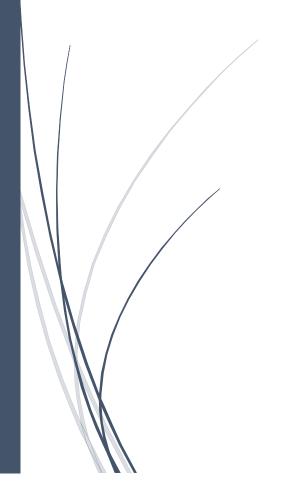
7/1/2019

Quarterly Report: Northwest Tribal Epidemiology Center



Questions? Contact: Victoria Warren-Mears, PhD, RDN, FAND Director, NWTEC www.warrenmears@npaihb.org or 503-416-3283

Northwest Tribal Epidemiology Center Projects' Reports Include:

Adolescent Health Epicenter Biostatistician Epicenter National Evaluation Project Immunization and IRB Injury Prevention Program (IPP)/Public Health Improvement & Training (PHIT) Medical Epidemiologist **▲ Native Children Always Ride Safe (Native CARS) Study/TOTS to Tweens Study** Morthwest Native American Research Center for Health (NARCH) Morthwest Tribal Cancer Control Project Morthwest Tribal Dental Support Center Morthwest Tribal Registry Project-Improving Data and Enhancing Access (IDEA-NW) Response Circles – Domestic & Sexual Violence Prevention THRIVE (Tribal Health: Reaching out InVolves Everyone) Wellness for Every American Indian to View and Achieve Health Equity (WEAVE) Western Tribal Diabetes Project Cancer Prevention and Control Research in AI/AN Tribal Opioid Response (TOR)

Enhancing Asthma Control for Children in AI/AN communities

M Northwest Tribal Juvenile Justice Alliance

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
Tana Atchley-Culbertson, Youth Engagement Coordinator | Paige Smith, THRIVE/DVPI Coordinator
Corey Begay, Multimedia Specialist | Eric Vinson, ECHO Specialist
Contractor: Amanda Gaston, MAT, Native IYG

Quarterly Report: April – June 2019

Technical Assistance and Training

Tribal Site Visits

 Swinomish Tribe – Meeting Youth Committee, NPAIHB Quarterly Board Meeting, April 16, 2019.

April Technical Assistance Requests

- 7 NW Tribal TA Requests = IHS, Warm Springs, CNAY, Muckleshoot, Siletz, Klamath, Umatilla
- 2 = ITCA, SecondMuse
- 7 = Native STAND research sites in NM, AZ, NV, CA, CO

May Technical Assistance Requests

- 3 NW Tribal TA Requests = Grand Ronde, Skokomish, Nimiipuu
- 4 = Multnomah County, San Pasqual Tribe, Northwestern Univ., American Indian Health Service of Chicago, Inc., IHS
- 12 = Native STAND research sites in CA, NM, WA, MI, WI, OR, AZ, OK, SD, ND, NE
- 4 = We R Native Facilitators Guide requests in WA, OR, MI, ND

June Technical Assistance Requests

- 1 NW Tribal TA Requests = IHS
- 5 = Oregon Research Institute; Johns Hopkins; Institute for Sexual and Gender Minority
 Health and Wellbeing; PhD Student; Headstream

Project Red Talon | We R Native

During the quarter, Project Red Talon staff participated in thirteen planning calls, three partner meetings, and facilitated or presented during four conferences/webinars, including:

- Meeting: Working Together Adolescent Health Action Planning Meeting, Portland, OR. Hosted by HHS and NPAIHB. April 23, 2019. Approximately 20 adults in Portland, 25 in Seattle, and 40 in Alaska.
- Presentation: We R Native, Native Project Youth Leadership Camp, Spokane, WA, April12-14, 2019. Approximately 200 youth in attendance.
- Presentation: We R Native, UNITY Virtual Conference, April 5, 2019. Approximately 20 youth in attendance.
- Webinar: We R Native and Adolescent Sexual Health, IHS Grand Rounds, April 18, 2019.
 Approximately 30 adults in attendance.

- Workshop: We R Native, Anadarko, OK, June 16-18, 2019. Approximately 50 youth in attendance.
- Workshop: Youth Movement, University of Oregon, Eugene, OR, May 3, 2019.
 Approximately 200 youth in attendance.
- Zoom: Ask Auntie/ Ask Uncle Planning Meeting, April 11, 2019.

Gen I / Bootcamps

- OXDX Bootcamp Training: THRIVE Youth Conference, Portland, OR. June 24-28, 2019.
 Approximately 20 youth partners in attendance.
- Storytelling and Comic Book Bootcamp Training: THRIVE Youth Conference, Portland, OR.
 June 24-28, 2019. Approximately 12 youth partners in attendance.
- Domestic Violence Bootcamp Training, Siletz, OR. June 21-22, 2019. Approximately 12 youth partners in attendance.

Native It's Your Game | Native STAND | Healthy Native Youth

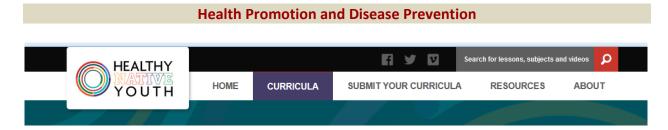
During the quarter, Healthy Native Youth staff participated in nine planning calls with study partners, and the following trainings/events:

- Meeting: Native STAND 2.0 Updates. THRIVE Conference, Portland, OR, June 25-26, 2019.
 Approximately 18 Native STAND Facilitators in attendance.
- Presentation: Concerning Posts and HNY. National Tribal Behavioral Health Conference, May 15-17, 2019, in Albuquerque, New Mexico. Approximately 100 participants in attendance.
- Presentation: Concerning Posts and HNY. SPRC Virtual Conference, June 18, 2019.
 Approximately 75 participants in attendance.
- Presentation: Concerning Posts and HNY. THRIVE Conference Alliance Meeting, June 27, 2019. Approximately 75 participants in attendance.
- Presentation: HNY and I-LEAD. OIEA Conference, May 9, 2019, Eugene, OR. Approximately 30 participants in attendance.
- Presentation: Native STAND and HNY. Protecting Our Children National American Indian Conference on Child Abuse and Neglect, March 31–April 3, in Albuquerque, New Mexico. Approximately 100 participants in attendance.
- Presentation: Native STAND and HNY. Tribal Public Health Conference 2019, April 9-11, in Tulsa, OK. Approximately 20 participants in attendance.
- Zoom: Community of Practice: Session #8 LGBT and 2S Inclusivity. April 10, 2019.
 Approximately 32 adult educators attended. Recorded trainings are available at: https://www.healthynativeyouth.org/community-of-practice-sessions
- Zoom: Community of Practice: Session #9 New to the Rez: Becoming an Ally. May 8, 2019.
 Approximately 28 adult educators attended. Recorded trainings are available at: https://www.healthynativeyouth.org/community-of-practice-sessions
- Zoom: Community of Practice: Session #10 Tap into Online Resources: We R Native & I Know Mine. June 12, 2019. Approximately 20 adult educators attended. Recorded trainings are available at: https://www.healthynativeyouth.org/community-of-practice-sessions

ANA - I-LEAD

During the quarter, staff participated in five grantee call, thirteen SMS text mentoring chats with 950 "healer" participants," and the following I-LEAD meetings and activities:

- Meeting: Youth Committee, NPAIHB Quarterly Board Meeting, Hosted by the Swinomish Tribe. April 16, 2019.
- Presentation: Envisioning a Healthier Tomorrow: Supporting Our Future Healers and Health Professionals. Oregon Indian Education Association Conference, Eugene, OR. May 9, 2019.
 Approximately 30 adults in attendance.
- Presentation: Interested in a Health or Wellness Career? THRIVE Youth Conference,
 Portland OR. June 27, 2019. Approximately 100 youth and adults in attendance.
- Presentation: Interested in a Health or Wellness Career? YTH Conference, San Francisco, CA.
 May 6, 2019. Approximately 40 adults in attendance.



Website: The Healthy Native Youth website launched on August 15, 2016: www.healthynativeyouth.org

Last month, the Healthy Native Youth website received:

- Page views = 1,864
- Average session duration = 2:10



Website: The We R Native website launched on September 28, 2012: www.weRnative.org

In May, the Monthly reach across the We R Native Channel: 164,339 (5,301/day)

Text Message Service:

- Northwest Portland Area Indian Health Board has 7,810 active subscribers.
- We R Native has 5,635 active subscribers.
- The Text 4 Sex Ed service currently has 469 active subscribers, 751 total profiles. Broken down by opt-in path:
 - Sex (Facebook): 303
 - Condom (Text Message): 184
 - Love (Text Message): 312
 - Snag, Banana (Instagram): 36
 - Hook up (twitter): 4
- We R Healers has 371 subscribers.
- STEM has 577 subscribers. :)
- Youth Spirit has 35 subscribers.

- We R Navajo has 197 subscribers.
- I Know Mine has 775 subscribers.
- Native Fitness has 818 subscribers.
- Hepatitis C Patient and ECHO project has 368 subscribers.
- Healthy Native Youth has 559 subscribers.
- THRIVE-DBT has 34 active subscribers.

April Social Media Messages: Number/Reach of We R Native messages addressing...

- Bootcamp PSAs = 1 posts, 0 text message, 5,300 people reached
- Concerning Social Media Post Tips = 0 posts, 0 text message, 0 people reached
- Sexual health/Healthy Relationships = 6 posts, 0 text message, 4,572 people reached
- DVPI = 0 posts, 0 text message, 0 people reached
- Sexual Assault Campaign (to be created this year) = 0 posts, 0 text message, 0 people reached
- Substance prevention = 3 post, 0 text message, 2,342 people reached
- Suicide (general) = 1 posts, 0 text message, 4,400 people reached
 - #WeNeedYouHere Campaign (specifically THRIVE) = 0 posts, 0 text message, 0 people reached
 - #WeNeedYouHere LGBT2S = 0 post, 0 text message, 0 people reached
 - o #WeNeedYouHere Veterans = 0 post, 0 text message, 0 people reached
 - o Mental health = 6 posts, 0 text messages, **11,001**, people reached
- Youth leadership/empowerment = 22 posts, 4 text messages, 97,487, people reached

May Social Media Messages: Number/Reach of We R Native messages addressing...

- Bootcamp PSAs = 0 posts, 0 text message, 0 people reached
- Concerning Social Media Post Tips = 0 posts, 0 text message, 0 people reached
- Sexual health/Healthy Relationships = 3 posts, 0 text message, 27,800 people reached
- DVPI = 0 posts, 0 text message, 0 people reached
- Sexual Assault Campaign (to be created this year) = 0 posts, 0 text message, 0 people reached
- Substance prevention = 1 post, 0 text message, 33 people reached
- Suicide (general) = 0 posts, 0 text message, 0 people reached
 - #WeNeedYouHere Campaign (specifically THRIVE) = 0 posts, 0 text message, 0 people reached
 - #WeNeedYouHere LGBT2S = 0 post, 0 text message, 0 people reached
 - #WeNeedYouHere Veterans = 0 post, 0 text message, 0 people reached
 - Mental health = 6 posts, 0 text messages, 11,190, people reached
- Youth leadership/empowerment = 22 posts, 6 text messages, 77,097, people reached

June Social Media Messages: Number/Reach of We R Native messages addressing...

- Bootcamp PSAs = 0 posts, 0 text message, 0 people reached
- Concerning Social Media Post Tips = 0 posts, 0 text message, 0 people reached
- Sexual health/Healthy Relationships = 3 posts, 0 text message, 4,071 people reached
- DVPI = 0 posts, 0 text message, 0 people reached
- Sexual Assault Campaign (to be created this year) = 0 posts, 0 text message, 0 people reached

- Substance prevention = 2 post, 0 text message, 5,100 people reached
- Suicide (general) = 0 posts, 0 text message, 0 people reached
 - #WeNeedYouHere Campaign (specifically THRIVE) = 0 posts, 0 text message, 0 people reached
 - #WeNeedYouHere LGBT2S = 0 post, 0 text message, 0 people reached
 - #WeNeedYouHere Veterans = 0 post, 0 text message, 0 people reached
- Mental health = 5 posts, 1 text messages, 13,560 people reached
- Youth leadership/empowerment = 29 posts, 3 text messages, 73,969 people reached

Research and Surveillance

Concerning Post Social Media: The NPAIHB has collaborated with the Social Media Adolescent Health Research Team to design educational tools to address concerning posts on social media. We are currently writing a paper that describes the evaluation of the video intervention for adults who work with Native youth.

Technology and Adolescent Mental Health (TAM): The NPAIHB is collaborating 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 interviewing participants.

Help-Seeking Messages: We R Native collaborated with Steven Hafner to carryout formative research to design a violence prevention intervention delivered to Native young men. The team conducted a pilot test of the intervention and made improvements to role-model script and the SMS series based on their feedback. The role model filming took place in April.

STI/HIV/HCV Clinical Programs

Jessica Leston, MPH, Clinical Programs Director - Tsimshian
David Stephens, RN ECHO Clinic Director
Eric Vinson, BA, 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 Carolyn Crisp, MPH Crystal Lee, PhD – *Navajo*

Quarterly Report: April – June 2019

Technical Assistance and Training

NW Tribal Site Visits

- Swinomish QBM April 15-17, 2019
- Kalispel Healing Tree Conference- May 1, 2019

- Colville SUD ECHO Training May 28-29, 2019
- Spokane Behavioral Health/Wellpinit IHS May 29, 2019

Out of Area Tribal Site Visits

- White Earth Nation April 28 May 2, 2019
- HCV/SUD ECHO Training Green Bay, WI May 1-2, 2019
- White Earth Nation April 28 May 2, 2019
- Alaska Indigenous Research Institute-May 6-10, 2019
- HCV/SUD ECHO Training Green Bay, WI May 1-2, 2019
- National Tribal Public Health Summit Albuquerque May 13-15, 2019
- North Dakota Filming LGBTQ May 23-27, 2019
- South Dakota P&T Committee Meeting
- Indian Health Service Dental meeting Albuquerque New Mexico

April Technical Assistance Requests

- Tribal TA Requests = 10 (Jessica), 20 (David), 6 (Eric), (2) Brigg, Megan (4), Danica (0), Morgan (3)
- Other Agency Requests = 7 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB)

May Technical Assistance Requests

- Tribal TA Requests = 10 (Jessica), 15 (David), 5 (Eric), (2) Brigg, Megan (4), Danica (0), Morgan (3)
- Other Agency Requests = 7 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB)

June Technical Assistance Requests

- Tribal TA Requests = 8 (Jessica), 16 (David), 5 (Eric), (4) Brigg, Megan (4), Danica (0), Morgan (3)
- Other Agency Requests = 7 (CDC, OMB, SAMHSA, IHS, GPTCHB, CA, WA, OR, ID, AZ, CRIHB, GLITC, NIHB)

During the quarter, project staff participated in 145 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. However, Hepatitis C is curable 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, 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.

To date the estimation is as many as 120,000 AI/ANs are infected with HCV. Sadly, the vast majority of these people have not received treatment. 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

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

Text Message service/email marketing: To date, the project has sent 17,888 and received 1,879 messages from 411 text message subscribers. The project sent 11 marketing emails and had a reach of 3,235 through constant contact in the month of June.

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, 6,000 items (posters, rack cards, pamphlets) have been printed, and the campaign (print + video) has received 547 video views on YouTube, and reached 5,515 on Facebook.

Example of text message received in November 2018: "Thank you. I do not know if I am able to respond to you but I am 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 to eliminate confusion over the hep B labs. I am by education a 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 also 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 rate 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 were 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 population. 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.

E-Newsletter/ Community of Learning Reminders and Sessions: The monthly <u>newsletter</u> is released at the beginning of each month to those subscribed through the Constant Contact listserv (n=204). The Indian Country Opioid Response <u>Community of Learning</u> (COL) occurs the second Thursday of every month. In the months of May and June, the COL sessions have been cancelled due to presenter schedule conflicts.

LGBTQ & Two Spirit Overview: Increasingly, healthcare providers across the United States are realizing that traditional 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 when their communities accept people who identify as LGBTQ or Two Spirit, 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.

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 are creating 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.

The first, shorter film will include testimony from Native people who identify as LGBTQ or Two Spirit about their experiences with healthcare providers. Additionally, LGBTQ-affirming healthcare providers will share their experiences, best practices, and recommendations when working with clients who identify as LGBTQ or Two Spirit.

The second, longer film will include footage from the daily lives of 3-4 Native people who identify as LGBTQ or Two Spirit. These participants will tell us about their work, their activism and advocacy, their families and communities, their process of understanding identity, and the changes that understanding has created in their lives.

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

Both films and print materials will be disseminated at annual LGBTQ and Two Spirit gatherings this year, as well as through clinics with whom IHS or NPAIHB has a relationship.

LGBTQ 2-Spirit Text Message Campaign: Three text message campaigns have been developed 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. Text message campaigns are currently being pilot tested and will be ready to be disseminated and evaluated in August 2019.

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

Surveillance and Research

STD/HIV/HCV Data Project: STD/HIV/HCV Data Project: The project is monitoring STD/HIV GPRA measures 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 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/N 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.

Extension of Community Healthcare Outcomes (ECHO)

ECHO: 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 and SUD. The 1-hour long clinics 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 577 patients have received recommendations via the NPAIHB ECHO HUB.**

Other Administrative Responsibilities

Publications

- AI/AN Methods Paper on PWID Project accepted to Public Health https://doi.org/10.1016/j.puhe.2018.12.002
- AI/AN PWID Results Paper in Review
- Working on OUD Indicators Paper with CDC

Reports/Grants Submitted

- Awarded for FYI 2019: SAMHSA ECHO 524,000
- Awarded for FYI 2019: OMH ECHO 350,000
- Awarded for FYI 2019: CDC Opioid Response Strategy 265,000
- Awarded for FYI 2019: SAMHSA TOR 3.5 Million
- 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

Epicenter Biostatistician April-June 2019

Nancy Bennett

Conference Calls:

- TPHEP 2019 conference planning committee call weekly
- eMars conference call w/ Cayuse to discuss project updates

NPAIHB Meetings:

- All staff meeting monthly
- ♣ Biostat meeting bi-weekly
- Staff retreat planning meeting
 - Created survey monkey for rooming options
 - Chose facilitators
 - o Chose venue

- Onboarding committee meeting
- Safety meeting
 - o Took over as committee chair
 - o Planned upcoming fire drills
- Asthma data meeting
 - o Completed and tested Asthma database, turned over to Mattie to start inputting

Conferences/QBMs/Out of area Meetings

- QBM in Swinomish, WA
- SAS Global Conference Dallas, TX
- Emergency Preparedness conf. Portland, OR

Miscellaneous

Reports:

Sent completed Cots vs EHR data to Sarah, still waiting on feedback

Site Visits:

None

EpiCenter National Evaluation Project

2nd Quarter Activity Report

April – June 2019

Staff:

Birdie Wermy – Epicenter National Evaluation Project Specialist

Technical Assistance via telephone/email

April – June

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

Reporting

April

- Good Health and Wellness in Indian Country (GHWIC) All Hands call on 4.03 @ 10am
- TEC APO call on 4.04 @ 11am
- Good Health and Wellness in Indian Country (GHWIC) TEC Workgroup call on 4.10 @
 10am
- Portland MSPI call on 4.17 @ 9am
- Portland DVPI call on 4.17 @ 11:30am

May

- TEC APO call on 5.02 @ 11am
- APO call on 5.30 @ 9am

June

- MSPI/DVPI call on 6.07 @ 11am
- MSPI call on 6.19 @ 9am
- DVPI call on 6.19 @ 11:30am
- Good Health and Wellness in Indian Country (GHWIC) call on 6.26 @ 10am
- Good Health and Wellness in Indian Country (GHWIC) TEC Workgroup call on 6.28 @
 11am

Updates

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

- Provided technical assistance to three tribal programs and one non-related to MSPI/DVPI during the month of May.
- Provided a draft agenda and SAVE THE DATE for the1st Annual MSPI/DVPI
 Convening for August 8 in Portland at the NPAIHB. Six programs can attend in
 person and two programs can attend by ZOOM. We will determine if we will have an
 in person meeting or if we can hold this training by ZOOM for 4 hours that day.

<u>Challenges/Opportunities/Milestones</u>

Milestone: Completed second annual "Act of Giving" on 4.03 at the Oregon Food Bank in memory of Haruka Weiser.

Opportunity: There were about 25 attendees on both days for the "Wellness in the Workplace" presentation on 4.23 and 4.24. Met with certain program directors and Tribal organizations needing guidance on how to implement a wellness policy in their workplace and/or how to draft a policy. We had a great turnout at each session and we were able to help answer questions about NPAIHB's wellness policy.

Challenges: There were two scheduled calls with one DVPI program not attended by the project coordinator. There is a change of staff at this DVPI program as of 5.29.

Challenges: Continuation application submission deadline was 5.31.19 update on 6.07.19

- o Portland MSPI 16 Projects: 14 Submitted, 2 Not submitted
- Portland DVPI 7 Projects: 6 Submitted, 1 Not Submitted
- The Portland Area Officer has emailed all 3 programs and worked with each to get their continuation application submitted.

Meetings/Trainings

- Y5 Performance Measure Report Webinar on 4.01 @ 10:30am
- Domestic Violence Prevention Project Webinar on 4.04 @ 10am
- NPAIHB Domestic Violence 101 Webinar on 4.10 @ 11am
- Tribal Sovereignty & e-cigarette Companies Webinar on 4.12 @ 9am
- Use of Culturally Informed Assessments Webinar on 4.17 @ 9:30am
- Correlates of Opioid Dispensing Webinar on 4.18 @ 10am
- Wellness Committee Meeting on 4.19 @ 10:45am

- American Indian Institute; Native Women and Men's Wellness and Diabetes Conference 4.22-4.25
- Preventing Suicide Webinar on 5.08 @ 10am
- Indian Day Planning Meeting on 5.10 @ 11am
- Advocating for Prevention in Communities of Color: The Role of Providers Amid the Opioid Crisis Webinar on 5.13 @ 10am
- Wellness Committee Meeting on 5.30 @ 11am
- SOAR for Native Communities Webinar on 5.30 @ 1pm
- Review Snap training on 6.05 @ 10am
- UIHI Webinar on 6.05 @ 11am
- Webinar: Lateral Violence in Native Communities Confirmation on 6.11 @ 11am

Site Visits

None

Upcoming Calls/Meetings/Travel

- Wellness Committee Meeting on 7.10 @ 10am
- Joint QBM w/ CRIHB in Sacramento, Ca on 7.15-7.18.
- Good Health and Wellness in Indian Country (GHWIC) All Hands call on 7.17 @ 10am
- DVPI call on 7.18 @ 9am
- MSPI call on 7.24 @ 9am
- Good Health and Wellness in Indian Country (GHWIC) C2 call on 7.24 @ 10am

Publications

NONE

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

Meetings:

NPAIHB all-staff meeting, April 1, 2019
Indian Day planning meeting, April 5, 2019
NPAIHB staff meeting, May 6, 2019
Dental Conference planning meeting, May 6, 2019
Indian Day planning meeting, May 10, 2019
Indian Day planning meeting, May 17, 2019
Tribal Emergency Preparedness planning meeting, May 22 2019
Tribal Emergency Preparedness planning meeting, May 23, 2019
Tribal Emergency Preparedness planning meeting, May 29, 2019
NPAIHB staff meeting, June 3, 2019

Immunization Policy Action Team (IPAT), OR DOH, June 6, 2019 Indian Health Service Award Presentation June 7, 2019 Assessment, Feedback, Incentives, eXchange (AFIX), OR DOH, June 6, 2019

Quarterly board meetings/conferences/site visits:

NPAIHB quarterly board meeting, Swinomish Casino & Lodge, Anacortes, WA, April 15-18, 2018

Cancer Clinicians Update, Residence Inn Riverplace, April 24, 2019

Region X Adult Immunization Stakeholder Meeting, Seattle, WA, April 30, 2019

NW Tribal Diabetes Conference, Embassy Suites, Tigard, OR, May 2, 2019

NPAIHB Dental Support Conference, Embassy Suites, Tigard, OR,

May 14-16, 2019

Northwest Tribal Foods Sovereignty Conference, Skokomish, WA,

June 4-5, 2019

NPAIHB Emergency Preparedness Conference, Embassy Suites,

Portland, OR, June 10-14, 2019

Northwest Tribal Cancer Coalition Meeting, Residence Inn Riverplace,

Portland, OR, June 27, 2019

Conference Calls:

2019 Emergency Preparedness Conference planning, April 10, 2019 Region 10 Adult Immunization Stakeholder planning meeting,

April 10, 2019

Portland Area Immunization Coordinator, April 12, 2019

Region X AISHH debriefing, May 8, 2019

Women's Health Webinar, May 8, 2019

Oregon DOH Immunization, May 8, 2019

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

PA IRB Meetings:

PA IHS IRB committee meeting, April 25, 2019

PA IHS IRB committee meeting, May 29, 2019

PA IHS IRB committee meeting, June 19, 2019

During the period of April 1 – June 30, 2019 Portland Area IRBNet program has 166 registered participants, received 7 new electronic submissions, processed 9 protocol revision approvals, approved 11 publications/presentations, and approved 3 annual renewals.

Provided IT and IRB regulation assistance to Primary Investigators from the following Tribes:

- 1) Confederated Tribes of the Yakama Indian Reservation
- 2) Cowlitz Tribe
- 3) NPAIHB
- 4) Confederated Tribes of Warm Springs Indian Reservation

- 5) Shoalwater Bay Tribe
- 6) Shoshone Bannock Tribe
- 7) Swinomish Tribe
- 8) Native Project
- 9) OHSU

Injury Prevention Program (IPP)/Public Health Improvement & Training (PHIT) Public Health Improvement & Training (PHIT) Project Injury Prevention Project (IPP) 2nd Quarter 2019 (April-May-June)

Bridget Canniff, Project Director Luella Azule, Project Coordinator Taylor Ellis, Project Specialist

Meetings/Calls/Conferences/Presentations

- 4/3, 10, 17,24 Conference calls: Tribal Health Emergency Preparedness (Bridget Luella Taylor)
- 5/1, 8,15, 22, 29 Planning committee conference calls: Tribal Health Emergency Preparedness (Bridget Luella Taylor, Nancy, Clarice)
- 5/20 WA DOH Emergency Prep & Response program update calls (Taylor)
- 6/5 TPHEP Planning Committee call (Taylor, Bridget)
- 6/10-6/14 TPHEP Conference at Embassy Suites in Portland (all IPP/PHIT staff)
- 6/25 Tabling at THRIVE Conference (Taylor)
- 6/26 Washington Firearm Tragedy Prevention Network meeting (Taylor)
- 6/27 Youth Advocates Alliance meeting (Taylor)

Trainings/Webinars

- 5/8 Celebrating Women's Health webinar (Taylor)
- 5/17 SMART Objectives Training webinar (Taylor)
- 5/30 Measles Outbreak: Applying Anthropological Understanding (Taylor)
- 6/10-6/11 Isolation and Quarantine Response Strategies in the Event of a Biological Disease Outbreak in Tribal Nations, Portland (Taylor)

Outreach/Other

Emails to CPS techs, IP Coalition Committee, IP Tribal contacts:

- NHTSA Distracted Awareness information
- Kids and Cars Hot cars death e-mail

Injury Prevention Toolkit:

- Submitted rough firearm safety materials for review and graphic design to University of Colorado partners
- Attended Youth Advocates Alliance meeting to provide updates on firearm safety module and receive feedback

Funding

- 6/6 Submitted supplement application for CDC Tribal Public Health Capacity Building and QI cooperative agreement, in response to 5 supplement work plans on the following topics:
 - o Environmental Health (Celeste)
 - Childhood Immunization (Tam, Tom Weiser)
 - Smoking Cessation (Kerri)
 - o Encouraging Students to Pursue Public Health Careers (Stephanie)
 - o Public Health Accreditation (Bridget)

Technical Assistance

 Warm Springs: At Joe's direction, responded to request for material support during water main break, in coordination with OHA Tribal Liaison Carey Palm – provided water, sanitary supplies, and related items (Bridget and Taylor)

Travel/Site Visits

Tribe: Swinomish

Location: Anacortes, WA

Date: 4/15-4/18 Purpose: QBM

Who: Bridget and Taylor

Quarterly Report
April-June 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:

- *Clinic Duty (Chemawa), 4/9, 4/11, 4/18; QBM (Swinomish) 4/15-4/17; Clinical Cancer Update, (Portland), 4/24; IHS CD Meeting (Portland), 4/25; EIS Meeting (Atlanta, GA), 4/29/5/3, 2019
- *USPHS Deployment, SW Border, May19-June 1, 2019
- *Idaho Immunization Summit June 3-4, ACIP (Atlanta, GA), June 25-28, 2019

Beginning July 1, I will be appointed acting CMO for the Portland Area IHS. This will require 1-2 days/week out of the office to be present at the area office. Will also require travel to quarterly Governing Board meetings and Accreditation Survey meetings at each of the 6 Federal Service Units.

Opportunities:

- *IRB met in April, May and June. There were seven new electronic submissions, processed 9 protocol revision approvals, approved 11 publications/presentations, approved 3 annual renewals.
- *Immunization Coordinator's Calls-Met in April and May. Travelled to the Idaho Tribal Immunization Summit where three of the five ID tribes attended. The state provided an AFIX evaluation (Assessment, Feedback, Incentive, eXchange). Accepted a request for appointment to RPMS Advisory Committee on Immunizations. Attended CDC ACIP meeting in Atlanta.
 *EIS Surveillance Project-EIS site visit by Atlanta supervisor on June 19. No new concerns regarding the assignment or the officer who is completing his requirements. Still editing an article for MMWR Notes from the Field. Discussed potential analyses for meeting analytic CAL and are looking at obtaining data regarding TB incidence and mortality for AI/AN. Made contact with BIA regarding availability of employee health data such as wildland firefighters and other occupations. Presented Washington mortality analysis at CSTE in June.
- *Hepatitis C: No new work.
- *Children with Disabilities Project: Still one table to complete. Paper for publication in Public Health Reports (Sarah Hatcher, 1st author is working thru final edits.
- *Opioid Epidemic: Met with IHS Dashboard workgroup to assist in refinements to the Dashboard. Raised questions about access to substance use data and the new Privacy requirements under 42 CFR, Part 2. No further revisions to the HOPE prescribing metrics document; updates to the Opioid Use Disorder metrics document are pending further discussions on the Privacy rules (P2 filter).
- *MCH Assessment: Team meetings have continued. Preparing background materials for a CDC umbrella grant addendum to focus on immunizations. Continue to advocate for infant mortality analysis and PRAMS data analysis projects.
- *Suicide Surveillance and Prevention (Colville): No new work to report except have discussed similar issues at two other tribes.

Motor Vehicle Data Project (Native CARS) TOTS to Tweens Study

Tam Lutz (Lummi), Co-Investigator/Project Director (Native CARS), Co-PI (TOTS to Tweens)
Jodi Lapidus, Co-PI (Native CARS), Co-Investigator (TOTS to Tweens)
Nicole Smith, Biostatistician (Native CARS and TOTS to Tweens)
Candice Jimenez (Warm Springs), Research Manager (Native CARS and TOTS to Tweens)
Meena Patil, Biostatistician (Native CARS)
Thomas Becker, Co-PI (TOTS to Tweens)
Kai Lei, Temporary Data Analyst (TOTS to Tweens)

Motor Vehicle Data (Native CARS) Project:

Project News and Activities

This quarter Native CARS with funding award from the National Institute on Minority Health and Health Disparities continued progress on improving the use of Motor Vehicle Data. Additionally, Native CARS formed a partnership with Oregon Health Sciences University (OHSU) and Northwest Washington Indian Health Board (NWWIHB) to move forward with these efforts. This partnership continues the collaboration of Co-PI's Jodi Lapidus and Tam Lutz, as well as current Biostatisticians Nicole Smith and Meena Patil as well as Research Manager, Candice Jimenez - all of which have been part of Native CARS team.

Disseminating

Back at the office, Native CARS staff has kept the Native CARS Atlas updated and responded to individual tribal site and local tribal organization requests. Our time continues to focus on drafting three new papers (Main Outcomes, Community Based Participatory Research - CBPR and Qualitative findings) to disseminate to peer reviewed journals. Native CARS has continued investigation and preparing for future regional and national venues. Our goal is to get the word out that the Native CARS Atlas is up and running at www.nativecars.org – an online toolkit.

Specific activities of the Portland Native CARS team are as follows:

Meetings – Conference Calls – Presentations - Trainings

- Staff Meetings each Monday
- NPAIHB-NWWIHB Partner Meetings
- Health Data Literacy Training
- Lifesavers Conference Presentation and Poster
- Meetings with Tribal Sites Native CARS Mini Grant

Program Support or Technical Assistance

- Communication with Jeff Nye/Julia Hammond regarding Atlas Revisions
- Meeting coordination, minutes and action item documentation
- Follow-up communication with tribes, tribal organizations
- Main Outcomes & CBPR Manuscript writing
- Partnership building and information sharing for Motor Vehicle Data Grant

- Presentation and Poster Abstract Submissions for National Conferences
- Motor Vehicle Data Grant Award Letters for Sub-contracts
- Motor Vehicle Project Timeline Preparation
- Sub-award contract preparation OHSU & NWWIHB
- Drafting of Analysis Plan template
- Sensitivity Analysis for Native CARS Main Outcomes
- Collated code for Native CARS Main Outcomes
- Notice of Motor Vehicle Grant award to Advisory Committee
- Analyzed and prepared Washington state death data
- Reviewed and Identified ICD-10 codes for death data analysis
- Pedestrian -Motor Vehicle fatality analysis and mapping
- Provided data and Letter of Support in support of Yakama Nation Heritage Trail
- Motor Vehicle Data Project article for NPAIHB Health News & Notes Newsletter
- Reviewed NWWIHB prior accident data analysis and related documentation
- Reviewed and provided comment to HNN article

TOTS to Tweens Study:

Project News and Activities

This quarter TOTS to Tweens Study team continued with data management, cleaning and conducting preliminary analysis of quantitative data collected to preparation for manuscript preparation and individual Tribal specific reports.

Specific activities of the TOTS to Tweens team are as follows:

Meetings - Conference Calls - Presentations - Trainings

- Project Meetings Weekly
- Presented at Portland Area Tribal Dental Health Conference
- Site specific meetings as needed

Program Support or Technical Assistance

- Meeting coordination, minutes and action item documentation
- Data Management & Preliminary Analysis
- TOTS to Tweens data cleaning and re-coding review
- Communicated progress, timeline and next steps with investigators
- Outlined two potential papers Main Outcome and Access to Care
- Transcription of elicitation interviews from written recorder notes
- Completion of tribal elicitation interviews
- Completion of qualitative interview recordings for transcription
- Preparation of Elicitation Interview files for analysis
- TOTS to Tweens oral health article for NPAIHB Health News & Notes Newsletter
- Reviewed and provide edits to HNN articles

Maternal Child Health (MCH) Core Workgroup

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.

Meetings - Conference Calls - Presentations - Trainings

- MCH Workgroup Meetings
- Oregon State PRAMS Advisory Committee Meeting
- Immunization Grant Writing Meeting

Program Support or Technical Assistance

- Reviewed breastfeeding rates and best practices for clinic and communities
- Brainstormed approaches we can take as an organization to improve PRAMS response rates
- Reviewed smoking during pregnancy analyses
- Wrote and submitted immunization grant to NIH
- Wrote and submitted MCH-Opioid IRB application
- Responded to IRB request for modifications
- Wrote and submitted CDC immunization umbrella grant
- Coordinated MCH/Injury focused July Health News and Notes

Additional support to the Epi Center and NPAIHB

Meetings - Conference Calls - Presentations - Trainings

- EpiCenter Staff Meeting
- Project Director's Meeting
- PAIHS IRB
- PRC Advisory Committee Meeting
- Investment Committee Meeting
- Biostatistician Core Meeting
- Wellness Committee Meeting
- Indian Day Meeting
- Safety Committee Meeting
- Online e-MARS Testing for monthly project input
- Facilitated conversations about breastfeeding as a best practice at Diabetes conference
- Quarterly Board Meeting

No. of Requests Responded to for Technical Assistance, including the following: Data Requests to Tribal and Urban Organizations, Communities or AI/AN Individuals

How many requested: 4
How Many NW Tribe Specific: 4
Email assisting with: 3
Phone assisting with: 1
How Many Responded To: 4

No. of Tribal Epidemiology Center-Sponsored Trainings and Technical Assistance Events Provided to Build Tribal Public Health Capacity

Number of project trainings: 0

Training Titles: 0

Number of individuals in attendance: 0

Site Visits

Confederated Tribes of Warm Springs Pi-Ume-Sha Health Fair – June 2019

Project(s) Contact Information

Tam Lutz, Co-Principal Investigator, 503-416-3271, tlutz@npaihb.org
Jodi Lapidus, Co-Principal Investigator, lapidusj@ohsu.edu
Candice Jimenez, Research Manager, 503-416-3264, cjimenez@npaihb.org
Nicole Smith, Biostatistician, 503-416-3292, nsmith@npaihb.org
Meena Patil, Biostatistician, 503-416-3307, mpatil@npaihb.org
Kai Lei, TOTS to Tweens Temp Data Analyst, klei@npaihb.org
Tom Becker, Co-PI, tbecker@npaihb.org

Northwest Native American Research Center for Health (NARCH)

Summer Research Training Institute and Travel Scholarships

- o Tom Becker, PI
- Victoria Warren-Mears, Director
- Tom Weiser, Medical Epidemiologist
- Ashley Thomas, Program Manager
- o Grazia Cunningham
- Jacqueline Left Hand Bull
- We have awarded roughly 40 travel scholarships to 2018 SI graduates & instructors. We predict to award 45 scholarships by the July 2019 deadline.
- The 2018 Summer Institute manuscript draft is in the final editing stage. We are currently looking into journals that would be most appropriate to publish this paper.

Fellowship Support Program for Tribal Graduate Students

- o Tom Becker, Pl
- Victoria Warren-Mears, Director
- o Tom Weiser, Medical Epidemiologist
- o Ashley Thomas, Program Manager
- o Grazia Cunningham
- Jacqueline Left Hand Bull
- We continue to support one Fellow with monthly stipends associated with their dissertation coursework and two Board Scholars with expenses associated with their

graduate coursework. Our Fellow is making great progress toward the completion of their degree.

Our manuscript is in the final stage of editing and will be ready for publication as early as fall 2019.

<u>Dissertation Support Program for Tribal Graduate Students</u>

- o Tom Becker. Pl
- O Victoria Warren-Mears, Director
- o Tom Weiser, Medical Epidemiologist
- Ashley Thomas, Program Manager
- o Jacqueline Left Hand Bull
- We have been supporting eight (8) Research Support Fellows who are AI/AN graduate students as they conduct scientific research necessary to complete their degrees. One of our fellows has just completed their dissertation and will no longer be receiving financial support, though we will track their career progress and be helpful when possible. We also have recruited two interns.

Morthwest Tribal Cancer Control Project NTCCP Quarterly Board Report April-June 2019

Training

- Northwest Tribal Comprehensive Cancer Coalition
 - 11 participants, 7 tribe NARA and SPIPA
 - o Idaho and Washington Comprehensive Cancer Coordinators
 - o Focus HPV Concept Mapping Focus group AI/AN cessation materials
- Oregon Quarterly 9 tribes Prevention Meeting
 - o Burns 7 tribes 18 participants
 - Tribal and agency updates
 - o Presentation NPAIHB
 - Grady Britton Opioid toolkit
- AI/AN Oregon Quit line Media Messaging Workgroup (Charrette)
 - Webinar Follow Up
 - o 2 sessions (90 Minutes) 20 participants 9 Oregon tribes, NARA, NAYA
 - o Presentation of what is developed: AI/AN quit line cessation resources/media launch
- AI/AN Oregon Quit line Media Messaging Workgroup (Charrette)
 - o 27 participants
 - o 12 Oregon tribes, 4 tribal urban programs
 - o Development of AI/AN quit line cessation resources/media launch
- Northwest Portland Area Dental Meeting
 - o 121 participants, 24 tribes, 28 dental programs

- Presentation tobacco cessation referral and HPV immunizations
- Northwest Regional Diabetes Conference
 - o 35 participants
 - o 23 tribes
- Clinician's Cancer Update on April 24th 2019
 - o 35 attendees
 - o 15 tribes represented; 1 Oregon tribe, 14 Washington Tribes
 - o IHS, NARA, SPIPA, Oregon and Idaho Comprehensive Cancer Programs, CEDAR OHSU
- Health Data Literacy Training, Yakama WA
 - o 30 attendees Piloted policy guide
- Presented at Women's Wellness Day for Nez Perce Tribe, Lewiston
 - o 283 women in attendance
 - NPAIHB presented on Cancer 101, E-cigarettes and breast feeding
- CDC Tribal Cancer Screening Workshop for Comprehensive Cancer Grantees, San Diego
 - Screening, outreach, tribal technical assistance needs, survivorship

Technical Assistance

- Contact with all Oregon tribes for AI/AN quit line meeting
- Follow-up on NW Tribal Cancer Action Plan Implementation application awarded for funding
 - o 13 implementation grants awarded
- Follow up with all NW tribes for recruitment to coalition
- Burns Paiute Tribe (2) TA for TPEP grant;
- Burns Paiute Tribe (4): Klamath Tribes: (3) TA travel logistics for AI/AN Oregon Quit line Media
- CLUSI NTCCP mini grant
- CLUSI; TA travel logistics for AI/AN Oregon Quit line Media Messaging, review TPEP
- Contact with all Oregon tribes for AI/AN quit line meeting
- Coquille (2) Discussion and planning of upcoming tobacco cessation training; type of training, trainers, date, and location; TA upcoming tobacco cessation training; Confirmed date and location, shared agenda; Planning traditional tobacco community survey at Restoration Celebration; July filming around traditional tobacco moved to July; and travel logistics for AI/AN Oregon Quit line Media Messaging Meeting
- Cow Creek: (2) Updated current Tribal TPEP activities to new Tribal TPEP temp; TA travel logistics for AI/AN Oregon Quit line Media Messaging
- Grand Ronde: TA and input on their hoodies and tee's for canoe journey promoting Quit line and the use of traditional tobacco
- Klamath: Researching tribal substance abuse patient education materials and handouts for Klamath Tribes Administrative Assistant; reach out to Grand Ronde and Warm Springs
- Quinault TA for e-cigarette factsheets, educational materials and e-cigarette 101 presentation
- Siletz discussion policy versus tribal resolution for housing policy
- Umatilla (2) sent Second Wind Curriculum, outreach for Knight tribal advisory committee; new navigator, mini grant, and DPP; TA in mini grant for survivorship

- Warm Springs (2) TA for TPEP grant, follow up from AI/AN quit line and honorarium and discussion of CPS
- Warm Springs Submitted proposal for joint presentation upcoming HPV summit; Housing policy information
- Yakama; (3) NW tribal implementation application; coordinate "KiKi"
- Follow-up on NW Tribal Cancer Action Plan Implementation application awarded for funding

Special projects

- CDC Umbrella grant AI/AN Quit line tobacco cessation
 - Scope of work timeline, strategies, objectives outcomes
 - Budget and budget narrative
- Tobacco cessation in tribal communities: Spring 2019 Survey
 - o Assist with survey communication between tribes and interviewer
 - Review and edit draft survey report
- Klamath Contract work
 - Review and edit Oregon tribe's history draft report
- American Indian Commercial Tobacco Cessation Program
 - OHA Optum NTCCP
 - Quit line data evaluation training
- AI/AN Oregon Quit line Media Messaging / Metro Group
 - Final invoicing for Marriott and travel reimbursement
 - o Honorariums
 - o Invite Tribal ADPEP coordinators to join zoom webinar follow-up
- Quarterly Prevention June Meeting
 - Set up purchase order and invoice for food order
 - o Research Certified Prevention Specialist (CPS) training
- Tribal Policy Guide
 - Review and edit NW Tribal Policy History to be included in final document
 - o Piloted tool kit
- Presentation at NARCH Summer Program
 - NTCCP overview and projects
- Oregon HPV Summit
 - Presentation HPV in Indian country NTCCP
 - o HPV Media presentation by Warm Springs on local media campaign
- Oregon HPV Summit Strategic Planning
 - Met with Oregon partners to develop HPV campaign for communities in Oregon
- Native America Calling: Radio talk show discussed the dangers/harms of e-cigarettes, marketing, targeting AI/AN and youth, AI/AN adult and youth rates
- Native American Center of Excellence
 - Celebration for Wy'east Scholars NPAIHB hosted 4 interns
- NARCH Luncheon A key to crafting tobacco cessation interventions for cancer prevention and treatment for American Indians and Alaska Natives

- 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
- Facilitated focus group for Wy'east Pathway Scholars
- Engaged in NARCH Cancer Fellowship Courses for two weeks to build capacity for Northwest Tribal comprehensive cancer project
 - Classes on applying to NIH funding, epidemiology, cancer control program presentations and cancer control updates throughout the nation
- Developed and disseminated June Cancer Survivorship month factsheet to Northwest Tribes.

Meetings

- All Staff Meeting
- Project directors
- AI/AN Oregon Quit line Media Messaging Planning/Debriefing Meeting
- Cancer Fellowship Meeting
- CDC Supplement Tobacco Cessation Grant Workgroup Meeting
- Certified Prevention Specialist Training Meeting
- Collaboration with Knight Cancer Institute CEDAR program
- Conference call with CDC Project Officer
- E-cigarettes Media Pre-interview
- Emergency Preparedness Immunization as harm reduction
 - o Facilitated student focus group
- Governor's Tobacco Tax Coalition
- Governor's Tobacco Tax Coalition submitted written testimony
- Knight Cancer Institute Collaboration
- Knight Cancer Institute Collaboration HPV Concept Mapping meeting (2)
- Meet with CDC Project Officer (2)
- Native American Center for Excellence
 - o Annual meeting -
- Northwest Native American Center of Excellence Program Coordinator
- Northwest Portland Area Dental Planning Meeting
- Optum Meeting (NTCCP, OHA, and Optum) (2)
- Oregon HPV Summit Speakers Call meeting
- Quality Improvement Meeting with Cardea
- Smoke-free Casino Follow-up Meeting (2)
- Tribal Policy Guide Meeting
- Tribal Tobacco Cessation Planning Meeting
- Wy'east Scholars mentor meeting (2)

Conference / Webinar calls

- TRUTH Initiative Quitting in the Age of Vaping: A Special Warner Series Webinar
- OHSU Knight Cancer Center Tribal and Rural Advisory Board
- CDC Cancer Survivor Series NIHB

- Tribal Comprehensive Cancer
- Health Fairs as EBI –
- Oregon Health Authority Retail Environment Assessment: Media Toolkit -
- Oregon Health Authority Tobacco Alcohol Retail Assessment: Tribal Communities Conversations
- Oregon Health Authority Retail Environment Assessment: Alcohol Results
- Tribal and Rural Advisory Board Meeting; Recalibration of the Board
- You are the Key to HPV Cancer Prevention (Dental)
- IHS Up in Smoke: Potential Health Impacts of Cannabis Use During Pregnancy and Lactation
- Knight cancer scholars (2)
- National Indian Health Board Strengthening Colorectal Cancer Screening in AI/AN
- Tribal Sovereignty and e-cigarettes: Emerging concerns
- Tribal and Rural Advisory Board Meeting; Recalibration of the Board

The Northwest Tribal Dental Support Center (NTDSC) is in their 19th year of funding. 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 will 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 two site visits this past quarter. NTDSC consultants visited the Makah tribe (Sophie Trettevick Indian Health Center) and the Lower Elwha Indian Health Center. This makes eight site visits for this fiscal year. NTDSC has met this objective for this fiscal year.

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 third in-person meeting was at the Portland Area Dental meeting on May 16, 2019. There have been a total of three in-person meetings and one webinar this fiscal year. We have another webinar scheduled for July 24, 2019. NTDSC has completed a program manual for new programs. The Elder Initiative is continuing with 10 dental programs, which includes both dental staff
and Elder Coordinators from various tribes. There have been a total of two in-person
meetings and one webinar this fiscal year. We have another webinar scheduled for July 30,
2019. The NTDSC staff, consultants and ARCORA foundation staff met regarding this
initiative to develop measureable goals and objectives.

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. This is a documented decrease in dental caries and the 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.

<u>CDE</u>: NTDSC tracks the number of participants and CDE credits provided through the Update on Prevention Course provided during site visits, BTM and Elders Initiatives, NTDSC yearly orientation and full meeting, and the addition of the clinical MID course.

The 2019 Portland Area Dental meeting was held in Tigard, OR May 14-16, 2019. There were 121 participants who attended from 24 tribes and 28 dental programs. 17.75 CDE were offered at the 2019 Portland Area Dental meeting.

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

NTDSC staff attended the national IHS Dental Updates conference in Albuquerque in June.



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

Quarterly Board Meeting Report – July 2019

Reporting period: April - June 2019

Victoria Warren-Mears, Principal Investigator
Sujata Joshi, Project Director
Chiao-Wen Lan, Epidemiologist
Heidi Lovejoy, Substance Use Epidemiologist
Joshua Smith, Health Communications Specialist
Karuna Tirumala, Project Biostatistician
Natalie Roese, Project Intern

Email: ldeaNW@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 or 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

- Completed linkage with Oregon hospital discharge records 2015-2017
- Began work on prepping the Northwest Tribal Registry v. 15 file
- Obtained Washington Healthy Youth Survey data for 2018

Dataset Cleaning and Preparation

- Worked on cleaning and preparing the following datasets for analysis:
 - Washington hospital discharge data for 2015-2016
 - Oregon Medicaid data for 2011-2014

Data Analysis, Visualization, and Report Preparation Projects

- Data Reports Completed
 - Washington suicide data profile (2014-2016)
 - Oregon suicide data profile (2013-2017)
- Data Projects in Progress
 - Maternal & Child Health Data Profiles and Analyses
 - Prepared oral presentation for the 2019 CityMatCH accepted abstract entitled "Mental health and access to services among American Indians/Alaska Natives women of reproductive age"
 - Began to prepare for the 2019 APHA presentation, "Maternal substance use disorders and infant withdrawal syndromes in hospital deliveries among American Indians/Alaska natives in Washington"
 - Smoking during pregnancy analysis
 - Completed longitudinal regression model predicting smoking reduction across the pregnancy using Oregon birth certificate
 - Manuscript development
 - Complete overview of methods, results and figures distributed for comment and review by MCH Epi & Biostats
 - o Final write-up of manuscript underway
 - Tobacco-related Causes of Death Analysis
 - Drafted analysis plan for CVD and tobacco use project
 - Began work on analysis and report outline development
 - Tableau Dashboards

- Worked on developing structure for "storytelling" Tableau dashboards
- Worked on formatting datasets for dashboard
- Substance Use Analyses
 - Finalized slides and mock presentation for accepted abstract at 2019 CSTE, entitled "Racial disparities in substance use disorder and self-inflicted injury among American Indian and Alaska Native youth in Washington, 2011 – 2014"
 - Draft background and methods section for the CHARS 2011-2016 manuscript on substance use comorbidities

Suicide Surveillance Project

- Suicide Monitoring Planning Projects
 - Provided TA and support to Chehalis, Coeur d'Alene, and Shoshone Bannock
 Tribes
 - Held site visits with Chehalis and Shoshone Bannock Tribes

Maternal & Child Health (MCH) Workgroup

- Attended Oregon PRAMS Advisory Committee meeting
- Participated in National Survey on Child Health oversample meetings
- Wrote and submitted NIH R21 grant to support immunizations trainings for tribes (Native BOOST)

NWTEC Public Health Infrastructure (TEC-PHI) Grant Activities

- BioStat Core Meetings
 - Continued bi-weekly meetings
- Health Communications/Evaluation Specialist
 - Developed program description page for program directory
 - Developed a guidance document to aid in projects completing program descriptions
 - Created a 1 page and ½ page report brief template in Piktochart
 - Worked with Corey Began to develop male & female stencil characters for IDEA-NW visualizations
 - Continued working on adapting evaluation data collection tables to Microsoft Forms
 - Finished the Phase II IDEA-NW TECPHI evaluation plan
- Health Data Literacy Trainings
 - Provided Health Data Literacy training to approximately 25 participants at Yakama Nation
- TEC-PHI Workgroups and Meetings
 - Continued attending TEC-PHI community of practice meetings and webinars
- Other
 - o Assisted Wy'east student intern (Kayla Murphy) with analysis project and poster
 - Prepared for and presented at Washington DOH and NWTEC Epi Gathering
 - o Began to draft summary notes for possible NIH R21 grant application

Data requests/Technical assistance

- Provided data on NW AI/AN stomach cancer incidence and mortality rates to Tom Becker and Dornell Pete
- Provided information on limitations/uses of specific Washington datasets to Andrew Shogren (Suquamish Tribe)
- Provided information on linkage methods, population denominators, age-adjustment, and other issues to Alex Wu for EIS presentation
- Met with Zoe Watson (OHSU/PSU student) and provided information on common data issues/limitations for birth certificate data
- Compiled data and presented information on Northwest AI/AN youth risk factors related to suicide, substance use, and STIs for Tribal Youth Action Planning workshop
- Provided information on death data variables available and list of PRCDA counties to Meena Patil for Motor Vehicle Injury grant analyses
- Provided feedback for cancer coalition meeting flier
- Helped design a cancer survivor factsheet
- Provided feedback to Tam regarding the WEAVE tribal food campaign
- Provided feedback for OHA AI/AN targeted quit line campaign
- Reviewed and provided feedback to Jessica Leston on background section for manuscript on Persons Who Inject Drugs
- Provided asthma hospitalizations map to Jessica M. at WA DOH for grant application
- Provided maps of Northwest Tribes to Jayney Wallick at the Northwest Center for Public Health Practice
- Reviewed and provided average number of cancer deaths per year to Rosa Frutos for Cancer Survivor fact sheet
- Created Save the Date flyer for Northwest Tribal/State Data Sharing Partnership Meeting
- Checked codes for identifying motor vehicle crash deaths for Meena Patil
- Sent examples of project protocols to Sydelle Harrison for her preparation of an IRB protocol examining violent deaths in Oregon
- Sent CSTE presentation to contacts at Southern Plains Tribal Health Board and Great Plains Tribal Health Board
- Presented "Clear Communication" presentation at the Cancer Coalition update 6/27/2019
- Met with Ms. Hurtado (Warm Springs) regarding assistance in restructuring the Warm Springs health programs evaluation system and systematic data collection protocol
- Sent examples of protocols and data sharing agreement examples to Martha Salyers (North Carolina Band of Cherokee)

Presentations & Results Dissemination

- Presented project introduction and background at the Shoshone-Bannock suicide monitoring and prevention strategic planning meeting (4/25)
- Presented data on Northwest AI/AN youth risk factors during Tribal Youth Action Planning workshop (4/23)

- Provided information on Tribal Epidemiology Centers, NWTEC, tribal epi and misclassification during presentation to Washington DOH Epis during Epi Meet and Greet
- 2019 CSTE Annual Conference, "Racial disparities in substance use disorders and selfinflicted injury among American Indians and Alaska Native youth in Washington State"
- 2019 CSTE Annual Conference, "Who 'counts' as American Indian/Alaska Native?"
 6/2
- Presented NWTEC Data Sharing Experiences during Improving Data Access and Use between Tribes, TECs, and States Webinar
- Wrote up a short article on suicide data for AI/AN in Oregon for July Health News & Notes newsletter

Trainings Provided to Tribes/Tribal Programs

Provided Health Data Literacy Training to approximately 25 attendees in Yakama
 Nation

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

- Received approvals for linkage with Idaho birth and death records and release of noncancer cause of death information from CDRI
- Submitted continuation application for linkages with Washington State CHARS and death records
- Submitted continuation application and study amendment for linkages with Washington State Cancer Registry
- Received executed contract and approval for Washington Healthy Youth Survey
- Submitted study amendment requests to Oregon Center for Health Statistics to request: 1) state file number and 2) cause of death literal fields
- Received fully executed data sharing agreement for obtaining PII data from the National Data Warehouse for the NTR

Grant Administration and Reporting

- Completed and submitted TEC-PHI Base and Opioid Supplement Progress Reports and Continuation applications
- Completed and submitted CDC 1803 Umbrella Project progress report for IHS/NDI Linkage Project
- Completed and submitted EpiDataMart Project progress report to Victoria for inclusion in the EpiCore continuation application

Travel

Site Visits

- Yakama Nation for Health Data Literacy Training, Toppenish, WA 4/8 4/10
- Swinomish Tribes for QBM and CDC Site Visit, Anacortes, WA 4/15 /4/17
- Shoshone-Bannock Tribes for Suicide Strategic Planning Meeting, Fort 4/24 4/25

Hall, ID

Chehalis Tribe for Suicide monitoring project meeting 6/21

Linkages

• Oregon hospital discharge data, Salem, OR 5/2

Other

 2019 Council for State and Territorial Epidemiologists Annual Meeting, Raleigh, NC 6/1-6/5

TEC-PHI Opioid Supplement

Coordination and Partnership Activities

- Met with DOH Leadership to discuss partnership opportunities, especially as related to data access and incorporating linkage results
- Continued weekly strategic planning meetings to refine draft NW Tribal Opioid Strategic Agenda
- Reached out to Swinomish tribe regarding their experiences using ODMAP
- Held discussions with WA WEMSIS staff regarding an EMS overdose analysis on/near tribal lands, relevant data quality concerns, and data request process
- Held call with Assistant Fire Department Chief Llewellyn to discuss his paper on using EMS data to map opioid use in Spokane Valley, and discussed EMS data quality, gaps, and local EMS integration with other state/federal EMS databases
- Email discussions regarding ODMAP with WA DOH and IHS
- Attended WADOH Opioid Data Workgroup meeting in Tumwater, WA; this was my first time attending this workgroup and it was an excellent opportunity to meet a number of key WA opioid partners from various WA agencies as well as provide input on the Washington State Opioid Response Plan. Several key additions to the Plan discussed include:
 - Adding an additional line item activity to work with NWTEC to integrate and address AI/AN racial misclassification
 - Adding "and race" to be explored as an additional stratification in the State Comprehensive Opioid Dashboard (previously was "by age and gender" only)
 - o Adding "and tribes and TECs" anytime LHJs, ACHs, and counties are mentioned
- Meeting with WADOH State Non-Infectious Disease Epidemiologist/WA Opioid
 Workgroup lead to discuss underway and potential state data system linkages, medical
 examiner education efforts and collaboration opportunities, state AI/AN opioid
 workgroup, NAS and other data efforts
- Coordinated with Great Plains TEC to share our respective compilations of opioid data sources and open discussion regarding collaboration opportunities
- Held phone meeting with OR Lead Research Analyst for the Alcohol and Other Drug
 Prevention and Education Program to discuss OR opioid and substance data, upcoming
 and underway opioid workgroups, and contacts for data systems

Data Analysis, Visualization, and Report Preparation

- Completed Washington Opioid & Drug Overdose Data Brief
- Completed Oregon polysubstance deaths analysis
- Started working in Washington ESSENCE (RHINO) data, planning overdose analysis, and researching case definitions
- Completed Oregon Opioid & Drug Overdose Data Brief
- Conducted overdose mortality analyses by Purchased/Referred Care Delivery Areas in Oregon
- Created Coquille PRCDA specific drug overdose report

Data Requests/Technical Assistance

- Provided opioid drug type over time slides/data to EIS officer for CSTE presentation
- Provided feedback and relevant data items for manuscript on AI/AN PWID
- Provided national, OR, and WA AI/AN methamphetamine data to IHS through Tom W.
- Provided Coquille PRCDA specific drug overdose data report to Coquille tribe
- Provided Oregon opioid/drug overdose death data to Yellowhawk Clinic

Trainings Provided to Tribes/Tribal Programs

 SUD Epidemiology PowerPoint was presented (by David) at the SUD/MAT Data Waiver Training in Colville, WA

Presentations & Results Dissemination

- Washington Opioid & Drug Overdose Data Brief was distributed at the SUD/MAT Data Waiver Training in Colville, WA
- Provided hard copy of Washington AI/AN Opioid/Overdose Data Brief to WADOH State Epidemiologist at WADOH opioid workgroup meeting & briefly discussed data/trends found
- Chiao-Wen presented at CSTE Conference on a paper that I collaborated on: Racial disparities in substance use disorder and self-inflicted injury among American Indian and Alaska Native youth in Washington, 2011 – 2014
- Sent WA & OR Opioid/Overdose Data Briefs to Opioid Program Coordinator and Director of NW Tribal Dental Center for distribution. They both have contacts asking for this data. Also shared with Great Planes TEC.

Grant Administration and Reporting

- Met with CDC in-person to discuss Year 1 accomplishments and Year 2 work plan ideas
- Developed/submitted Year 2 of grant work plan & budget, and Year 1 progress report
- Held check-in phone call with CDC to report grant updates & accomplishments
- Began compiling Performance Measure indicators to report grant activity/progress for quarters 1-3 of the grant period (Sept-May)

Other Activities

- Continued developing comprehensive list of relevant opioid & overdose data sources
- Distributed CSTE SUMH preliminary behavioral/opioid indicators how-to guide to BioStat Core

- Attended OPHAT Basic Training webinar to gain familiarity with data available in this system
- Discussed SUD Epidemiology presentation contents with ECHO staff
- Added three data sources to comprehensive list of opioid & overdose data sources
- Compiling list of opioid or drug overdose dashboards

Travel

Site Visits

- Yakima, WA, Health Data Literacy Training
- Swinomish, WA, April QBM and Tour of Didgwalic Wellness Center and MAT Program Tour

Other

- 2019 CSTE Annual Conference in Raleigh, NC 6/1-6/5
- WADOH Opioid Workgroup meeting in Tumwater, WA 6/26
- NWTEC Opioid Workgroup Strategic Agenda Planning in Troutdale, OR 6/25
- CSTE Data Sharing Partners Meeting with OR/WA/ID states & tribes in Portland, OR 6/20

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: April – June 2019

Site Visits

Tribal Site Visits

- Quarterly Board Meeting, Swinomish Tribe, Anacortes, WA April 15-17
- Tribal State & Federal Summit: Rising to the Challenge, Confederated Tribes of the Umatilla Indian Reservation, Pendleton, OR – April 16-18
- Social Marketing Bootcamp, Confederated Tribe of Siletz Indians (CTSI), Siletz, OR June 21-22

Out of Area and Other Travel

None during this reporting period.

Technical Assistance & Training

During the quarter, project staff:

Participated in 33 meetings and conference calls with program partners.

During the quarter, Response Circles (RC) staff provided or participated in the following presentations, webinars and/or trainings:

- Training (2) Co-facilitated the Social Marketing Bootcamp for youth at CTSI and an 8-hour training around Culturally Responsive Approaches and Resources for Survivors of Abuse in Indian Country with StrongHearts Native Helpline.
- Booth (1): Provided media materials and information at the Missing Murdered and Indigenous Women's Event, hosted by Multnomah Co. and the Native American Youth & Family Services Association (NAYA)
- Presentation (2): Hosted webinar presentation about RC along with StrongHearts Native Helpline and hosted a presentation by StrongHearts at the THRIVE Conference for Native youth.
- Webinar (5) Attended five webinars for DV or SA to become more knowledgeable about the topics

During the quarter, the RC project responded to over 32 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 5 boxes of materials to tribes and tribal organizations that requested. Materials include: posters, brochures/rack cards, and tip cards.

Other Administrative Responsibilities

Staff Meetings

- EpiCenter meetings
- All-staff meetings

- Project Director meetings
- Wellness Committee monthly meetings and events

Publications

Submitted Article for Missing Murdered and Indigenous Women day for the Healthy Native
 Youth e-newsletter

Reports/Grants

Staff submitted the DVPI Yr2 Interim Progress Report and year 3 continuation application

Administrative Duties

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



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: April - June 2019

Site Visits

Tribal Site Visits

- Coeur d'Alene (CDA) Tribe, Plummer, ID April 14-15
- Swinomish Tribe, Anacortes, WA April 15-17
- Cowlitz Tribe, Longview, WA May 23

Out of Area and Other Travel

- American Association for Suicidology's (AAS) Annual Conference, Denver, CO April 24 27
- National Indian Health Board (NIHB) Behavioral Health Conference, Albuquerque, NM May 15-17
- New Visions Wellness visit, Bend, OR May 17
- Henry Federal Jackson Building, Roundtable U.S. Senator Patty Murray, Seattle, WA -May 28
- Oregon Conference on Opioids + Other Drugs, Pain + Addiction Treatment, Bend, OR May 29-31

Technical Assistance & Training

During the quarter, project staff:

- Participated in 58 meetings and conference calls with program partners.
- Disseminated 67 packages of the suicide prevention campaign(s) for #WeNeedYouHere.

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

Presentations (6)— Panel presentation on Expanding the Inclusion of AI and AN Perspectives in Suicide Prevention presentation at the AAS Annual Conference, 45 attendees; panel presentation on The Opioid Epidemic: Intersecting Suicide and Substance Abuse Prevention Efforts presentation at the AAS Annual Conf., 50 attendees; poster presentation on the Concerning Post Webinar poster presentation at the AAS Annual Conference, 36 attendees; and co-presented on Healing of the Canoe at the AAS Annual Conference, 30 attendees; Garret Lee Smith Youth Suicide Prevention State/Tribal grantees: Virtual Program Showcase webinar presented on the Concerning Posts on Social Media webinar training, 75 virtual attendees and; facilitated & presented at the NW Native Adolescent Health Alliance meeting, 13 participants.

- Facilitation/Training (3) Hosted provider trainings for Marimn Health at the CDA Tribe, 8 attendees; hosted a Question Persuade Refer (QPR) for trainers at the NPAIHB offices, 36 attendees; facilitated a QPR gatekeeper training for 9 participants.
- Booth (2): Provided media materials and information at the AAS Annual Conference, 200+ attendees in Denver, CO and at the Gathering of Native Youth: Youth Movement at the University of Oregon in Eugene, OR
- Conference (1): staff hosted the 9th Annual THRIVE youth conference and served 14 tribes and had 64 kids participate and 40 chaperones, staff, and facilitators attend.

During the quarter, the THRIVE project responded to over 272 phone or email requests for suicide, bullying, Zero Suicide Model, or media campaign-related technical assistance, trainings, or presentations. Staff also received a Notice of Award for the 2019-2024 SAMHSA Garret Lee Smith Youth Suicide Prevention Grant!!

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 April - June: Number/Reach of We R Native Facebook messages addressing...

- Suicide (general) = 1 posts, 0 text message, 4,400 people reached
 - Mental health = 6 posts, 0 text messages, 11,001, people reached

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

- Submitted a year 4 quarter 2 financial report for the IHS MSPI Purpose Area 2.
- Submitted quarterly reports for year 5 quarter 2 for the SAMHSA GLS grant.
- Staff submitted the MSPI Yr4 Interim Progress Report and year 5 continuation application

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

Victoria Warren Mears, PI Tam Lutz, Project Director Nora Frank, Project Coordinator Jenine Dankovchik, Evaluation Project Specialist Ryan Sealy, Tobacco 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.

Meetings (excluding internal)

Conference/committee: 12 Tribal Community: 15 Funding Agency: 2 Sub-Awardee: 0

Community (non-tribal): 0
Government Partner: 1

Other: 20

Total Meetings: 50

Site Visits

Date(s) Tribe	Short Summary
---------------	---------------

05/08/19 Great Plain GHWIC celebrating Women's Health series

06/08/19 Cowlitz Tribe Grand Opening of Cowlitz Garden

06/28/19 Coquille Tribe Assisted with data collection for Traditional

Tobacco Policy

Survey

Total number of site visits this quarter: 3

Presentations

WEAVE-NW gave 4 presentations this quarter

Publications

WEAVE-NW completed 2 publications this quarter

Professional Development

WEAVE-NW staff completed 4 professional development activities this quarter

Technical Assistance Given

WEAVE-NW responded to 15 requests for technical assistance this quarter

Trainings

In-Person

- •4/9/2019 Health Data Literacy
- •6/4/2019 2019 NW Tribal Food Sovereignty Coalition Gathering
- •6/10/2019 Peer Counselor breast feeding training

Webinar

- •5/3/2019 Diabetes ECHO clinic (in person at Diabetes Gathering)
- •5/9/2019 Diabetes ECHO clinic
- •6/13/2019 Diabetes ECHO clinic

Total number of trainings given this quarter: 6

Western Tribal Diabetes Project Western Tribal Diabetes Quarterly Board Report April-June 2019

Trainings

- Northwest DMS class
 - o 8 attendees
 - o 5 call in
- Northwest SDPI Annual Gathering
 - o Live Endo Echo Session two cases
 - Panel
 - Interactive and very successful
 - o Key note Harm Reduction
 - Diabetes NA mindful meditation (stress reduction)
 - Best practice session 11 Best practices of programs in attendance
 - Round tables traditional foods, physical activity, healthy cooking, tobacco cessation, breast feeding
 - o 30 participants 25 tribes (13 WA; 9 OR, 3 ID)
 - o EndoECHO follow up with travel reimbursements
- Northwest Dental Meeting
 - Tobacco cessation referral process in dental clinics
 - o 121 participants, 24 tribes, 28 dental programs
- Nez Perce women and wellness day

- Presentation Cancer 101; e-cigarettes and vaping, breast feeding
- o 283 women in attendance
- Tobacco Webinar input for AI/AN quit line Oregon
 - Feedback and discussion of creative design and messaging
 - Development of resource materials for guit line
- Tobacco Charrette for AI/AN quit line Oregon
 - o 18 participants form 8 tribes, 2 tribal organizations, Chemawa
 - o Development of resource materials for quit line launch and cessation
- NARA Site Visit registry clean up, taxonomies

Technical Assistance:

- Ongoing for updating new program staff
- Cow Creek; TA audit from entry errors; DPP reimbursement for training
- Cowlitz,(3) TA on referral labs into the system and national conference breakout; TA entering outside labs and referrals into RPMS
- Crown Point health; (2) TA Qman and report, TA for an updated Shortcut and Reference Manual; and any updates will be on our website, and sent her the UR
- Fort Defiance Indian Health; TA to search and create register
- Four Corners Regional Health Center, sent the materials for June training
- IHS National; TA on switching registries in new system
- IHS Oklahoma City Area Office, TA removing optometry from the Audit
- InterTribal Council of Arizona; TA on NW tribal and community involvement
- Klamath; DPP reimbursement
- Lummi: TA to upload Patch 12
- Madison Fulton requesting help with community involvement here in the PacNW
- Makah, TA needed assistance with iCare
- Marimn Health TA for capturing Dental patients
- NARA, TA on missing a patient from the Audit; dpp reimbursement
- Navajo Nation; TA on HSR sent template and example
- Nimiipuu Health, (2)TA about taxonomies, TA on EHR
- Nooksack, TA to capture outside ASA medications
- Northern Navajo Medical Center: TA on how to set up registries, and how to remove registries.
- Northern New Mexico College Health Center; TA to get the registers to show up on DMS; and how to delete registers off account,
- Quileute, request for Excel files for the Quileute clinic for the last several years
- Samish; (2)TA for problem list for hep B vaccinations; RPMS changes
- Skokomish, (2) TA patients who don't have a dental visit in the past year and Shortcut & Reference Manual
- Spokane Tribe, (2) SOS midyear report due; TA new DC for access to registry
- Squaxin Island, TA submit her mid-year SOS RKM
- Umatilla (2) follow up for DPP training sponsorship of Oregon DPP travel; DPP reimbursement
- Urban Inter-Tribal Center of Texas: TA to find patients that were newly diagnosed, so I sent her instructions for QMAN

 Reached out to Cow Creek, Klamath, NARA, Coquille, Chemawa all interested in attending a dpp class

Special Projects:

- EndoECHO proposal to present at national conference
 - Checking with national team
 - Checking with Carol and local panel
 - o EndoECHO participant reimbursement previous session
- Native Fitness August 15 and 16th 2019
 - Recruitment flyers disseminated 30 registered
 - Outside vendor application complete
 - Meeting with Nike Kaman is coordinator
 - Got list of contacts for all things Nike
 - o Disseminated to all ADC's
 - Request for National IHS program to post flyer
- DPP reminders to Oregon participants for reimbursement:
 - Yellowhawk DPP July
 - Recruitment of Oregon Programs
 - Strategy for learning sessions
- Native Fitness August 15 and 16th 2019
 - o Recruitment flyers disseminated
 - o Registration in place
 - o Contractors NAFC in progress ideas for workshops
 - Hotel set up for NF 16
- Recruited two SPDI grantees in the Portland Area to lead two breakout sessions at the National Diabetes Conference in August
- Recruited Cow Creek staff to present at the June Endo ECHO, and she said she would.
- Printed all the Shortcut & Reference Manuals and packets for the June DMS training, sent an email to all the ADCs for them to forward them to their Areas, and sent out confirmation emails and added participants to the database
- DPP reminders to Oregon participants for reimbursement:
 - o Klamath, Siletz, Cow Creek, Umatilla, NARA,
 - o Recruitment for June Coquille and Klamath
 - Strategy for learning sessions

Partnerships and collaborations

- Washington State Dental Association (ARCOA)
 - Discussion of collaboration tribal dental clinics / diabetes
- o Governor's work group for Oregon tobacco tax
 - Tribes and tribal programs will receive 10% of the tax package
 - Public testimony submitted testimony
- o Oregon Prevention Coordinators Meeting
 - o Disseminated agenda
 - o Presentation and resource material from other projects
- Oregon Prevention Coordinators Meeting
 - Presentation NPAIHB

- CPS discussion
- o Diabetes ECHO Cow Creek presentation
 - o 15 attendees
 - Took the clinical notes and submitted for review
- WyEast Scholars food insecurity, nutrition, and obesity
 - 2 check in meetings
 - Attendance at WyEast graduation
 - Submission of final poster board
- Native American Center for Excellence (2 check in calls)
 - Annual retreat accomplishment and next year strategies
 - Successes, areas for growth or improvement, and creating more effective communication
- Graphic support
 - Food Sovereignty flyer, registration and booklet
- Wrote article for Health News & Notes
- o Preparing for DMS breakout session for the national diabetes conference in August
- o Graphic support
 - NPAIHB quarterly newsletter
 - Food Sovereignty Conference

Meetings and Conferences

- NPAIHB All-Staff Meeting (3)
- WTDP and Cancer Staff Meeting
- Project directors meeting (3)
- EndoECHO session meeting
- Meeting with Washington DOH Leadership
- NPAIHB Veteran's Committee Meeting, Apr 16
- NPAIHB OBM
 - Staff Veterans Committee
- NPAIHB Communication and Social Media Workgroup
- Diabetes Data Workgroup Meeting (2)

Conference Calls:

- OHA Optum AI/AN Quit line
- Metropolitan Group wrap up and two webinars for feedback
- SDPI grant review webinar
- Obesity Coalition Leadership Meeting bylaws and membership
- Diabetes Coordinators Meeting review of 2019 ADA Standards of Medical Carea

Cancer Prevention and Control Research in AI/AN

April-June Quarterly Report

Cancer Prevention and Control Research in AI/ANs
Tom Becker, PI
Victoria Warren-Mears, Director
Tom Weiser, Medical Epidemiologist
Ashley Thomas, Program Manager
Jacqueline Left Hand Bull

The Tribal Researchers Cancer Control Fellowship Program has successfully completed our two-week summer training with our second cohort. The training, held June 16-28, 2019. The cancer control fellows were able to increase proficiency and build new skills in the areas of research design and grant writing, cancer prevention and control, epidemiology, cancer survivorship, and several site-specific cancers. The one-week fall training is coming together very well. We were able to get our fellows and instructors registered and their travel has all been booked. All nine fellows from cohort two and eight fellows from cohort one will attend the fall follow-up training in Calgary. Our second cohort of fellows have completed their pre-course skills evaluations and pre-tests, all submitted to our evaluator. Our first cohort of fellows have been presenting at national conferences and we have been tracking those dissemination efforts.

Tribal Opioid Response (TOR) Consortium

Colbie Caughlan, MPH, Project Director – THRIVE, TOR, & RC

Megan Woodbury, Opioid Project Coordinator

Quarterly Report: April – June 2019

Site Visits

Tribal Site Visits

- Swinomish Tribe, Anacortes, WA April 15-17
- Hoh Tribe, Forks, WA June 20

Out of Area and Other Travel

- TOR Technical Assistance Meeting hosted by the National American Indian & Alaska Native Addiction Technology Transfer Center (ATTC), Mystic Lake, MN – April 10-12
- White Earth Harm Reduction Conference, Mahnomen, MN April 28-30
- National Indian Health Board's 10th Annual Tribal Public Health Summit, Albuquerque, NM – May 13-15
- Oregon Conference on Opioids + Other Drugs, Pain + Addiction Treatment, Bend, OR May 29-31

Technical Assistance & Training

During the quarter, project staff:

- Participated in 42 meetings and conference calls with program partners.
- Hosted 1 video conference call around the TOR Consortium grant for the 22 consortium tribes, 11 TOR Consortium attendees.
- Attended 7 webinars during the reporting period: De-escalating the Opioid Crisis: An Overview of Promising Prevention Strategies Parts 1 & 2; Compassion Fatigue Online Series: The Opioid Epidemic Parts 1, 2 & 4; Native Women with Substance Use Disorders are Different and; Survivors, Stress and Substance Abuse: Examining the Connection Between Trauma and Substance Use by the TOR technical assistance provider, Addiction Technology Transfer Center (ATTC) and; the NASEM (National Academies of Science, Engineering, and Medicine) Public Meeting 3: Committee on Examination of the Integration of Opioid and Infectious Disease Prevention Efforts in Select Programs
- Trainings (2): Opioid Overdose Kit practice training at NPAIHB and another training at the Hoh Tribe, 35 attendees, Forks, WA.

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 have decided to only host monthly calls for the TOR consortium partners and not connect them to any Community of Learning webinars.

Staff provided the first Opioid Overdose Kit training to a Tribe in the Northwest and received very positive reviews. The training is currently one hour long and staff will pare it down to a 5-min training for booths and short interactions next month. Over 75 Narcan Opioid Overdose kits will disseminated for this Tribe.

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

- Staff submitted the TOR year 2 continuation application to SAMHSA during this reporting period.
- Staff submitted the TOR year 1 progress report for Sept. 30, 2018 March 31, 2019 to SAMHSA during this reporting period.

Administrative Duties

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

Enhancing Asthma Control for Children in AI/AN communities

Enhancing Control of Childhood Asthma in AI/AN Communities

"Asthma Project"

1st Quarter Activity Report

April – June 2019

Staff:

Mattie Tomeo-Palmanteer – Asthma Project Coordinator Celeste Davis- Asthma Project Director

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
- Ongoing communication (telephone, email, presentations, and the NPAIHB newsletter) to recruit additional sites to evaluate the *Enhancing Control of Childhood Asthma in AI/AN Communities* project.

Reporting

April

- Completed National Institutes of Health (RPPR) report due 01-June-19- now.
- SIRS Report information was gathered by Mattie to ensure Ashley was provided with needed information to submit on time.

<u>Updates</u>

Asthma Project.

- Mattie is preparing a site coordinator power point training module and has ordered supplies and incentives for Nimiipuu Health site two to begin participation early July.
 This includes getting letters of support from Nez Perce Tribal Council and approval from the PAIRB to join the study.
- Mattie and Victoria Warren-Mears met with Joe Cladouhos and Dr. at the April QBM to review the drafted MOA and Data Sharing Agreement.

Challenges/Opportunities/Milestones

- Mattie worked together with PI and Project Director to submit the SIRS Report for the National Institutes of Health annual report. This includes fine-tuning the encumbrance's budget and the justification budget.
- Celeste and Mattie worked together with the Yakama site team to plan a
 Community Advisory Committee meeting. In addition, Mattie provided recruitment
 outreach at the Yakama Nation Tribal School Dance Away Diabetes Pow-wow. Flyers
 at many public locations within the Yakama Reservation were posted.
- Follow up calls to the February site recruitment email that outlined site participation benefits sent to Tribal Health Directors and Clinical Directors have started with Clinics that meet the qualifications to participate.
- A protocol modification that includes a telephone and Public Service Announcement (PSA) script for participant outreach received approval by the PAIRB. Additionally, all documents to add in site two (Nimiipuu Health) were uploaded, reviewed, modified and approved by PAIRB.
- Tom and Mattie to support recruitment of additional site additions contacted the Tribal Clinical Health Directors from Yellowhawk Clinic, Warm Springs Clinic, and Chehalis Tribal Health Clinic. Yellowhawk and Chehalis responded and are reviewing the draft MOA templates, a conference call will be scheduled in the next couple of weeks after the 4th of July Holiday.
- Yakama Site one, is starting preparation for pharmaceutical training and home visiting modules to share with additional sites in the near future.
- Mattie is working on creating Trello Program team storage set up for the working documents and ongoing module toolkit training curriculum storage.
- Evaluation planning meetings are occurring to ensure objectives are met.
- Data RPMS login issues occurred and were fixed within the Indian Health Service IT Department 25-June-19.
- An excel database (to hold participant questionnaires) was developed by Nancy Bennet. Practice data storage usage is being tested for usage.

Meetings/Trainings

- All Staff Meetings attended by Mattie and Tom for April, May, and June-19
- Indian Day Pow-Wow planning meeting 17-May-19.
- Asthma project meeting with the evaluator and all project staff 13-June-19.
- Mattie and Tom attended NARCH guest speaker series OHSU Tobacco Cessation presentation 25-June-19.
- Mattie attended the Clean Air Spaces: Fire Smoke Episodes Webinar 13-June-2019.
- Data System Development meeting with Mattie and Nancy Bennett 25-June-19.

Site Visits

- Yakama Pilot Site Visit and supplies delivery to Environmental Health Officer from Mattie 26-April-19.
- Mattie provided a site visit at the Yakama Indian Health Service Unit to give an update to the Community Advisory Committee 22-April-19.
- Mattie attended the 2019 NW Tribal Food Sovereignty Coalition conference to provide support in Skokomish Washington 03-June-19.

<u>Upcoming Calls/Presentations/Meetings/Travel</u>

- Tom Becker presented at the Indian Health Services Clinical Directors Meeting to recruit additional Asthma Project Sites 1-May-19
- Yakama Community Advisory Committee Asthma Update Presentation. 23-May-19.
- Celeste and Mattie attended the NW Tribal Asthma Project conference call team meeting facilitated by the EPA. 17-May-2019.

Other communications

None

Publications

Article for NPAIHB's MCH focused newsletter was submitted by Celeste 22-June-19.

Northwest Tribal Juvenile Justice Alliance

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

Quarterly Report 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 Al/AN communities, will extend the limited knowledge base surrounding best practices to improve outcomes for Al/AN teens

and young adults, and will generate guidelines and tools tailored to the unique needs and cultural assets present in the lives of Al/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.HealthyNativiveYouth.org website.

Meetings - Conference Calls - Presentations - Trainings

- NIJ Tribal Research Capacity Building Grant meeting-June 21, 2019
- Zoom-NW TJJA Alliance Kick off June 19, 2019
- Stakeholder Focus Group-THRIVE Conference June 27, 2019

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)*. The group 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 (Al/AN) youth are overrepresented in juvenile justice systems. To improve outcomes for Al/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 community. 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

- Recruitment of NWTJJA advisory group members
- NPC Final draft of study questions
- Literature review
- Resource Mapping of services in Pacific Northwest Tribal communities

Other Administrative Responsibilities

Publications-Peer Review Presentations

Reports/Grants Submitted

Administrative Duties

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



IT Department April – June 2019 Quarterly Report



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
- Indian Day Planning mtg.
- 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)
- Indian Day Planning mtg.
- IHS ISAC meeting
- IHS Southwest Regional Pharmacy Conference

Conferences and Trainings Supported/Provided:

- ECHO Hepatitis C sessions (minimum 3 per month)
- EHR Office Hours weekly
- Advanced TIU wit IHS
- April Quarterly Board Meeting
- RPMS /IHS 3rd Party Billing and Accounts Receivable Training



IT Department April – June 2019 Quarterly Report



- 2019 Portland Area Dental Meeting
- IHS EHR Integrated Behavioral Health e-learning
- RPMS / IHS Training for Diabetes
- 2019 IHS Dental Updates Continuing Dental Education Conference
- 9th Annual Thrive Conference

Presentations:

- American Indian Health Commission EHR Workshop "Current Landscape of Electronic Health Records in Indian Country" – May 8 in Spokane, Washington.
- Narcan Training for staff select group
- Hepatitis C Reminders on national OIT EHR Office Hours

NPAIHB Activity:

- Implemented new screen time out policy via GPO, to lock computer screens after 20 min
- Procured new server to replace our old Primary Domain Controller
- Procured new server that will be a new print server (in progress)
- Procured new server that will be our new DHCP server (in progress)
- Troubleshooting EHR helpdesk activities daily
- Planning deployment of Hepatitis C new reminders suite for universal screening and tracking
- 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
- National Pharmacy Council Communications Committee organizing and initiating, developing pages on max.gov, development of content for IHS Pharmacy public webpage
- Precept ASHP accredited Informatics rotation for IHS Pharmacy Residents
- Work with Sarah Sullivan on survey of EHR use for NW Tribes
- Development work for hepatocellular cancer RPMS EHR Reminder
- HOPE Committee 4PS screening tool documentation development for RPMS
- HOPE Committee documentation development for auricular acupuncture partnership with Veteran's Administration as pain treatment adjuvant
- Integrated Behavioral Health for RPMS EHR training course planning
- Troubleshooting EHR helpdesk activities daily
- New CAC training Nisqually
- HOPE Committee Technical Assistance workgroup



IT Department April – June 2019 Quarterly Report



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- Retired old BACKUP EXEC server, and Implemented new backup server that uses VEEAM
- Purchased space on the Amazon Glacier cloud for a future backup repository (in progress)
- Attended WIN 10 Administration/Deployment class
- Implemented new VPN solution for full time employees
- Procured new server that will act as a WSUS server for centralized windows updates (in progress)
- Did a massive "spring cleaning" and recycled lots of old equipment
- Signed on to 5 year maintenance contract for our new Shoretel phone system
- Implementing new online password reset tool (in process)
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