



**DEPARTMENT OF HEALTH**

**Ms. Ramona Antone-Nez, Acting Executive Director**

**Telephone #: 928-871-6350**

**Email: [ramona.nez@nndoh.org](mailto:ramona.nez@nndoh.org)**

**FY 2016 Second Quarterly Report**

**(January, February, March 2016)**

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## **I. Executive Summary**

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The Navajo Department of Health (NDOH) provides health care delivery and preventive community based services throughout the Navajo Nation. With the new Navajo Nation Council approved legislation as a Department of Health, NDOH is authorized to carry out goals and objectives to meet the comprehensive health care and public health needs of the Navajo Nation and its population. Health related services are provided across the Navajo Nation with offices in most of the Agencies and some in border towns to provide greater access to services. Also, the NDOH plays a crucial role in supporting and advocating for plans or projects initiated by the Navajo Nation or local communities. This important role continues to be coordinated with the Health, Education and Human Services Committee (HEHSC) of the Navajo Nation Council, as the oversight committee for NDOH and other subcommittees of the Council as considered necessary.

Currently, several tasks have been identified while others continue to be addressed in order to become fully operational as a Department of Health, including the development of policies and the complete revision of the existing Master Plan of Operation.

The second quarterly report covers January - March, 2016, which features the activities of 15 programs including the Executive Administration.

The Executive Administration of the Navajo Department of Health reports the following:

- A. The Kayenta Health Center is now complete. This new State-of-the-Art health care facility will be dedicated on April 27, 2016. The Kayenta Health Center Planner in coordination with the Kayenta Steering Committee is planning activities to commemorate the completion of the new clinic. A draft agenda for this event has been developed subjected to finalization upon confirmations. The President of the Navajo Nation along with other high-ranking federal officials are invited to speak at this momentous event.
- B. In addition, in Fiscal Year 2016 the United States Congress appropriated \$105 million for the Indian Health Service – Health Care Facilities Construction line item. This amount includes funds for the Dilkon Health Center in the amount of \$12 million to be used to develop the utilities, water, and other infrastructure for the new health center. However, the Indian Health Service has not yet allocated the funds to the Navajo Area Indian Health Service. Once the funds have been allocated to the Navajo Area IHS, a Notice of Funding Availability will be sent to the Navajo Nation Office of the President and Vice President for further action.
- C. The Dilkon Health Center’s Program Justification Document (PJD) is presently going through an amendment process. This is necessary as the original PJD was approved in 2006; so it is essential that the PJD be updated to reflect current information such as workload, programs, services, etc., as it relates to the planning of the new Dilkon Health Center.
- D. The issue of water to serve the new Health Clinic continues to be addressed, the assigned planner for the Dilkon project has been attending water planning meetings that include the Sihasin

Committee meetings, TAG meetings and meetings with the Office of the Navajo Nation Speaker to promote the concept of having viable water sources available to serve the proposed Dilkon Health Center. An alternate water source being considered for the project is the Lower Greasewood Water Supply Project which is in development and construction. However, a more permanent water source will have to be determined soon.

- E. During this quarter, the NDOH helped sponsor the Annual CMS Outreach and Education Training which was held in Gallup, NM on March 15 & 16, 2016. The target audience was primarily patient benefits coordinators, IHS/638 facilities business office staff, patient registration staff, health information management staff, Purchased/Referred Care staff, and Navajo Nation Department of Health direct service providers. Staff from the Navajo Epidemiology Center provided a presentation on the Hantavirus and the Zika Virus and its impact on the Navajo Nation.
- F. The Navajo Breast and Cervical Cancer Prevention Program developed a plan to provide mammogram screening to clients in the New Mexico portion of the Navajo Nation. The first official mobile mammogram screening in New Mexico with partner Dzilth-Na-O-Dith-Hle Health Center is set for April 5, 2016. This is a major accomplishment because prior to this; no services were provided to the New Mexico side of the Navajo Nation.
- G. The Department of Behavioral Health Services is working to assess the Dual Diagnosis Capability in Addiction Treatment (DDCAT) and Tribal Core (Traditional Practitioners and Faith-Based), DBHS has commenced assessments for FY2016. Based on assessments completed in 2015, a compilation of data was obtained to determine a benchmark that DBHS can utilize to improve on dual diagnosing capabilities. Training was held on March 7, 2016 in Tuba City to introduce new participants to the assessment process. Thereafter assessments were completed on March 8 for Tuba City and March 9 for Kayenta.
- H. The Community Health Representatives and Outreach Program is working with Indian Health Service and/or their 638 facilities through the Public Health Nursing program to assist them with referrals, case management, particularly for high risk populations, and coordination of meetings, and jointly sponsoring Health Promotion presentations/activities such as the Just Move It, and Fitness Gram in the schools. Health screenings and fairs have increased to provide education on priority health issues such as HIV, Hantavirus, Rocky Mountain Spotted Fever (RMSF) and the flu.
- I. The Food Distribution Program (FDP) through its seven distribution warehouse sites provides eligible households with service. During the second quarter, there were 340 tailgate food deliveries completed and a total of 22,906 participants were served.
- J. The Health Education Program staff was apprised of the Zika Virus, causative agent, environment, signs and symptoms, mode of transmission, occurrence, reservoir, incubation period, risk groups, and prevention measures. It is important that staff have this knowledge in order to provide quality health and disease prevention education.
- K. Coordinated partnership is the key to public health nursing provision by the Kayenta Public Health Nursing program. This office coordinates with various internal and external programs to provide quality public health nursing services to the patients/clients of the Kayenta Service Unit. During the second quarter reporting period, a total of twenty-two public health education events were held with a total of 1,351 participants.

- L. The Navajo Area Agency on Aging has reestablished the Navajo Area Council on Aging (NACOA) with elected officers. A Plan of Operation and a guiding set of By-Laws will be developed to help govern the affairs of the NACOA.
- M. The Navajo Epidemiology Center/Navajo Suicide Surveillance Project: To address high rates of suicide among Navajo youths, the NEC, Navajo Department of Behavioral Health Services, and Navajo Area Indian Health Service are working toward the development of a community-based suicide surveillance system that has evolved to include community-based reporting of suicidal and related behavior, engagement and referral of affected individuals, and the development of prevention strategies reflecting patterns of suicidal behavior on the Navajo Nation.
- N. The Navajo Special Diabetes Program submitted an amended budget to Indian Health Service Grants Management in the amount of \$6.4 million for the SDPI Program however the program was approved for only \$2.4 million; this amount will enable the program to continue until FY2017; at which time the NSDP will have to reapply for new funding. The Program wants to highlight the fact that there remains a standing shortfall of \$4 million.
- O. The New Dawn Program New Dawn Program has rendered direct services to 198 people including 3 youths and 5 veterans. The Program will soon begin distributing vegetable seeds, fruit trees, and vegetable seedlings to communities and services will increase in number.
- P. The Office of Environmental Health /Code Enforcement's purpose is to reduce environmentally related disease and injury among the Navajo Nation population through the enforcement of health and safety codes, regulations and standards. It also provides food service facility/establishment surveys, monitoring and surveillance, permit issuances, food handlers' training, flea market surveys, monitoring and surveillance, technical assistance, and adverse actions, if warranted. During this quarter, there were several food establishment and service facilities that were closed after assessment. Most of these facilities were re-opened after corrective actions were taken to address concerns.
- Q. The Office of Navajo Uranium Workers reports during this quarter 19 clients received compensation from the Federal Radiation Compensation Network totaling in the amount of an overall \$1.2 million dollars. The ONUW continues to do case management to ensure eligible former uranium workers and/or their dependents receive consideration for compensation.
- R. The Public Health Emergency Preparedness Program reports the completion and submittal of the Navajo Nation-Wide Threat, Hazard Identification and Risk Assessment Report (THIRA) to FEMA for review and approval. The document must be shared at all levels of government to build defense, prevention, response and recovery capabilities to protect the communities.
- S. The Navajo Women, Infants and Children (WIC) Program reports that the Acting Principal Nutritionist is conducting a comprehensive review of the current policies and procedures for the purpose of updating and amending the policies/procedures as determined appropriate.
- T. Food Access Navigation Demonstration Project USDA Cooperative Agreement for the amount of \$2.4 million. A Program Director has been hired.

## II. Critical Issues

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- A. The Department of Behavioral Health Services (DBHS): The Thoreau Outpatient Treatment Center was reported to have termite infestation, causing interior and exterior damage to the building. Repairs are needed between the walls of the women's and men's restrooms. The Office of Environmental Health inspected the building on March 14, 2016; a written report will be prepared. Navajo Nation OSHA also inspected the building. An Action Plan was developed to address the problem. Closure of the building is not feasible due to the demanding case load at this site however; the safety of clients and staff takes precedence. Therefore, a contract with Carter Pest Services was completed and they will monitor the facility on a monthly basis. DBHS will also review and proceed with Action Plan from NNOSHA and continue to collaborate with Thoreau Chapter to plan for land site acquisition for a new facility. DBHS will review a cost analysis of current repairs; future projections based on severity of problem and will outline next steps.
- B. The BCCPP Program reports that there is a continual problem with requesting carryover funds after the program completes and submits the Final Financial Report. This is largely due to requests by Contract Accounting to have the program make changes/adjustments to the report. This creates delays in the submittal of the Final Financial Report to the funding source. The most recent report was submitted 3 months late, thus it impeded the Program's effort to request carryover funds. Because the request for carryover funds was submitted late, any available carryover funds will not be available for program to expend until next quarter (the final quarter of the fiscal year).
- C. The CHR Outreach program reports that the Patient Records Information Services Manager (PRISM) which is a STD/HIV Data Base needs to be installed and fully operational at the Social Hygiene Field Offices in partnership with the States of New Mexico and of Arizona STD Health Departments. The installation and operation of this Data Base will allow the field staff to input data into the system for reporting purposes.
- D. The Food Distribution Program is working with the USDA on the Management Evaluation, this effort will continue until it is completed with USDA's approval.
- E. The Health Education Program reports that the Youth Risk Behavior Surveillance Survey (YRBSS) did not meet the required threshold of 60% participation rate, from both middle school (50%) and high school (47%). Therefore, no report will be generated for the year 2014, which is a first interruption of the tri-ennial report. Another factor that contributed to this is that Schools Boards voted down their school's participation in the YRBSS.
- F. The Kayenta Public Health Nursing is still without a full-time Program Director; currently there is a delegated Acting Director overseeing the program. The Program desires to have the position advertised to ensure a full-time Director is recruited and selected to fill the position.
- G. The Navajo Area Agency on Aging reports that the Office of Environmental Health under the Navajo Area Indian Health Service and the Navajo Nation OEH have closed four Senior Centers in several communities as follows: Shiprock, NM due mouse infestation; Huerfano, NM due to unsafe Butane bottle; Ganado, AZ due to unsafe and health hazard infrastructure; and Coyote Canyon, NM due to an unsafe obsolete building. Corrective Action Plans are being implemented by the Supervisors of the affected Senior Centers.

- H. The Navajo Epidemiology Center continues to have need for sufficient resources to support staff positions and infrastructure for NEC to operate at its full capacity, especially now that the Navajo Department of Health has been approved.
- I. The Navajo Special Diabetes Program is concerned about the \$4 million shortfall to the SDPI Competitive Grant and how the reduced funding will ultimately impact operations in 2016.
- J. The New Dawn Program have issues with availability of office space for the field staff stationed in the Crownpoint Agency; field staff have had been occupying space in the Navajo Area Agency on Aging office however the staff were asked to move out because NAAA intended to hire additional staff. Consequently, the New Dawn field staff must find an alternate office space. There is a small mobile trailer home located near the Crownpoint Chapter House that is available however; it will require the Program to develop an MOU to be entered into with the Crownpoint Chapter.
- K. The Office of Navajo Uranium Workers reports that there has been no action regarding the 2015 RECA Amendments. To help resolve this matter, the ONUW has established a network system with various uranium organizations and OPVP to strategize on a plan of action that would allow the RECA Amendments can begin to move through the appropriate legislative processes for a decision.
- L. The Public Health Emergency Preparedness Program NN (NDOH) continues to experience challenges with separate funding allocations to the Navajo Nation which encompasses three states. For this reason, the program is working on a tri-state agreement with the three state health officials and the three federal regional offices to allow the Navajo Nation to receive direct funding in 2017 on behalf of the Program.
- M. The WIC Program is in the initial stages of developing an Electronic Benefits Transfer (EBT) system. The national target date for transitioning WIC to EBT is 2020. Navajo WIC is targeting January 2017 as the first phase rollout. NNWIC will be soliciting a card design from the program field staff. NDOH Program Directors will have an opportunity to participate in three card designs.

### **III. Project(s) Status**

- A. The Breast and Cervical Cancer Prevention Program submitted Year 5 Grant budget and work plan to CDC in February 2016. The grant was sent through the [grants.gov](http://grants.gov) website 8 days before the due date.
- B. The Department of Behavioral Health Services DBHS is working with NetSmart, Inc., to design and implement a new Electronic Health Record system for DBHS. The current EHR system, AccuCare will be utilized to the end of year 2016. The new EHR will be implemented by January 01, 2017. Trainings will be completed within the year for employees so transition can be achieved efficiently. DBHS is also exploring the concept of incorporating and enhancing billing capabilities with the new system for effective third party billing.
- C. The Health Education Program staff previously assisted the Arizona Department of Health Services in creating a school curriculum on Rocky Mountain Spotted Fever (RMSF); in February 2016 staff received training which included Public Health Nurses and CHRs. The curriculum is aimed at prevention, intervention (tick removal), and information regarding when to seek medical attention.
- D. The Navajo Area Agency on Aging has accomplished 98% of its 100% goal to achieve Employee's Annual Certification for CPR, First Aid, Fire Safety, Food Handling Permit and Safe Driving.

- E. The Navajo Epidemiology Center (NEC): Navajo Infectious Disease Surveillance System Project: MOA established between the NEC and New Mexico Department of Health (NMDOH) to conduct public health related epidemiological investigation, disease surveillance and response, and to integrate both entities in response to acute events. The MOA will assure: (a) complete and timely acute public health event and disease surveillance activities to include appropriate documentation, case management, training, and collaboration with NMDOH personnel, healthcare providers, other agencies, and key identified partners as needed; (b) responses to infectious disease and other acute disease cases, clusters and outbreaks; (c) special projects, data analysis, and related initiatives; and (d) supervision and communication as it relates to central/regional/local coordination with NMDOH.
- F. The Navajo Special Diabetes Program sponsored 25 public service announcements on “Healthy Eating” since February 2016 to the present date. The radio stations ran sixty-second announcements to highlight healthy eating. To date, there have been a total of 75 announcements completed.
- G. The New Dawn Program’s field staff have provided a number of presentations in the communities, schools and senior centers to provide education on horticulture and food preservation.
- H. The Office of Navajo Uranium workers reports their building’s HVAC system was repaired in January 2016. The office identified funds within the program budget and contracted with an independent contractor to complete the job.
- I. The Public Health Emergency Preparedness Program has completed an application for Arizona Ebola Funds in the amount of \$15,000 for FY 2015-FY 2017. The documents are in the 164 Review Process and the packet is currently with OMB/OCG section.
- J. Navajo WIC reports that an asbestos assessment is being performed by the Navajo Nation Risk Management office for the WIC Tsaille building replacement project. This assessment is required before existing building are moved off the land on which they are currently situated. Upon removal of the two trailers, the Navajo Nation Design and Engineering will conduct an assessment of utilities and soil. Procurement of proposed Navajo WIC building will follow the comprehensive asbestos assessment and abatement, if necessary.

**IV. Budget Status**

**2<sup>nd</sup> Quarterly Budget Information**

Funding Source <b>General Funds etc</b>	Number of Personnel #	FY 2016 Personnel \$ amt	% Used	FY 2016 Operating \$ amt	% Used
Department of Health	251	\$4,249,970	33%	1,562,548	12%

Funding Source <b>External Funds</b>	Number of Personnel #	FY 2016 /15 Personnel \$ amt	% Used	FY 2016/15 Operating \$ amt	% Used
Department of Health	1,328	\$8,453,324	35%	9,866,277	41%

## **V. Operational and Process Improvement Initiative Status**

- A. The NDOH Executive Administration is pleased to report that programs under the NDOH are working to complete their FMIS training modules to ensure they meet the 6B Rollout as mandated by the Office of the Controller. Some staff including the Acting Executive Director have completed the modules and have passed all the requesting testing, however the rest of the staff are still working on completing the training modules.
- B. The CHR-Outreach Program reports that the Navajo Nation through auditors KPMG conducted an Annual Calendar Year 2015 Single Audit of the CHR Program with preliminary results being positive.
- C. The DBHS is working to standardize all clinical forms in lieu of revisions being completed with the DBHS Policies and Procedures. This will help with service delivery and to ensure that all levels of service at all DBHS sites are concurrent and effective.
- D. The Health Education Program staff participated in the Public Health Emergency Preparedness exercise through meetings and online training; ICS 100, 700 and 300 in class instruction was attended by staff as well as the Medical Countermeasure (MCM) Communications meetings.
- E. The Navajo Area Agency on Aging reports that there is a review of policies and procedures underway to work toward program performance improvement. The review will allow for update (s) to the policies and procedures.
- F. The Navajo Special Diabetes Program participated in mandatory SDPI Webinars on SDPI Outcomes System (SOS) which is being implemented this year by IHS SDPI Program; the intent is to record data on a specific target group. NSDP addressed data fields for the target group. Data from the Web-based Data Collection and Management System with Real Time Solutions may provide the necessary data for the SOS.
- G. The Office of Navajo Uranium Workers plans to work with the State Legislators and the Navajo Nation to secure funds for a new building.
- H. The Public Health Emergency Preparedness Program continually strives to improve the NDOH Incident Management Team capacity with review of the emergency response after action reports, in addition to reviewing and updating the emergency operational plans; and offering NIMS-ICS training to personnel.
- I. The Navajo WIC Program is working toward complying with the FY2016 Condition of Appropriations # 8 (developing the programmatic Plan of Operation). As a unit under the Navajo Department of Health, NWIC is exploring alternatives to organize its service delivery methodologies utilizing the Public Health Accreditation Board's model for Standards and Measures.