## ADHS Tribal Consultation Policy Annual Report For Fiscal Year 2020-21

GOAL	OBJECTIVES	ACTIVITY AND PERFORMANCE MEASURES
Conduct tribal consultation meetings with Arizona tribal authorities on a semi-annual basis, or more frequently, as needed.	Provide regular opportunities for tribal input on policy topics and information sharing.	A formal virtual tribal consultation meeting was held on June 8, 2021. The agenda topics were: The Arizona Health Improvement Plan; Health Equity Priorities; Health in All Policies/Social Determinants of Health; Mental-Well Being priorities; Rural and Urban Underserved Health Priorities; Loan Repayment Program.
Ensure state services and resources are available to all eligible state citizens residing in Arizona tribal communities to the same extent that such services are available to all other eligible state citizens.	Inform and seek input from tribal representatives on women's and children's health programs	The Bureau of Women's and Children's Health (BWCH) Strong Families Arizona sponsored an annual Tribal Home Visiting Conference on September 16, 2021. Approximately 200 participants joined the virtual conference.  The Tribal Maternal Health Task Force meetings were initiated as of May 21, 2021. The meetings provided an introduction of the maternal health program and evaluation staff, MHIP program introduction, the maternal health work being conducted at ADHS, and the Maternal Health Strategic Plan.  "Maternal Health and Family Wellness from an Indigenous Perspective" training series were offered in tribal communities. In total 128 sessions took place virtual and/or in person. These sessions were community-driven and culturally adaptive to

the tribal communities and urban natives that received the training.

Association of Women's Health, Obstetric, and Neonatal Nurses (AWHONN) Post-Birth Warning Signs, Urgent Maternal Health Warning Signs, and Postpartum Warning Signs translated in the Navajo language.

Contracts established with ITCA and Dine College to improve the collection, analysis, and application on tribal aggregate level data on maternal mortality and SMM; hire program manager and epi staff, and conduct stakeholder meetings to identify and implement strategies to improve maternal health in tribal communities.

The Bureau's Pregnancy Risk Assessment
Monitoring System participated in Navajo Nation
Maternal Child Health Advisory Council monthly
meetings and co-developed radio PSAs to promote
the PRAMS survey in the Navajo Nation utilizing
Title V MCH Block Grant Funds.

The Bureau's Maternal Mortality Review Program recently partnered with the Inter-Tribal Council of Arizona to increase the diversity of the Maternal Mortality Review Committee by identifying indigenous mothers to provide their perspectives and recommendations in the maternal death review process.

Partnered and provided funds with Navajo Nation's Diné College to hold 2 listening sessions in at least two different indigenous communities throughout the state to collect information that will identify maternal health priority needs of the state as they relate to prenatal, postpartum, mental, and oral health care.

<u>COVID-19 K-12 pool testing</u> efforts has partnered with three (3) tribes currently using the state contract and vendor, ADHS is continuing outreach

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to other tribes to offer pooled testing for schools on tribal land.

An invitation for bid (IFB) contract is in process to offer correctional testing by tribal correctional facilities followed by outreach to each tribe.

Contract established with ITCA to deliver teen pregnancy prevention programming in 2 tribal communities they select as highest need.

Contract established with ITCA to hire and certify staff in Youth Mental Health First Aid to deliver trainings to youth serving organizations in tribal communities.

The Bureau's Primary Care Office administers workforce programs (e.g., National Health Service Corps [NHSC], State Loan Repayment Program [SLRP]) that aim to improve the recruitment and retention of healthcare professionals. During this reporting period, the NHSC program had 178 of 637 total obligated providers and the SLRP program had 5 of 153 obligated providers serving in IHS/tribal 638 sites.

On March 23, 2021, House Bill 2126 passed to add the language "An applicant who works at an Indian Health Service or tribal facility is not required to provide a sliding fee scale to be eligible for the program" to ARS 36-2172 for the Primary Care State Loan Repayment Program. This legislative language change is now in alignment with federal workforce program language.

July 2021 - AZ Health Zone created a "AZ Health Zone Tribal Questionnaire" to gather input and feedback from IHS Directors for programming improvements, familiarity, supportive opportunities, and community needs. Responses received from Fort Mojave Indian Tribe, Cocopah Indian Tribe, Fort McDowell Yavapai Nation, Kaibab

Band of Paiute Indians, and San Carlos Apache Tribe. August 2021 - AZ Health Zone initiated a proposal for a "Cultural Learning Series: Arizona Tribes and Nations" to begin in 2022. AZ Health Zone plans to actively engage Tribes and their community in what this learning series entails with the intention of expanding cultural knowledge to Supplemental Nutrition Assistance Program-Education (SNAP-Ed) programming efforts. The goal of this learning series is to strengthen the program's cultural awareness and responsiveness to Tribal communities receiving SNAP-Ed programming and support. The Bureau of EMS and Trauma System works Inform and seek collaboratively with tribal communities to offer input from tribal technical assistance to tribal EMS agencies seeking representatives on a Certificate of Necessity (CON) to operate an emergency medical ambulance service from the state of Arizona. In services programs 2021, the ADHS Director approved a Certificate of Necessity for the San Carlos Apache Tribe Emergency Medical Services (EMS) program as the first Arizona tribal EMS program to receive a CON designation. Although sovereign nations are not required to participate in the CON program, a benefit of participation is that a CON may result in increased Medicaid reimbursements for EMS services provided in tribal communities. Additionally, the Bureau of EMS and Trauma System works with the University of Arizona Center for Rural Health to provide naloxone training and naloxone kits for gaming enterprises of two tribes and four tribal police departments.

Douglas A. Ducey | Governor Don Herrington | Director

Inform and seek

The Arizona State Public Health Laboratory (ASPHL)

	input on state laboratory program services	processed 1,946 samples from tribal communities, 1,048 of these were for COVID-19 testing. ASPHL provided over 660 COVID-19 ID NOW test kits and assisted with the ordering and distribution of antigen (BinaxNOW) test kits to tribes. Tribes were included on the regular (weekly and then bi-weekly) laboratory capacity and capability survey for COVID-19 testing.
	Inform and seek input on delayed birth certificates service and assistance.	The Office of Vital Records provided customer service and subject matter expertise to tribal members attempting to register their birth as an Arizona delayed birth registration.
Regular and ongoing communications with the elected leaders of each tribe and the tribal health department in Arizona.	Non-Covid-19 communications	The ADHS Native American Liaison participated in monthly meetings of the tribal CHR Directors, attended Arizona Advisory Council on Indian Health Care meetings, coordinated planning for an American Indian Suicide Prevention Summit which had to be canceled due to Covid-19, coordinated a tribal Vaping outbreak conference call, coordinated a tribal Naloxone conference call, and attended various COVID-19 related meetings with tribes and tribal representatives.
	Covid-19 communications	The ADHS Native American Liaison provided regular communication updates to tribal health directors, participated in daily Navajo Unified Command Group calls and coordinated Tri-State testing and contact tracing coordination calls, participated in the ADHS Tribal Fatality Management calls, and continued coordinated information sharing on the ADHS surge line for

		emergency transports. Additional COVID-19 support was provided on a daily and weekly basis.
ADHS will seek, when appropriate, to enter into Memorandums of Understandings, IGAs, or other appropriate agreements with tribes.	Continue tribal funding agreements for public health emergency preparedness	The Bureau of Public Health Emergency Preparedness continued to provide direct funding to thirteen tribes for tribal public health emergency preparedness, provided Covid-19 supplemental funding to the 13 tribes, assisted in the request for a Federal Medical Station for the Navajo Nation, and provided Covid-19 personal protective equipment assistance to requesting tribes. Several Tribes did receive COVID funds from Immunization to enhance storage capacity for vaccines.
	Continue tribal funding agreements for Tuberculosis Control	The Bureau of Epidemiology and Disease Control continued to provide direct funding (state and federal) to support a tribal Tuberculosis Control Program for one tribe. Funding supports staffing and operational costs.
	Maintain tribal PRISM data sharing agreements	The Bureau of Epidemiology and Disease Control maintained PRISM software access for 6 tribal jurisdictions. The PRISM database is used for confidential STD/HIV data reporting.
	Continue MOU agreement with the Navajo Nation and ITCA for WIC program collaboration and	The Bureau of Nutrition and Physical Activity in collaboration with the Navajo Nation and ITCA WIC programs developed the Arizona WIC Program Food List. This list is provided to all participants and vendors. Bureau staff teamed up with ITCA WIC staff to certify self-check-out cash registers at

technical assistance	shared vendors.
Continued funding for the prevention of commercial tobaccouse.	The Office of Tobacco Prevention and Cessation continued IGA funding with two tribes, the Hopi Tribe and Kaibab Paiute Tribe, and one tribal non-profit, Southwest Navajo Tobacco Education and Prevention Project (SNTEPP). The funding in part provided sponsorship of youth anti-tobacco coalitions.

COVID-19 Challenges: Delays in getting IGAs for emergency funding processed in a timely manner.

**Tribal Consultation Policy:** 

http://azdhs.gov/documents/director/tribal-liaison/ADHS\_TribalConsultationPolicy.pdf.

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