    - Created slides for Dr. Bruegl’s presentation to the Cancer Coalition
    - Created new tables and figures, made edits to manuscript body
  - CVD and Tobacco analysis
    - Conducted literature search to finalize ICD codes for cardiovascular and cerebrovascular underlying causes of death
    - Examined death records to determine the most frequent CVD causes of death
    - Worked on abstract preparation for CSTE conference submission

#### *Suicide Surveillance Project*

- Suicide Monitoring Planning Projects
  - Completed suicide surveillance project update for October QBM

- Received final project reports from all 3 tribes
- Worked on developing plans for Year 2 of project

#### *Maternal & Child Health (MCH) Workgroup*

- Coordinated with Great Lakes Inter-Tribal EpiCenter to present during CDC's November MCH Health Equity webinar
- Communicated with CDC MCH Epi Team Lead to coordinate tribal workgroup for 2020 CityMatCH MCH Epi conference
- Held an internal meeting to discuss MCH analysis projects including preterm birth, infant mortality, maternal mortality, service utilization, quality prenatal care, smoking and breastfeeding

#### *NWTEC Public Health Infrastructure (TEC-PHI) Grant Activities*

- BioStat Core Meetings
  - Continued bi-weekly meetings
- Health Communications/Evaluation Specialist
  - Continued work on developing EpiCenter Project Directory
  - Started designing handout/ half-pager on identifying fake-news (evaluating news sources)
  - Created IDEA-NW general use survey and worked on dashboard for visualizing results
  - Completed year 2 evaluation reporting for NCC
  - Completed 4-page evaluation report for CDC
- TEC-PHI Workgroups and Meetings
  - Continued attending TEC-PHI community of practice meetings and webinars

#### *Data requests/Technical assistance*

- Provided Colbie Caughlan with area population counts for grant reporting
- Met with Yellowhawk to assess their needs in creating a community health profile for public health accreditation
- Helped Jessica (ECHO) with creating a Klamath tribes logo with transparent background
- Helped Rosa (Cancer project) with creating a cervical cancer infographic
- Added additional information on vaping rates and communicable disease rates to PAIHS 2022 Budget Narrative, sent to Laura Platero
- Created slides for data presentation for Area Budget Formulation Meeting, sent to Laura, Victoria and Tom
- Sent list of current data sources available for Oregon to Carrie Sampson and Courtney Stover (Yellowhawk Tribal Health Center)
- Created linkage flow diagram for Motor Vehicle Advisory Committee meeting, sent to Tam and Meena
- Assisted Ryan Sealy in finding breastfeeding data for tribal WIC facilities and in developing an analysis plan for WIC breastfeeding project
- Placed the Klamath tribal logo in documents for Jessica
- Provided information on population denominators to Nanette Star (Alaska Native EpiCenter)
- Provided Washington Healthy Youth Survey manager with information regarding NWTEC access to HYS data
- Talked with UW student about data available for Tulalip Tribe, sent link to IDEA-NW website

- Answered questions from student report at Northwestern regarding resource allocation for tribal opioid response
- Assisted Alex Wu with understanding L-group coding in death certificates
- Assisted Ryan Sealy with creating visuals for WIC breastfeeding data
- Provided 2-hour training on linkage concepts and Match\*Pro to Oregon Health Authority epidemiologists
- Assisted Ryan Sealy with comparing and visualizing WIC breastfeeding data
- Provided Sean Jackson (Great Plains TEC) with information on tribal affiliation data available in IHS data for creating tribal registries
- Provided Teressa Martinez (Wellpinit Service Unit, Spokane Tribe) with background information on cancer clusters and prior NWTEC reports on cancer for the Spokane Tribe/tribal CHSDA
- Provided Ian Painter (Washington DOH Biostatistician) with information on how Census differential privacy policy may affect tribes/TECs
- Provided Arunarangani Arthanari (California TEC) with information on potential sources of denominators for linkage analyses
- Provided information to Nina Martin (National Indian Health Board) on participants and channels to advertise tribal injury surveillance conversations
- Conducted background research on sources of juvenile justice data and met with Danica Brown, Stephanie Craig-Rushing, and Juliette Mackin to discuss obtaining and possibly linking with juvenile justice data. Provided their team with IDEA-NW's project protocol, epidemiologist position descriptions, and template data sharing agreement.
- Assisted Thomas Weiser with SAS coding to import data
- Provided Dr. Samantha Sabo (Northern Arizona University) with information on linkages and IDEA-NW project protocol; she is interested in linking to understand services provided by community health representatives in tribal clinics
- Provided information on linkage software and MatchPro linkage manual to Yosany Cornelio Puello (Dirección Nacional de Epidemiología in Dominican Republic)
- Worked with Danica Brown on creating a data entry form for juvenile justice survey data
- Assisted Tom Weiser in importing data of different formats into data analysis platforms

#### *Presentations & Results Dissemination*

- Completed articles on leading causes of death and hospitalizations for mental disorders among women of reproductive age for Health News & Notes October issue
- Presented IDEA-NW project update at October QBM
- Presented at 2019 APHA annual meeting, "Maternal Substance Use Disorders and Infant Withdrawal Syndromes in Hospital Deliveries among American Indians and Alaska Natives"
- Presented at CDC Department of Reproductive Health, Health Equity Webinar, "Working effectively with Tribal Communities: Success Stories, Improving Data and Reducing Preterm Birth and infant Mortality"
- Manuscript "Hepatitis C Related Mortality among AI/AN Persons in the Northwestern United States, 2006-2012" published in Public Health Reports
- Prepared slides for year-end project update
- Abstract "Disparities in mental health disorders and linkage to services among AI/AN women" accepted for poster presentation at the International Indigenous Women's Health Meeting
- Abstract "Increasing capacity of suicide monitoring and prevention in tribal communities" accepted for presentation at the American Association of Suicidology conference

- Presented at SUD ECHO, entitled “Maternal Substance Use Disorders and Infant Withdrawal Syndromes in Hospital Deliveries among American Indians and Alaska Natives”

#### *Trainings Provided to Tribes/Tribal Programs*

- None

#### *Institutional Review Board (IRB) applications and approvals/Protocol development*

- Completed and received data sharing agreement for unlinked Washington Center for Health Statistics data files
- Submitted and received continuation approval for linkages with Washington birth records
- Submitted and received continuation approval for linkages with Washington State Trauma Registry

#### *Grant Administration and Reporting*

- Submitted revised Year 2 progress report, Year 3 budget, and carryover request for TEC-PHI grant
- Prepared No Cost Extension request and year-end report for CDC 1803 Data Linkage project
- Prepared draft proposal for regional breastfeeding assessment for First Nations Development Institute
- Assisted Eugene with preparing annual FFRs for TEC-PHI Base and supplements awards
- NIH R21 Grant (Innovative data linkages to address suicide and substance use) submitted on 12/4
- Submitted TEC-PHI evaluation reports to National Coordinating Center and CDC
- Provided Victoria with an updated report of EpiDataMart analysis projects for the IHS Epi Core funding annual report submission

### **Travel**

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#### *Site Visits*

- October Quarterly Board Meeting, CTUIR, Pendleton, OR 10/21-10/24

#### *Linkages*

- None

#### *Other*

- NPAIHB Staff Retreat, Sunriver, OR 10/2-10/3
- APHA Conference, Philadelphia, PA 11/2-11/6
- Tableau Conference, Las Vegas, NV 11/11-11/15

### **TEC-PHI Opioid Supplement**

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#### *Coordination and Partnership Activities*

- Continued opioid workgroup meetings to coordinate efforts across NPAIHB projects
- Worked with WA ESSENCE staff to add relevant DOH vaping and pulmonary injury dashboards into ESSENCE account to monitor the epidemic for AI/AN populations

- Reached out to Jamie Piatt (Southern Plains Tribal Health Board) regarding racial misclassification work with funeral directors in their region
- Held multiple discussions with CDC Alcohol Health Scientist on appropriate drug + alcohol death coding, the feasibility of using the standardized ARDI coding scheme with our population, and newborn deaths due to alcohol
- Submitted proposal to link with Oregon Prescription Drug Monitoring Program data
- Attended the Tri-Counties Substance Use Researchers Group, presented, and solicited feedback on educating Oregon MEs/coroners/funeral directors on accurate collection of AI/AN race data. This led to great discussion and engagement with the group, and several promising leads, ideas, and collaboration opportunities
- Attended the Washington DOH Opioid Response Plan Data Workgroup Meeting on 12/17 to coordinate activities, learn about opioid data updates across the state, and ensure NWTEC and NW tribes are considered in the plan
  - The meeting also included presentations on WA PMP and ESSENCE data quality limitations and upcoming projects
- Attended the Oregon 9 Tribes Quarterly Alcohol & Drug Prevention Meeting on 12/4, had the opportunity to hear the area reports from each tribe, and was able coordinate with several state and tribal partners on data needs

#### *Data Analysis, Visualization, and Report Preparation*

- Analyzed drug overdose deaths in Great Plains region and individual states for AI/AN and non-AI/AN along with national rates comparison
- Analyzed drug overdose ED (RHINO) data for Washington State with updated timeframe for Jan 1, 2018- Oct 9, 2019
- Drafted “Opioid Overdose Data and Surveillance Project” presentation for the Affiliated Tribes of Northwest Indians (ATNI) meeting on 10/7
- Wrote an article titled “Fast Stats: Emergency Department Visits for Drug Overdose among American Indian and Alaska Natives in Washington” for our quarterly newsletter, October Health News & Notes, on what ESSENCE/ED data is and an overview of my analysis for Washington State
- Obtained CDC ICD-10-CM Official Coding Guidelines Supplement for coding encounters related to E-cigarette or Vaping Product Use
- Finalizing regional, 3-state combined substance mortality analyses
  - This analysis includes alcohol mortality, as well as benzodiazepine and barbiturate drugs data (benzo + opioid is a growing concern)
- Began drafting NW Region Opioid & Substance Data Brief report on regional opioid/alcohol/substance data
- Discussed with WADOH which ESSENCE fields to utilize for mention of specific new & emerging drugs
- Researched appropriate ICD-10 codes and analyzed NW region AI/AN newborn deaths due to mother’s use of alcohol. Discussed low count with CDC and the current accuracy & usage of these codes.
- Starting drafting an abstract on ED data for WA (and potentially OR) on drug overdose visits for 2020 CSTE conference

- Ran NW region rates by drug type both in inclusive and exclusive categories to compare under/over counting rates with the increase in polysubstance use
- Continued monitoring expansion of ODMAP usage- several counties in Idaho and more of Oregon are now participating
- Wrote and submitted an abstract to the Annual Oregon Epidemiologists' Meeting (OR Epi 2020, April 21-23, Sunriver, OR) on Oregon AI/AN drug and alcohol mortality data
- Conducted overdose death certificate and overdose emergency department visit analyses specific to Whatcom County for the Lummi presentation
- Working with WADOH to define specific drugs involved in Whatcom County overdose deaths due high use of T40.6 "unspecified narcotics" in the county
- Drafted presentation "Opioid & Substance Data among American Indians and Alaska Natives" for Lummi Nation OUD presentation 1/8

#### *Data Requests/Technical Assistance*

- Provided Great Plains states/regional overdose analysis to Great Plains TEC per request
- Provided input on HOPE committee/Tom W. proposed opioid death and prescribing metrics
- Provided input on Tribal Opioid Response documents
- Reviewed, edited, and provided several data points for a letter in support of the Jamestown S'klallam medications for opioid use disorder treatment facility
- Provided data sources and suggestions for on how to measure prevalence of OUD in a small community (Lummi Nation) and potential proxy measures
- Shared compiled National AI/AN & USA Opioid and Substance Usage NSDUH Results with MCH opioid team
- Shared compiled Opioid/Substance Data Sources Inventory with MCH Opioid team

#### *Trainings Provided to Tribes/Tribal Programs*

- Provided "Substance Data Sources for Program & Public Health Planning" as the didactic presentation at the SUD ECHO Clinic on 10/17/19 (presented by Sujata Joshi)

#### *Presentations & Results Dissemination*

- Provided "Opioid Data & Surveillance Project Update" as part of an IDEA-NW Project Update Presentation at QBM on 10/23/19 (presented by Sujata Joshi)
- Provided "Opioid Overdose Data and Surveillance Project" presentation at the Affiliated Tribes of Northwest Indians (ATNI) meeting on 10/7/19 (presented by Eric Vinson)
- Provided "Opioid and Substance Data among American Indians and Alaska Natives" for presentation on 12/4 Oregon 9 Tribes Quarterly Meeting
- Presented "Racial Misclassification among American Indians & Alaska Natives (AI/AN) in Overdose Data" to the Tri-Counties SUD Researchers Group
- Distributed WA and OR Opioid/Substance Data Briefs to SUDs Researchers Group

#### ***Travel***

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##### Site Visits

##### Other

- All Staff Retreat, Sunriver, OR

10/2-10/3

Clarice Charging  
 Immunization and IRB Coordinator  
 Northwest Portland Area Indian Health Board  
 Quarterly Report  
 October-December 2019

Meetings:

NPAIHB all-staff meeting, October 7, 2019  
 NPAIHB all-staff meeting, November 4, 2019  
 Emergency Preparedness planning meeting, November 6, 2019  
 Immunization Partners Action Team (IPAT), December 5, 2019

Quarterly board meetings/conferences/site visits:

NPAIHB staff retreat, Sunriver Resort, Sunriver, OR, October 1-3, 2019.  
 Immunization Roundtable, Portland State University (PSU), Native American Student Center (NASC), October 17, 2019.  
 NPAIHB Tribal Health Directors and quarterly board meeting, Wildhorse Hotel and Casino, Pendleton, OR, October 21-24, 2019  
 NARA Spirit of Giving Conference, Portland, OR, November 13-15, 2019  
 PRIM&R Conference, Boston, MA, November 16-20, 2019

Portland Area (PA) Indian Health Service (IHS) Institutional Review Board (IRB):

PA IRB Meetings:

PA IHS IRB meeting, October 18, 2019  
 PA IHS IRB meeting, November 22, 2019  
 PA IHS IRB meeting, December 18, 2019

During the period of April 1 – June 30, 2019 Portland Area IRBNet program has 170 registered participants, received 7 new electronic submissions, processed 8 protocol revision approvals, approved 4 publications/presentations and 9 annual project renewals.

Provided IT and IRB regulation assistance to Primary Investigators from:

- 1) Confederated Tribes of Yakama Indian Reservation
- 2) Grand Ronde Tribe
- 3) Chehalis Tribe
- 4) Confederated Tribes of Warm Springs Indian Reservation
- 5) Muckleshoot Tribe
- 6) Shoalwater Bay Tribe
- 7) OHSU
- 8) University of Colorado
- 9) Washington State University
- 10) NPAIHB

Quarterly Report  
 October-December 2019  
 Thomas Weiser, MD, MPH  
 Medical Epidemiologist  
 Northwest Portland Area Indian Health Board and Portland Area IHS

Projects:

- \*IRB
- \*Immunizations Program-routine immunization monitoring
- \*EIS Supervision
- \*Hepatitis C
- \*Children with Disabilities (CWDA)
- \*Opioid Epidemic
- \*MCH Assessment
- \*Suicide Surveillance and Prevention

Travel/Training:

- \*IHS Clinic Directors Meeting, November 7-8; Clinic Duty (Chemawa), 11/29;
- \*March of Dimes Meeting, Seattle, 12/2-3.

Opportunities:

- \*IRB met in October, November and December. There were 7 new electronic submissions, processed 8 protocol revision approvals, approved 4 publications/ presentations, and 9 annual renewals.
- \*Immunization Coordinator's Calls-Met on 12/18. There were 7 attendees including representatives from all three state health departments. Abstract for the National Immunization Conference about the two State/Tribal Immunization summits held this year was accepted.
- \*EIS Officer Activities:
  - \* EISO article for MMWR Notes From the Field is scheduled for publication in March.
  - \*Abstract about the same topic as MMWR submitted for EIS presentation
    - Abstract in collaboration with Colville Tribal Behavioral Health describing the tribe's efforts to set up Suicide Surveillance was submitted and accepted. Alex assisted in the submission.
    - New project to survey youth vaping behaviors through We-R-Native was submitted to IRB and approved with minimal revision.
    - We have continued to discuss potential analyses for meeting the analytic CAL
    - No further f/u with BIA regarding availability of employee health data such as wildland firefighters and other occupations.
    - EISO will deploy on a polio mission in Ethiopia January 8- February 18

- Hepatitis C: No new work in December except revisions to EISO leading causes of death paper.



- Children With Disabilities project: No new work on this in December. Will revise manuscript for submission, goal is before end of year. New goal is by March 1st.
- Opioid Epidemic:
  - o IHS HOPE committee meetings 12/6 and 12/20.
  - o Completed graphs for IHS HOPE committee fact sheet
  - o Region X Opioid Work Group Steering Committee meeting 12/11
- MCH Assessment: Co-presented with Chio-Wen the presentation that was made at APHA on NAS to the SUD/HCV ECHO on 12/19. Attended March of Dimes MCH Meeting in Seattle with Tam Lutz on Dec 3 where we tried to represent NPAIHB/IHS and our respective Tribes' MCH needs/concerns. Discussed infant mortality analysis and PRAMS data analysis projects with Natalie and the MCH WG.
- Suicide Surveillance and Prevention (Colville): (Still) trying to re-schedule a meeting with Colville, likely in January.

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### Quarterly Report: October – December 2019

Maternal Child Health Core (MCH-Opioid)  
 Motor Vehicle Data Study (Native CARS)  
 TOTS to Tweens Study (T2T)

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Candice Jimenez (*Warm Springs*), Research Manager (MCH-Opioid, Native CARS, T2T)  
 Chiao-Wen Lan, Co-Investigator/Biostatistician (MCH-Opioid)  
 Jenine Dankovchik, Biostatistician (MCH-Opioid)  
 Jodi Lapidus, Co-Principal Investigator (MCH-Opioid, Native CARS)  
 Meena Patil, Biostatistician (Native CARS)  
 Nicole Smith, Senior Biostatistician (Native CARS, T2T)  
 Tam Lutz (*Lummi*), Co-Principal Investigator (MCH-Opioid, Native CARS, T2T)  
 Thomas Becker, Co-Principal Investigator (T2T)

### Native CARS Project –

The Native CARS Project's current grant "*A NW Tribal EpiCenter Collaboration to Improve the Use of the Motor Vehicle Injury Data*," is a collaboration with the Oregon Health & Science University and the Northwest Washington Indian Health Board guided by a strong advisory committee from tribal and regional experts in environmental health, research design, traffic safety, law enforcement, planning, Indian law, and technical assistance to Tribes.

In response to the data needs of 43 Northwest tribes, we aim to improve the available injury and crash data that will inform decision-making activities within tribal communities. This project provides the opportunity to assess the availability, quality and completeness of motor vehicle injury and mortality data for Oregon, Washington and Idaho. This will support and

improve the evidence available for tribes in designing and evaluating tribally-led interventions in partnership with the NPAIHB, NWWIHB, OHSU and the Advisory Committee.

We are in full swing of the project – our NPAIHB team and subaward partners at OHSU and NWWIHB have begun collaboration on the following aims:

**1. Evaluate the magnitude of motor vehicle crash related mortality, hospitalization and serious injury among American Indians in the Northwest utilizing race-corrected public health data sources.**

We will leverage the ongoing and planned work of the Northwest Tribal Registry Project in *the EpiCenter*, which has a large repository of vital statistics, hospital discharge and trauma datasets linked to the Northwest tribal rosters. We will estimate rates and trends in motor vehicle crash related deaths, hospitalizations and injury, and determine the impact of racial misclassification on these estimates.

**2. Assess characteristics and outcomes of motor vehicle crashes on or near NW tribal communities via transportation and injury data sources, as well as real-time surveillance systems.**

We will augment ongoing efforts in *the EpiCenter* to extract AI/AN-specific information from transportation data sources, to understand circumstances of crashes (driver, vehicle and environmental). We will accelerate emerging initiatives at the Board, which are accessing and exploring near real-time syndromic surveillance data from Washington and Oregon, to evaluate motor vehicle crash related health care utilization (including ED visits) among NW AI/AN. We will work with our NW tribal consortium to identify strengths and limitations of these data sources and highlight areas for quality improvement.

**3. Create and disseminate comprehensive reports to inform the content, direction and evaluable outcomes of future evidence-based tribal interventions.**

Working with our tribal partners, advisory committee and *the EpiCenter*, we will collate previously reported and newly produced evidence and publish reports for the region, as well as individual tribes or tribal groups. We will conduct qualitative interviews to supplement and shed insight on quantitative results. We will disseminate our findings by collaboratively authoring and publishing in the health sciences literature.

### Recent Highlights

This quarter the Native CARS project team completed preliminary Motor Vehicle Injury (MVI) data analysis for WA/OR/ID along with completion of WA/OR/ID Death Certificate data for analysis. We commenced our first Advisory Committee meeting at the NPAIHB office. The project also submitted and accepted abstracts for presentation at 2020 Lifesavers Conference

### TOTS to Tweens Study (T2T) –

*The TOTS to Tweens Study* was a follow up study to the *TOTS Study (Toddler Obesity and Tooth Decay) Study* - an early childhood obesity and tooth decay prevention program. The goal of this

study was to survey and conduct dental screenings with the original group of toddlers to test whether interventions delivered in the TOTS would influence the prevalence tooth decay in older children. Through qualitative approaches, the study assessed current community, environmental and familial factors that influenced oral health in children to understand any maintenance of preventive behaviors over the last ten years within the entire family. The TOTS2Tween Study was administered through the NW NARCH program at the NPAIHB.

### **Recent Highlights**

This quarter the TOTS to Tweens Study team continued with conducting analysis of the quantitative data collected and collaborating on several drafts of a manuscript to be submitted for publication. Staff also disseminated a main outcome manuscript and fact sheets for overall and individual Tribal-specific reports for review by our Tribal partners. As the fiscal year ended, so did the funding available from the NARCH program for the project, although the T2T staff will carry on finalizing other manuscript publications.

### **Maternal Child Health (MCH) Core Workgroup**

Along with several other NPAIHB employees, Tam Lutz, Nicole Smith, Candice Jimenez and Meena Patil also contribute efforts to the MCH Core workgroup providing input to other NPAIHB MCH-related projects, collaborating on grant proposal and responding to external MCH requests or potential partnership opportunities. NPAIHB staff meet bi-weekly on MCH issue where they update staff on their representation in a variety of state and regional workgroups, collaborate on grant writing opportunities and discuss new analyses, reports or presentations.

### **MCH Opioid Grant –**

The MCH-Opioid study, *‘Investigating Maternal Opioid Use, Neonatal Abstinence Syndrome and Response in NW Tribal Communities,’* is a grant funded by the National Institute on Drug Abuse (NIDA) within the Department of Health and Human Services, National Institutes of Health. The study is a partnership with the Northwest Portland Area Indian Health Board, Oregon Health & Science University and Northwest tribes. The partnership aims to engage Northwest Tribal communities in creating sustainable impact on improving substance abuse related outcomes for American Indian and Alaska Native mothers and children.

NPAIHB member tribes have already begun social assessment through prioritizing the reduction of substance use, specifically opioids, among the members of their communities. In support of those early community assessments the NPAIHB conducted a needs assessment to amplify priority areas in maternal and child health. As a result, addressing maternal substance use and its neonatal consequences was the number one priority identified. The next step in this study is to complete epidemiologic assessment, which includes estimating the magnitude and impact of maternal opioid use by analysis of tribal and regional data sources over time. To follow is an educational and ecological assessment, which will help in identifying any predisposing, enabling and reinforcing factors that can assist in understanding how behavioral and environmental

factors must be changed to affect maternal opioid use and neonatal abstinence syndrome. These factors may include beliefs, knowledge about the disease, and self-efficacy. The final phase of the study will focus on administrative and policy assessment including intervention alignment, highlighting the gaps in need as well as tribal community readiness and acceptability of interventions. This will highlight the support or barriers to changing the behavioral and environmental factors related to maternal opioid use.

In this phase of the MCH-Opioid Study we specifically aim to:

**1. Perform an epidemiologic assessment to determine the magnitude and impact of maternal substance use during pregnancy and NAS among AI in the NW.**

We will leverage ongoing and planned work in the Tribal EpiCenter to estimate race-corrected rates and trends of maternal substance use during pregnancy and NAS in hospital discharge data. We will investigate opioid use and treatment in the NW as reported in IHS national data repository. We hypothesize there will be geographic variation in maternal and infant health outcomes related to substance use and treatment to disentangle contributions of rurality vs. unique tribal factors.

**2. Describe the environmental, social and organizational structures, processes, and policies, as well as individual behaviors that influence access to, or use of, MAT in NW Tribes.**

Led by tribal input, we will conduct health and social service mapping to characterize the policies and procedures for maternal substance use during pregnancy and post-delivery, highlight treatment options available to AI mothers, and describe the health and social milieu of substance-affected newborns. We will carry out semi-structured qualitative interviews with tribal health staff and Tribal mothers to assess educational, behavioral, ecological, administrative, landscapes that may influence mothers' access or use of treatment services.

We envision future grant application(s) to conduct community-initiated, culturally relevant, multi-tribe interventions and/or policy evaluations in collaboration with NW tribes.

**Recent Highlights**

Initial project highlights include input to the National Tribal Opioid Response Strategic Plan in the Perinatal/Neonatal OUD section of the plan. We have attended NPAIHB ECHO calls related to substance abuse. We provided an annual update on award of the grant funding to NPAIHB staff and highlighted the new project in the January 2020 edition of the Health News & Notes. Staff attended the Tri-state March of Dimes Strategic Planning meeting. Initial review of data sources for epidemiologic assessment have begun along with connecting with the project Advisory Committee for guidance.

**Addressing Barriers to Childhood Immunization through Communication and Education.** The MCH Core Workgroup recent award under the EpiCenter's CDC Cooperative agreement will work with stakeholders including parents, community, health care providers and local immunization organizations to develop materials and approached to improve the

understanding of the benefits and risks of immunizations. In addition, efforts will be focused on improving health care provider confidence in talking with parents and addressing their concerns about vaccines.

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## NTCCP Quarterly Report October-December MARS 2019

### Training

- Training:
  - Squaxin Island Tribe Tobacco Cessation and Wellness Dinner
  - E-cigarette: Finding the Truth Among the Vapors A Training of Trainers Workshop, Hosted by: Squaxin Island Tribe & SPIPA
- Site Visit: Present Warm Springs Tribal BRFSS to Health and Welfare Committee
- Port Gamble S’Klallam Tribe Parent Retreat
  - 26 adults - Presented on e-cigarettes, dangers, youth and adult national, state and tribal data, marketing and advertising, cessation programs for youth and adults in Washington, and current CDC reporting from lung injuries and death, provided handouts specific to what parents and youth should know about e-cigarettes, how to talk to your children about e-cigarettes, and CDC and FDA e-cigarette factsheets
- NTCCP Coalition and 20 Year Celebration
  - Key note – Dr. Amanda Bruegel
  - Cancer survivor panel
    - 25 attendees from 8 tribes
- Oregon Native Quit line coach training
  - Training for Optum quit line coaches
    - History, prevalence, current cessation activities, tobacco 101, case studies
  - Run of show for Optum staff and OHA before training
- Culture is prevention panel – facilitated at OHA contractors meeting (40)
  - All nine tribe, NARA in attendance
  - State and county TPEP, ADEP, and other staff
- CPR & First Aid Training and Certification

### Technical Assistance

- Contact with all Oregon tribes for AI/AN quit line meeting – webinar for name of the quit line
- Burns Paiute tribe: Developed and shared breast cancer educational materials with Mailed hard copy breast cancer materials to tribal clinic
- Port Gamble S’Klallam: tribal implementation funding, e-cigarettes presentation from parent retreat and tribal specific data
- Shoshone Bannock: - (3) Requested funding needs to support mammogram screening – shared the NTCCP Cancer Action Implementation Application and connected requester with their tribal cancer coalition member: TA for funding needs to support mammogram screening – shared the NTCCP Cancer Action Implementation Application

- Siletz: (2)information for colorectal cancer screening event and resources
- Siletz: Requested funding needs for future colorectal cancer events and activities – Shared NTCCP Cancer Action Implementation Application
- Squaxin – resources for youth e-cigarette
- Umatilla: TA different activities and interactive games for Great American Smoke Out
- Yakama; cancer plan, resources development of tribal plan
- All Tribes: Promoted Indigenous Pink Day and sent out breast cancer educational materials

### **Special Projects**

- NW Tribal Cancer Coalition Meeting
  - Recruitment for 20<sup>th</sup> Anniversary Celebration Dinner
  - Setting up location space and lodging
  - Registration Confirmation Emails
  - Setting up travel for speakers
- Warm Springs Tribal BRFSS
  - Set up meeting with Health and Welfare Committee
  - Finalizing presentation
- R21 NIH Grant
  - Sent in edits for grant proposal
  - Compiled history of HPV projects and other data for grant package
- Materials Developed
  - Breast Cancer Awareness infographic specific to the Northwest Tribes
  - Indigenous Pink Day social media posts and campaign
- Nine Tribes quarterly meeting
  - Opioid presentation
  - Juvenile justice focus group assessment and needs
- Setting up projects for OHSU Wy'east Scholars
- Applications for cancer control implementation funding
  - Awarded one tribal application for cancer control implementation funding
- AI/AN Oregon Quit line Media Messaging
  - Review and provide feedback on media materials
- CDC Comprehensive Cancer Action Plan Updates
  - Updating grant action plan per feedback from project officer and CDC grant evaluator
- Setting up projects for OHSU Wy'east Scholars
  - Met with Sujata Joshi and Stephanie-Craig Rushing as project collaborators to take on Wy'east Scholars for their possible learning projects
- Discussion and final review for AI/AN quitline – recommendations and edits
  - NPAIHB and Metro group
- Meeting with Metro group to discuss how to roll out social media for Urban population AI/AN quitline
- Applications for cancer control implementation funding

- Received and awarded two tribal applications for cancer control implementation funding
- On-going follow-up and feedback on WEAVE-NW film project with Coquille and Coos, Lower Umpqua, and Siuslaw Indians
- On-going updates on E-cigarette presentation for Port Gamble S’Klallam Tribe parent retreat
- On-going follow-up with Oregon and Washington tribes on 2015 EpiCenter and PSE survey for tobacco cessation and policy for the policy resource library

### **Meetings**

- All Staff Meeting
- Project directors meeting
- NTCCP / WTDP staffing
- OHSU NNACOE Project meeting
- OHSU NNACOE Pathway check-in meeting
- Meeting CDC evaluators to discuss CDC Pilot Project funding application
- Meeting with OHSU Wy’east Scholar
- Meeting with OHSU NNACOE to discuss Native Healers workshop/conference
- CDC Phone meeting to discuss changes to Cancer Grant data management system
- Meeting with CDC Project Officer to discuss grant changes and deadlines
- Meeting with OHSU Wy’east Scholar
- Oregon Indian Council on Addictions Meeting
- NARA Tribal Quarterly Meeting
- Oregon Youth Authority Native American Advisory Committee Meeting
- Follow up meeting with Northwest Tribes and Moore Institute
- Oregon CRC Coalition Meeting
- NPAIHB/HPCDP Meeting
- Meeting OHA – Dana Drum
- All Staff Holiday Party
- Meeting with OHSU War on Melanoma Dermatology department to discuss CDC pilot project funding collaboration
- Meeting with OHSU resident
- Meeting with OHSU medical student
- Knight Advisory Council Meeting

### **Conference / Webinar calls**

- Cancer Care – Progress in the Treatment of Lung Cancer
- Resilience and Recovery in American Indian Mental Health
- Supporting American Indian Commercial Tobacco Cessation: An Intro to Resources of CDC’s Office on Smoking and Health

- Supporting American Indian Commercial Tobacco Cessation: An Introduction to Resources of CDC's Office on Smoking and Health
- DCPC Tribal Bi-Monthly Calls 1st Tuesday
- CDC program directors call
- CDC grant review call
- FDA tobacco cessation and vaping
  - Native adolescents - anti vaping and smoking

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*Public Health Improvement & Training (PHIT) Project*

*Injury Prevention Project (IPP)*

*4<sup>th</sup> Quarter 2019 (October-November-December)*

Bridget Canniff, Project Director

Luella Azule, Project Coordinator

Kim Calloway, Project Specialist

### **Milestones**

- 10/15 First day of assignment for Kimberly Calloway, CDC Public Health Associate Program (PHAP) assignee to NPAIHB for 2019-2021
- 11/19-21, CDC PHAP Training, Atlanta (Kim)
- 12/13 CDC Environmental Public Health Tracking Project kickoff call with Project Officer Alex Philipose (Victoria, Celeste Davis, Bridget, Kim)
- 12/18 CDC 1803 Public Health Accreditation supplement call with Project Officer Amy Groom (Bridget)

### **Meetings/Calls/Conferences/Presentations**

- 10/21-24 QBM Umatilla (Luella)
- 10/22 Initial planning call for 2020 TPHEP with planning committee – tentatively scheduled for May 2020 (Bridget, Luella, Kim, et al.)
- 11/6, 11/21 TPHEP planning committee calls (Bridget, Kim)
- 11/20 FEMA Region X Tribal Symposium planning committee call (Bridget)
- 12/10 Site visit to Little Creek Casino, Squaxin Island, with Rachel Paris, DOH – planning for TPHEP 2020 (Bridget, Nancy Bennett)
- 12/11 WA Foundational Public Health Services tribal meeting at Jamestown S'Klallam (Bridget, Nancy Bennett)
- 12/4 CDC PHAP Host Site Supervisor's Annual Training (Bridget)
- 12/5 Call with Nina Martin, NIHB – planning for Violence Prevention/Injury Surveillance sessions
- 12/18 FEMA 2020 Tribal Summit planning call (Bridget)



- 12/20 FEMA planning call for Emergency Management in Your Community Session at FEMA 2020 Tribal Summit in April – co-facilitating session with Fauna Larkin, Coquille (Bridget)

### **Trainings/Webinars**

- 10/15 Webinar: IHS TIPCAP (Tribal Injury Prevention Cooperative Agreement Program) (Luella)

### **Funding**

- 10/22 Submit final invoice for 2019 TPHEP to OHA (Bridget)
- 10/24 PHEP contract received from DOH for 2020 Tribal Public Health Emergency Preparedness (TPHEP) conference after bid approval received in September; contract extendable by DOH through 2023
- 10/28 Resubmit CDC 1803 Umbrella Year 2 Supplement budget modifications and response to technical comments in GrantSolutions (Bridget)
- 11/18 OHA SHIP Minigrant info call (Bridget)
- 12/2 Submitted CDC 1803 Umbrella Year 1 annual reports (Bridget)
- 12/2 Submitted IHS TIPCAP annual report (Bridget)

### **Other Core Activities**

#### **Luella:**

**E-news/Read:** NAYA news, read Shoshone Bannock article, NIHB Washington Report, CDC Feature e-mail, Kognito e-newsletter

**Other:** Review SAIL (Stay Active and Independent for Life) online video

#### **Bridget:**

- TPHEP 2020 planning (Bridget, Kim, Nancy B)
  - Secure dates/location: May 11-15, 2020, Little Creek Casino, Squaxin Island, Shelton, WA
  - Pre-conference training course: Community Healthcare Planning and Response to Disasters (MGT-409), planned for May 11-12
- Support to Chelsea/Tom B. for February 2020 NARCH conference – registration and call for abstracts launched 11/18 (Bridget, Kim, Nancy B)
- Review and revise OR and WA Public Health Improvement Manager position descriptions – applications due 12/13
- Planning for NW Tribal Health Conference sponsored by NARCH, Feb 21-22, Portland:

- Provide feedback and guidance to Chelsea on hotel contract, registration, and call for abstracts
- 10/18 planning call with ANEC, CTEC, and NWTEC staff, chaired by Bridget

**Kim:**

- Onboarding with NPAIHB
- CDC PHAP Training/Orientation – in-person and required online/teleconference training
- Provide support to 2020 TPHEP planning committee, including email notifications of meetings, and providing minutes to committee members
- Create updated NPAIHB workplan for CDC, submitted 12/20
- Review PHAB Public Health Accreditation 101 materials

**Travel/Site Visits**

<p><b>Tribe:</b> Confederated Tribes of Umatilla  <b>Date:</b> October 21-24, 2019  <b>Purpose:</b> QBM  <b>Purpose:</b> All Staff Retreat  <b>Who:</b> Luella</p>	<p><b>Location:</b> CDC, Atlanta, GA  <b>Dates:</b> 11/19-11/21  <b>Purpose:</b> CDC PHAP Training  <b>Who:</b> Kim</p>
<p><b>Location:</b> Squaxin island/Little Creek Casino/Squaxin Island Museum  <b>Date:</b> December 10  <b>Purpose:</b> Planning for TPHEP 2020  <b>Who:</b> Bridget, Nancy B</p>	<p><b>Tribe:</b> Jamestown S’Klallam  <b>Date:</b> December 11  <b>Purpose:</b> WA FPHS Meeting  <b>Who:</b> Bridget, Nancy B</p>

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## THRIVE (Tribal Health: Reaching out InVolves Everyone)

Colbie Caughlan, MPH, Project Director – THRIVE, TOR, & RC  
 Celena McCray, MPH(c), B.S.Ed., THRIVE Project Coordinator  
 Paige Smith, THRIVE & RC Project Coordinator

**Quarterly Report: October-December 2019**

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### Site Visits

**Tribal Site Visits**

- Siletz Youth Conference, Lincoln City, OR – Nov. 9-10
- Applied Suicide Intervention Skills Training (ASIST) for the Confederated Tribes of Grand Ronde, Grand Ronde, OR – Nov. 13-14

- Applied Suicide Intervention Skills Training (ASIST) for the Nez Perce Tribe, Lapwai, ID – Dec. 17-18

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#### **Out of Area and Other Travel**

- NPAIHB Staff Retreat, Sun River, OR – October 1-3
- American Public Health Association’s Annual Conference, Philadelphia, PA – Nov. 3-7
- Oregon 9 Tribes Prevention Meetings, NARA Northwest Wellness Center, Portland, OR – December 3-4

### **Technical Assistance & Training**

During the quarter, project staff:

- Participated in 39 meetings and conference calls with program partners.
- Disseminated 115 packages of the suicide prevention campaign(s) for #WeNeedYouHere.

During the quarter, THRIVE provided or participated in the following presentations and trainings:

- Presentations/Updates (4) – the development of Native Veterans Suicide Prevention Campaign for the Rural Veterans and Telehealth Didactic Webinar Series, 19 virtual attendees; Promoting AI/AN Mental Health Wellness through Social Media presentation, 5 participants, Albuquerque Indian Health Board and; provided updates at three different OR 9 Tribes prevention meetings for 125 attendees over three days, Portland, OR.
- Facilitation/Training (2) – facilitated ASIST workshops for the Confederated Tribes of Grand Ronde, 18 attendees and for the Nez Perce Tribe, 16 attendees.

During the quarter, the THRIVE project responded to over 130 phone or email requests for suicide, bullying, Zero Suicide Model, or media campaign-related technical assistance, trainings, or presentations.

### **Health Promotion and Disease Prevention**

**THRIVE Media Campaign:** All THRIVE promotional materials are available on the web. Materials include: posters, informational rack and tip cards, t-shirts, radio PSAs, and Lived Experience videos.

GLS Messages October - December, Social Media Reach for THRIVE: 92,900

### **Other Administrative Responsibilities**

#### **Staff Meetings**

- EpiCenter meetings
- All-staff meetings
  
- Project Director meetings
- Wellness Committee – monthly meetings and events

**Publications**

- None during this reporting period.

**Reports/Grants**

- Completed & submitted the year 5 MSPI grant annual progress and financial reports in October
- Completed and submitted the final closeout reports for the SAMHSA Garrett Lee Smith cohort 9 (2014-2019) youth suicide prevention grant in December.
- Submitted the quarterly financial report to the IHS for the MSPI grant in December.

**Administrative Duties**

- Budget tracking and maintenance: Ongoing.
- Managed Project Invoices: Ongoing.
- Staff/Intern oversight and annual evaluations: Ongoing.
- Managed Project Subcontracts: Ongoing

**WEAVE-NW Quarterly Report**

7/1/2019 to 9/30/2019

*Victoria Warren Mears, PI**Tam Lutz, Project Director**Nora Frank, Food Sovereignty Project Manager**Ryan Sealy, Tobacco/Breastfeeding Project Manager**Jenine Dankovchik, Evaluation Project Specialist**Chelsea Jensen, Project Assistant***BACKGROUND**

WEAVE-NW is a program of the Northwest Tribal Epidemiology Center, funded through the CDC's Good Health and Wellness in Indian Country (GHWIC) initiative. The overall objective is to establish or strengthen and broaden the reach and impact of effective chronic disease prevention programs that improve the health of tribal members and communities.

The project has built capacity and created lasting change through training, technical assistance and collaborative support to aid Northwest tribes in creating policy, systems and environment changes that encourage healthy lifestyles.

This quarter WEAVE-NW received a notice of award from CDC to continue another five years of working with NW Tribes. This second award significantly increased the funding available for subawards to NW Tribes who are seeking to implement systems, policy or environment change (PSE) approaches to address the following health areas:

Obesity – Food System Change

Obesity – Breastfeeding Promotion and Support  
 Commercial Tobacco Use  
 Type 2 Diabetes  
 Heart Disease and Stroke

In this fiscal year alone, WEAVE-NW will provide over \$600,000 in Tribal subawards to five tribal communities who respond to the WEAVE-NW request for proposals (RFP) that will close in January 6, 2020.

WEAVE-NW will continue to provide coordination support for a Northwest Tribal Food Sovereignty Coalition and a NW Breastfeeding Coalition, under the leadership of our content expert in Food Sovereignty, Nora Frank Buckner and in Breastfeeding, Ryan Sealy. WEAVE-NW will continue to provide the same meaningful technical support and training opportunities for Tribes related to the five funding areas.

WEAVE-NW will also continue to collaborate and provide support for the Diabetes ECHO. Diabetes ECHO is a partnership with WEAVE-NW, Indian Country ECHO and the Western Tribal Diabetes Project. Diabetes ECHO aims to increase the capacity of I/T/U clinics to safely and effectively treat patients with diabetes. The Diabetes ECHO, through the use of video conferencing, education, and research intends to increase knowledge of providers and health care professionals and strengthen best practices of care for all patients.

WEAVE-NW also received notification of an award Native American Agricultural Fund to support strategic planning and trainings for the NW Tribal Food Sovereignty Coalition. This new grant will be led by Food Sovereignty Project Manager Nora Frank Buckner.

**Meetings (excluding internal)**

- Conference/committee: 3
- Tribal Community: 4
- Funding Agency: 7
- Sub-Awardee: 2
- Community (non-tribal): 0
- Government Partner: 7
- Other: 12

**Total Meetings: 35**

**Site Visits**

Date(s)	Tribe	Short Summary
07/16/19 - 07/17/19	Quinault Tribe	Traditional Foods Workshop
07/26/19	Coquille Tribe	Site visit to Coquille to create digital storytelling video about traditional tobacco policy

07/26/19 - 07/27/19 Coos, Suislaw & Lower Umpqua Tribe Site Visit, Canoe with Tribal Youth, Filming Policy toolkit.

*Total number of site visits this quarter: 3*

### **Presentations**

*WEAVE-NW gave a total of 1 presentation this quarter*

### **Publications**

*WEAVE-NW completed 1 publication this quarter*

### **Professional Development**

*WEAVE-NW staff completed a total of 5 professional development activities this quarter*

### **Technical Assistance Given**

*WEAVE-NW responded to 18 requests for technical assistance this quarter*

## **Western Tribal Diabetes Project Quarterly Board Report October-December 2019**

### Trainings and site visits

- DMS training – 8 in attendance – 10 on line
- DPP training
  - 18 participants – 7 tribal programs (WS, Yakama, Cowlitz, Cow Creek, Umatilla, Skokomish, Quileute)
- Squaxin Island site visit –
  - Diabetes program tobacco cessation resources
- Diabetes Echo Session (3)
- National workgroup – Diabetes beta call
- Umatilla site visit
  - Registry session, reports

### Technical Assistance:

- Ongoing for updating new program staff – setting up site visit for registry clean up
- Arctic Slope (2) – Qman, NDOO, PLDX, Gen reports, for exams in as well as taking a look at the Taxonomies. Duration over Zoom was 2hrs
- Arctic Slope Native Association – emailed and asked about how to search.
- Blackfeet – TA to create a new register. Conducted an Adobe Connect session; duration 1hr 45mins.
- Coeur d'Alene , sent notes for their case presentations - FU how the recommendations were disseminated, and if the outcomes for the patients were improved
- Diabetes ECHO: Typed up notes and sent them to faculty for revising and signing

- Pine Ridge Service Unit,; TA iCare, and the version needs
- Pit River (3)- adobe connect session to find missing taxonomies and update them. TA to run an LMR in order to find missing taxonomies – TA to update using both Visual DMS and Roll and Scroll; TA requested an adobe connect session to find missing taxonomies and how to update them. Then showed how to update using both Visual DMS and Roll and Scroll
- Quinault (2)– Icare - taxonimies
- Sent DPP class information to all SDPI tribes for training in December
- Sent tobacco cessation reports to all Oregon TPEP, health director and clinical director
- Skokomish – TA to get ASA off the reminders. I looked it up, but eventually referred it to CAC
- Tulalip – Diabetes ECHO questions, 2018 HSR
- Umatilla – short cut and reference manual– TA to generate mailing labels for 300 people. and instructions and informed her where they were on iCare
- Umatilla, TA too create a pre-diabetes register
- Warm Springs (2)- BRFSS - request for cross tabs; Health and Welfare Committee BRFSS
- Yakama –(2) Sent the signed treatment recommendations form to Echo faculty, tribal specific data

### **Special Projects**

- Coordinated DPP training for Tribal SDPI program
  - Final invoice for Hotel
  - Follow up with travel reimbursements
- SDPI program audit data received – working on Tribal Health Status Reports
- Working to solve remote access issues in new training room
- NPAIHB newsletter
- Native Fitness
  - Contact for 2020 date

### **Meetings and Conferences**

- Zoom meeting with Diana Trombley of the Browning Service Unit (Billings Area) for technical assistance on December 10 and 11
- Zoom meeting with Jodie Mallette of the Arctic Slope Native Association (Alaska Area) for technical assistance on December 17
- Staff and project directors meeting
- Diabetes ECHO Session
- Food Sovereignty follow up
- SDPI Title I and Title V Compacting and Contracting Discussion/Strategy
- Improving Health Care Delivery Data Project: Steering Committee Meeting
- Health Promotion and Chronic Disease Prevention: 2017-2025 Strategic Plan Share-out
- Yakama Nation, Fred Hutch, NPAIHB –
- APHA – Plenary sessions – break out for ATOD, Food and Nutrition, Cancer and AI/AN forum

- Improving Health Care Delivery Data Project: Steering Committee Meeting
- MG hosts NW Area Indian Health Board – final input – edit for tribal and urban materials Native quit line
- Metro group – Urban AI/AN quit line invitation: Media Discussion

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### Northwest Native American Research Center for Health (NARCH)

#### Cancer Prevention and Control Research Training in AI/ANs

**Tom Becker, PI**

**Victoria Warren-Mears, Director**

**Tom Weiser, Medical Epidemiologist**

**Ashley Thomas, Program Manager**

**Jacqueline Left Hand Bull**

**Kerri Lopez**

The cancer project is moving along well. We have had both the opportunity and challenge this quarter of revising our request for carryover funds. We are optimistic this request will be approved soon. In preparation for the February 2020 Contemporary NW Tribal Health Conference, we created an updated poster and look forward to presenting.

We have been highly involved in the career progression of our cancer fellows. We have been providing letters of support for grant applications and graduate school admission, advising in preparation for job interviews, and in-person meetings in Hawaii, New Mexico, and Pennsylvania to provide career guidance and mentorship. NW NARCH PI, Tom Becker, conducted a site visit in Albuquerque, NM—meeting with Tribal Researchers' Cancer Control Fellowship Program (TRCCFP) fellows, faculty, and consultants on 11/14-19/19.

Mentor-mentee agreements for our 19 fellows are being established and monthly meetings have begun. More than half of our fellows have secured their mentors and are working on capstone projects with them. Many of our fellows have full-time jobs, so the mentored project component of this fellowship has presented somewhat of a challenge. We have been working hard with our fellows to design projects that will not be burdensome yet be beneficial for their education and careers.

A distance learning assignment was created and distributed in December on case-control study design. Two additional study design assignments have been created and will be distributed to our fellows in the coming months. Together with our evaluators we designed a survey to track dissemination activities of all our fellows. The survey was sent out in December and so far about half have responded.

We continue recruitment efforts for the 2020 cohort and the formal application becomes available January 13th, 2020. We are keeping track of, and building relationships with, tribal researchers who have stated their interest in participating. These efforts have yielded sixteen eligible and interested applicants for the next fellowship cohort. The application has been finalized along with the scoring documents. We confirmed our selection committee this quarter—they are poised to receive completed applications and select our 2020 cohort. We continue to plan the summer training and the logistics for that meeting are coming together—classrooms have been reserved and the hotel contract has been completed. The fall training course evaluations have been submitted and summarized by our external



evaluator. We will use this feedback to inform curriculum planning and make improvements in the next round of training.

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## **Tribal Opioid Response (TOR) Consortium**

Colbie Caughlan, MPH, Project Director – THRIVE, TOR, & RC  
Megan Woodbury, Opioid Project Coordinator

**Quarterly Report: October – December 2019**

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### **Site Visits**

#### **Tribal Site Visits**

- None during this reporting period

#### **Out of Area and Other Travel**

- Staff Retreat, Sun River, OR – October 1-3
- American Public Health Association’s Annual Conference, Philadelphia, PA – Nov. 3-7
- Oregon 9 Tribes Prevention Meetings, NARA Northwest Wellness Center, Portland, OR – December 3-4

### **Technical Assistance & Training**

During the quarter, project staff:

- Participated in 25 meetings and conference calls with program partners.
- Hosted 3 video conference calls around the TOR Consortium grant for the 22 consortium tribes and 6 TOR2 tribes, 42 attendees, 28 were TOR & TOR2 Consortium attendees.
- Attended 3 webinars during the reporting period around opioid and/or substance use disorder(s) or grant reporting guidelines.
- Presentation/Update (2): TOR Updates & activities for the consortium given to participants at the OR 9 Tribes prevention meetings in Portland, OR – December 3-4

During the quarter, the TOR consortium project responded to over 109 phone or email requests for opioid and substance use disorder prevention, education, medication, grant requirements, etc.

### **Health Promotion and Disease Prevention**

The TOR Consortium staff work closely with many other Opioid Prevention projects at the NPAIHB and together these projects continue to disseminate a monthly Substance Use Disorder e-newsletter which monthly. Staff drafted the 5-7min NARCAN training video for the NW Tribes which will be finalized and disseminated in winter 2020.

### **Other Administrative Responsibilities**

#### **Staff Meetings**

- EpiCenter meetings
- All-staff meetings
  
- Project Director meetings
- Wellness Committee – monthly meetings and events

**Publications**

- None during this reporting period.

**Reports/Grants**

- In October:
  - Completed Marijuana Attestation letters for both TOR and TOR2 and submitted them to SAMHSA
  - Completed the TOR supplemental award budget and scope of work and submitted to SAMHSA
  - Completed the TOR2 budget revisions and supplemental award budget and scope of work and submitted them to SAMHSA
- In December:
  - Submitted revised and more detailed budgets for TOR and TOR2 supplemental dollars.
  - Submitted the TOR year 1 annual progress report and financial reports.

**Administrative Duties**

- Budget tracking and maintenance: Ongoing.
- Managed Project Invoices: Ongoing.
- Staff/Intern oversight and annual evaluations: Ongoing.
- Managed Project Subcontracts: Ongoing

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*Enhancing Asthma Management for Childhood in AI/AN Communities*

“Asthma Project”

**3<sup>st</sup> Quarter Activity Report**

October– December 2019

**Staff:**

Thomas Becker, MD, PhD Principal Investigator

Celeste Davis- Asthma Project Director

Mattie Tomeo-Palmanteer – Asthma Project Coordinator

[Technical Assistance via telephone/email](#)

- Ongoing communication with NPAIHB Epi Center Director.
- Celeste & Mattie – continue to provide support to site 1: Indian Health Service, Yakama Service Unit and site 2: Nimiipuu Health Clinic and site 3: Yellowhawk Tribal Health Center.
- Ongoing communication (telephone, email and in person presentations) We are actively working to enroll our final site for participation in the *Enhancing Control of*

*Childhood Asthma in AI/AN Communities* project, and hope to have the fourth site in early 2020.

## Reporting

- Preparation for the National Institutes of Health six-month report is underway.

## Updates

Asthma Project.

- The Asthma Management Project is conversating with a few tribal clinical sites about the possibility of joining the Asthma Management Project.

## Challenges/Opportunities/Milestones

- Celeste and Mattie are planning (with the Yakama pilot site team from Indian Health Service pharmacists) to schedule a site conference call that will include reviewing data set retrieval methods in mid-January.
- The Asthma Pilot Study Site in Yakama experienced challenges with meeting recruitment numbers this year. A few reasons for low numbers of study participation include children with asthma who are not within the projects age range (3-17 years old), they had well controlled asthma without room for improvement, missing or disconnected telephone numbers of parents of referred children, or not returning phone calls.

To address these challenges, we conducted additional recruitment presentations in Yakama and two changes in protocol were submitted and approved by PAIRB this year. The first, was to raise the age of eligible study participants from 17 to 21. (The original protocol included children aged 3 - 17 as participants). This new recruitment strategy falls within the guidelines of the American Academy of Pediatrics regarding developmental age. The second change in protocol, requested permission to introduce the study via telephone script and schedule an appointment with the local Indian Health Clinic pharmacist.

Additionally, the Asthma Project Coordinator presented to the Toppenish School District and Wapato School District this fall. Additionally, she reached out to Yakama Nation Tribal School and smaller school districts neighboring Wapato (Harrah and Mt. Adams) to request they post flier, share electronically in newsletter format, and to request the flier is sent home to all parents of AI/AN children.

- Follow up calls have been ongoing to recruit the last clinical site (for those that meet the qualifications to participate)

**Meetings/Trainings**

- Mattie attended the mandatory All Staff Retreat 01-Oct-19
- Mattie completed her annual ISSA- RPMS training 05-Oct-19
- Asthma team met with Digital Native Consultants for a graphic design Toolkit design work session 18-Oct-19
- Mattie completed a monthly check in meeting with Yakama Service Unit 21-Oct-19
- Mattie completed a monthly check in meeting with Nimiipuu Health 28-Oct-19
- Mattie completed a monthly check in with Yellowhawk Tribal Health Center 31-Oct-19
- Mattie attended a national Council of Urban Indian Health Environmental health Data conference call training session. 15-Oct-19
- Mattie completed a monthly check in meeting with Nimiipuu Health 4-Nov-19
- Mattie completed a monthly check in meeting with Yakama Service Unit 18-Nov-19
- Mattie completed a monthly check in meeting with Nimiipuu Health 4-Dec-19
- Mattie completed a monthly check in meeting with Yakama Service Unit 16-Dec-19

**Site Visits**

- Mattie met with Yakama Service Unit's Community Advisory Committee to provide an update and review of pediatric educational fliers and recruitment numbers for each site 11-Dec-19
- Mattie presented to parents, students and several Toppenish School District administrators from the elementary, middle and high schools. This was during the Johnson O'Malley parent meeting to request fliers be posted and sent home with all AI/AN students. Francisco Silva a pharmacist of Yakama Indian Service Unit clinic also attended to answer clinical questions and give a demonstration of short-term rescue inhalers and long-term corticosteroid inhalers that are used over time to widen airways 09-October-19
- Mattie did a local KYNR Tribal Radio Station Public Service Announcement 10-October-19

**Upcoming Calls/Presentations/Meetings/Travel**

- Mattie presented at the Wapato School District Native Family Night celebration
- Mattie gave a call to action at Heritage University to support recruitment efforts for young adults 21-Nov-19

**Other communications**

- None

**Publications**

- 21-Feb-2019 NW Tribal Health Research Conference in Portland, OR at the Native American Student and Community Center, poster presentation will be given by Mattie Tomeo-Palmanteer.

## Northwest Native American Research Center for Health (NARCH)

### Dissertation Support Program for Tribal Graduate Students

**Tom Becker, PI**

**Victoria Warren-Mears, Director**

**Tom Weiser, Medical Epidemiologist**

**Ashley Thomas, Program Manager**

**Grazia Cunningham, Program Coordinator**

**Jacqueline Left Hand Bull**

We have been supporting six (6) Research Support Fellows who are AI/AN graduate students as they conduct scientific research necessary to complete their degrees. One of our fellows completed their MPH in December and another received alternate funding so they will no longer be receiving financial support through the NW NARCH. We will track their career progress and be helpful when possible. Currently we have two spots available to fill. One applicant has been selected from our waitlist and three others are currently under review with our selection committee. We don't anticipate having any trouble filling these available fellowship positions. We continue to advertise this opportunity widely. We are working with our fellows to identify their peer mentors and arrange travel awards for dissemination activities at national meetings—two fellows have secured their mentors and have had abstracts accepted at conferences they plan to attend together. We have internship opportunities available and will offer internships to folks who have applied for the fellowship yet remain on the waitlist. Travel, accommodations, and instructors have all been secured for our Portland workshop on February 20, 2020. All our fellows plan to attend the workshop and present their dissertation work at our Contemporary NW Tribal Health Conference. Chelsea Jensen and colleges have been working hard to plan this conference. We will host it at the Portland State University Native American Student and Community Center February 21-22, 2020. We hope all the Tribal delegates will attend. Please see the website ([www.npaihb.org](http://www.npaihb.org)) for registration information.

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## **Response Circles – Domestic & Sexual Violence Prevention**

Colbie Caughlan, MPH, Project Director – THRIVE, TOR, and Response Circles

Paige Smith, Project Coordinator – THRIVE and Response Circles

### **Quarterly Report: October – December 2019**

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#### **Site Visits**

##### **Tribal Site Visits**

- Public Law 280 Class, Confederated Tribes of Grand Ronde, Grand Ronde, OR – October 8-9

##### **Out of Area and Other Travel**

- NPAIHB Staff Retreat in Sun River, OR – October 1-3

- Oregon 9 Tribes Prevention Meetings, NARA Northwest Wellness Center, Portland, OR – December 3

### Technical Assistance & Training

During the quarter, project staff:

- Participated in 15 meetings and conference calls with program partners.

During the quarter, Response Circles (RC) staff participated in the following:

- Webinar (5) – Attended four webinars for DV or SA to become more knowledgeable about the topics and hosted 1 webinar with Lenny Hayes, *A Silent Epidemic: sexual violence against men and boys*

During the quarter, the RC project responded to over 37 phone or email requests for domestic or sexual violence prevention, or media campaign-related technical assistance, trainings, or presentations.

### Health Promotion and Disease Prevention

**Response Circles Media Campaign:** All RC promotional materials (including the almost completed updated materials) are available on the web. During this reporting month staff disseminated 55 boxes of materials to tribes and tribal organizations that requested. Materials include: posters, brochures/rack cards, and tip cards. Domestic and sexual violence social media messaging and the dissemination of the domestic violence social marketing boot camp videos has reached at least 66,000 people.

### Other Administrative Responsibilities

#### Staff Meetings

- EpiCenter meetings
- All-staff meetings
- Project Director meetings
- Wellness Committee – monthly meetings

#### Publications

- *Response Circles Media Bootcamp* in the NPAIHB's Quarterly Health News and Notes

#### Reports/Grants

- Submitted the Year 2 DVPI annual report
- Submitted the Year 2 Quarter 4 DVPI financial report
- Quarterly financial report submitted to IHS for the DVPI grant

#### Administrative Duties

- Budget tracking and maintenance: Ongoing.
- Managed Project Invoices: Ongoing.
- Staff/Intern oversight and annual evaluations: Ongoing.
- Managed Project Subcontracts: Ongoing
- and events



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## Northwest Tribal Juvenile Justice Alliance

Stephanie Craig Rushing, PhD, MPH, Principal Investigator  
Danica Love Brown – Behavioral Health Manager – Choctaw  
Contractor-Juliette Markin, NPC

**Activity Report** – October through December 2019

### Program Development, Planning and Training

**Overview:** To inform the planning process, the NPAIHB and NPC Research will create and administer data collection tools to identify available data sources and Juvenile Justice best and promising practices in use regionally and nationally. Mixed-methods data collection will include:

- meeting minutes,
- stakeholder surveys,
- key informant interviews, and
- reviews of the published literature.

The decision-making process will take into consideration cultural-relevance for the NW Tribes, evidence of effectiveness, cost effectiveness, and scalability.

Our DOJ study will address critical health and safety topics in AI/AN communities, will extend the limited knowledge base surrounding best practices to improve outcomes for AI/AN teens and young adults, and will generate guidelines and tools tailored to the unique needs and cultural assets present in the lives of AI/AN youth. Effective practices, programs, and policies will be packaged by the NPAIHB for dissemination to the NW Tribes and Juvenile Justice programs nationwide. Intervention materials will be made available free-of-charge, on the [www.HealthyNativeYouth.org](http://www.HealthyNativeYouth.org) website.

#### Meetings – Conference Calls – Presentations – Trainings

- November 1, 2019 NW TJJ Staff meeting
- Novemer 13-15- Spirit of Giving Conference
- December 2, 2010 NW TJJ Staff meeting
- December 4, 2019 Oregon 9 Tribes meeting
- December 4, 2019 Focus Group at Oregon 9 Tribes meeting
- December 12, 2019 NW TJJ meeting

#### Out of Area Tribal Visits

- N/A

#### Technical Assistance Requests

- N/A



## Project Overview

**Overview:** In response to the **Tribal-Researcher Capacity Building Grant** opportunity, issued by the U.S. Department of Justice (DOJ) and the National Institute of Justice (NIJ), the NPAIHB will form a new inter-tribal workgroup – *the NW Tribal Juvenile Justice Alliance (NW TJJA)* – that will meet over 18 months to collaboratively design a research study to evaluate and disseminate juvenile justice best practices for AI/AN youth in the Pacific Northwest, aligning with DOJ research priorities.

Due to a range of historical, social, environmental, and structural factors, American Indian and Alaska Native (AI/AN) youth are overrepresented in juvenile justice systems. To improve outcomes for AI/AN youth, OJJDP prevention, intervention, and recidivism programs must be responsive to their unique worldview and social context. Unfortunately, research and data to guide DOJ system improvements for Native youth are limited.

The inclusive, iterative process will ensure all research partners actively weigh in on and contribute to research decisions.

## Surveillance and Research

**Study:** The need for this inclusive, strategic planning process is significant. While AI/AN youth in the region experience disproportionate rates of juvenile justice involvement, no planning body is presently convening decision-makers to elevate these important health and safety research questions in AI/AN communities. The goal is to establish Tribal-researcher partnerships to:

1. Identify, test and expand best practices that improve Juvenile Justice systems for Tribes in the Pacific Northwest,
2. Ensure that non-Native justice systems are improving life outcomes for AI/AN youth who interact with their services,
3. Build tribal capacity to access and utilize data that support quality improvement at the community-level, and
4. Create and administer data collection tools that will identify **Data Sources** that could inform our understanding of Juvenile justice disparities or concerns for our NW Tribes.

### Research Study Tasks

- Organizing of NWTJJA advisory group members
- NPC Final draft of study questions
- Literature review
- Resource Mapping of services in Pacific Northwest Tribal communities
- Literature review and annotative bibliography
- Hired assistance to help with literature review and annotative bibliography
- Completed 43 adult and 10 youth surveys completed between November 13-15, 2019 at the Spirit of giving conference.
- Data entry of focus group and surveys.

## Other Administrative Responsibilities

### Publications-Peer Review Presentations

- N/A

### Reports/Grants Submitted

- N/A

### Administrative Duties

- Budget tracking and maintenance: Ongoing
- Managed Project Invoices: Ongoing
- Managed Project Subcontracts: Ongoing
- Staff oversight and annual evaluations: Ongoing

## ECHO Project

David Stephens, RN ECHO Clinic Director  
Eric Vinson, BS, ECHO Clinic Manager – *Cherokee*  
Megan Woodbury – Opioid Program Coordinator

### Quarterly Report: Oct – Dec 2019

## Technical Assistance and Training

### NW Tribal Site Visits

- Suquamish: ATNI Meeting Presentation – Oct 8, 2019
- NPAIHB: SUD Clinical Training – Nov. 6, 2019

### Out of Area Tribal Site Visits

- ANTHC: HCV/SUD Clinical Training – Oct 8-9, 2019
- GPTCHB: HCV/SUD Clinical Training – Oct 23-24 2019

### October Technical Assistance Requests

- Tribal TA Requests = 12 (David), 6 (Eric)
- Other Agency Requests = 2 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB)

### November Technical Assistance Requests

- Tribal TA Requests = 12 (David), 6 (Eric)
- Other Agency Requests = 2 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB)

### December Technical Assistance Requests

- Tribal TA Requests = 10 (David), 6 (Eric)
- Other Agency Requests = 3 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB, USET)

**During the quarter, project staff participated in 52 technical assistance calls and requests.**

### Extension of Community Healthcare Outcomes (ECHO)



**Website:** The Indian Country ECHO website launched July 11, 2019:

<https://www.indiancountryecho.org>

Since launch, the Indian Country ECHO website received:

- Users = 1,899
- Sessions = 3,391
- Page views = 9,617
- Pages/Session = 2.84
- Average session duration = 3:37
- Bounce Rate = 39.07%

**Indian Country ECHO sessions:** Each month, the Northwest Portland Area Indian Health Board offers multiple teleECHO clinics with specialists focusing on the management and treatment of patients with HCV, SUD and Diabetes. The 1-hour long clinic includes an opportunity to present cases, receive recommendations from a specialist, engage in a didactic session and become part of a learning community. Together, we will manage patient cases so that every patient gets the care they need. ***A total of 724 patients have received recommendations via the NPAIHB ECHO HUB since January 2017.***

### Other Administrative Responsibilities

#### Publications

- Working on OUD Indicators Paper with CDC

- An Evaluation of Hepatitis C Virus Telehealth Services Serving Tribal Communities  
[https://journals.lww.com/jphmp/Fulltext/2019/09001/An\\_Evaluation\\_of\\_Hepatitis\\_C\\_Virus\\_Telehealth.17.aspx](https://journals.lww.com/jphmp/Fulltext/2019/09001/An_Evaluation_of_Hepatitis_C_Virus_Telehealth.17.aspx)

#### **Reports/Grants Submitted**

- Awarded for FYI 2020: SAMHSA ECHO – 524,000
- Awarded for FYI 2020: OMH ECHO – 350,000
- Awarded for FYI 2019: IHS SMAIF HIV 1.3 Million

#### **Administrative Duties**

- Budget tracking and maintenance: Ongoing
- Managed Project Invoices: Ongoing
- Managed Project Subcontracts: Ongoing
- Staff oversight and annual evaluations: Ongoing

# **IT Department Quarterly Report**

## **IT Department Quarterly Report for Oct, Nov, Dec, 2019**

### **Overview**

The Northwest Portland Area Indian Health Board has a high level of office automation and extensive information services. The staff uses desktop computers, laptops, PDAs and office equipment that require periodic maintenance and upgrades. This is in addition to 11 servers and other electronic equipment housed in a secure and temperature-controlled server room. The Board also has a 24 station training room using Dell PCs and Microsoft Terminal Server technology. The purchase of technical equipment, configuration, and maintenance is handled by the department director and the network administrator. The Electronic Health Record –RPMS training and support is now a part of the IT Department and its activities will be part of this report.

### **Strategic Priorities by Functional Area**

#### **Meetings Attended:**

- Management Group Meeting
- Project Directors Meeting
- All Staff Meeting
- eMARs Project conference call meeting(s)
- Weekly Area Informaticist call
- EHR Office Hours (weekly)
- EPCS for RPMS Alpha Testing calls bi-weekly
- Portland Area CAC call (monthly)
- Washington HCA-BHA Monthly Tribal Meeting
- Safety Committee Meeting
- IHS MACRA Work Group – weekly
- IHS National Pharmacy Council meeting (monthly)
- IHS National Council of Informatics (monthly)
- IHS HOPE Committee meeting (monthly)
- IHS Partnership Meeting – Spokane, WA
- TribalNet Health IT Board planning meeting (monthly)
- IHS ISAC meeting
- IHS Southwest Regional Pharmacy Conference
- TribalNet Health IT Board planning meeting (monthly)
- IHS National Combined Councils Meeting in Phoenix, AZ
- Joint NPAIHB/CRIHB Board meeting in Sacramento, CA
- IHS All Tribes conference call on 42 CFR Part 2
- Electronic Prescribing of Controlled Substances Kick-off training
- RPMS Fileman Training
- IHS HIM Consultants meeting (monthly)
- TribalNet Annual Conference, Nashville, TN

# **IT Department Quarterly Report**

## **Conferences and Trainings Supported/Provided:**

- ECHO Hepatitis C sessions – (minimum 3 per month)
- Joint NPAIHB/CRIHB Board meeting in Sacramento
- NPAIHB October Quarterly Board Meeting hosted by Umatilla Tribe
- Advanced TIU wit IHS
- RPMS /IHS 3<sup>rd</sup> Party Billing and Accounts Receivable Training
- IHS EHR Integrated Behavioral Health – e-learning
- RPMS / IHS Training for Diabetes
- 2019 IHS Dental Updates Continuing Dental Education Conference
- 9<sup>th</sup> Annual Thrive Conference
- ECHO - Substance Use Disorder – (monthly)
- EHR Office Hours weekly
- Data Management for Clinical Informatics – e-learning national RPMS EHR training
- Pharmacy Informatics Residency monthly sessions

## **Presentations:**

Technology and the Opioid Response – presentation at TribalNet in Nashville, TN

## **NPAIHB Activity:**

- Troubleshooting EHR – helpdesk activities daily
- Development of EHR Reminders to support IHM Chapter 30 (Chronic Pain) documentation standards in the EHR
- HOPE Committee – Technical Assistance workgroup
  - developing guidance on documentation of PDMP checking and how to monitor that in RPMS
  - Substance abuse screening tools – development and research on how to disseminate to RPMS users
  - Measures discussion/development on substance abuse screenings
  - Collaborate with HIM consultants on standardizing codes for pain related documentation
  - Authored new EHR Template for initial chronic pain visit to meet IHS Chapter 30 requirements
- National Pharmacy Council Communications Committee - organizing and initiating, developing pages on max.gov, development of content for IHS Pharmacy public webpage, and researching tools to collect data for IHS Pharmacy program
- Precept ASHP accredited Informatics rotation for IHS Pharmacy Residents
- Work with Sarah Sullivan on survey of EHR use for NW Tribes
- HOPE Committee – documentation development for auricular acupuncture partnership with Veteran’s Administration as pain treatment adjuvant
- Collaborating with IHS leadership and HOPE Committee on CFR 42 Part 2 interpretation for IHS I/T/U clinics in the context of Medication Assisted Therapy
- Developed guidance on documentation of DEA# for RPMS EHR users to comply with laws and regulations

## **IT Department Quarterly Report**

- Continued work on NPAlHB Quality Improvement Committee – co-chair
- Developed Leadership Briefing for clarification on MAT and 42 CFR Part 2
- Developed guidance on documentation of DEA# for RPMS EHR users to comply with laws and regulations
- Assist Principle Pharmacy Consultant in writing Special General memo regarding outside prescriptions and in sections of IHS Manual Chapter 7.
- Re-establish NPAlHB Quality Improvement Committee – co-chair
- Reconfigured training room with new projectors
- Worked with contractors to add 3 new office spaces
- Working on upgrading/retiring Win 7 PC's to Win 10
- Working with PD's to plan office moves
- Working with Admin officer to add additional cubicles in front office
- New PC's purchased for new Environmental program
- Installed new IHS switch and router
- Retired old Domain Controller
- Working on configuring new switches for phone system
- Working with Amazon to setup Glacier Offsite backups
- Added multiple new staff accounts and equipment to the office