



Sovereign Nations

TribalSelfGov.org

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Pouring the Water

*Tribal Health Care &
Electronic Health Records*

When Electronic Medical Records (EMRs) came on the scene in the 1960s, physicians never imagined it would take half a century for these to become the norm, evolving into the clinical Electronic Health Records (EHR) interoperable systems used within almost all of the Indian Health system today to improve the ability to diagnose diseases and reduce—even prevent—medical errors, and ultimately improving patient and population health outcomes.

With the progression of technology, and adoption of EHRs becoming the standard at large health care facilities, the full integration of the systems like the Indian Health Service (IHS) Resource and Patient Management System (RPMS) remains a challenge for tribal communities.

However, we at Self-Governance have two expert “secret weapons” who have broken the mold of traditional EHR integration and champion the idea that EHRs are just the beginning. Who are they? Meet Carolyn Crowder and James Spillane.

Sovereign Nations caught up with the dynamic duo recently to discuss their outlook on not only helping tribal communities maximize the use of their Health IT-solutions within their clinical practice, but how to use these tools to become high performers in quality performance improvement, and ultimately harnessing our own data to strengthen self-governance.

Crowder's philosophy?

“I don't mind if the glass is half empty or half full just as long as we're pouring the water. We work with tribes to create this same manner of thinking. If the system is not working for you, make the decision for a better solution. It is important for tribes to embrace the knowledge that, working together and learning from each other, we can create a better future in our communities.”

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“What she does and the way that she thinks is big. She is always thinking of a better way of doing things whether at the Tribal, statewide or the national level working with providers, leadership, governance and tribal boards or councils. I, however work more on the ground with EHR's, care team configuration, quality measures, workflow, and customer service. Our work complements each other's and we purposefully bring the organization together to find better system solutions,” Spillane said of his colleague.

Through their collaborative work, Crowder and Spillane have helped tribal communities make strides in improving health care for their people and surrounding communities utilizing their developed strategy Spillane calls: A Tiger Team Approach.

“We take an organic approach, we process map the whole ecosystem and then put together a customized team to create customized solutions to improve the particular tribes' health care delivery system,” said Spillane. “There are other advisors in this space but they only make recommendations, we provide sustainable solutions while on the ground. This strategy currently has a 100 percent success rate.”

Working from the ground up with tribes, the team recognizes the undercurrent of IHS historical trauma and the need for a closer look at what Spillane calls behavioral economics.

“When a tribe assumes care, they want to throw out their EHR, not understanding that they are just using it at 10% of its capability,” Spillane elaborated. “Let's turn this thing on all the way! With hands-on support, we kind of give [tribes] a boost. When tools are working at 100%, we can move the system from the reactive to proactive, waste goes down, capital goes up, and population health goes up.”

Through their training, tribal health care systems can access the full potential of their existing EHR systems and create improvement in a matter of days by setting defaults on patient charts for testing high-risk patients for disease prevention like HIV/AIDS or colorectal cancer.

In fact, an investment made by one Alaskan tribal community in their EHR system enabled that tribe to immediately save three lives and over \$550,000 in treatment costs by simply updating the EHR system to flag patients due for a preventative colonoscopy and developing a process for screening.

Crowder and Spillane are also pulling from other industries for inspiration such as the hospitality industry. Best practices has always been their forte' and they have co-organized two highly successful national best practices under the Office of Tribal Self Governance Government Performance and Results Act Pilot program.

“We want to switch the health care model to 'Health-caring' which is more about customer service,” Spillane said.

Spillane and Crowder's “Why Not Us?” attitude and energy are infectious. They believe that excellent patient care leads to a world of opportunity including job creation and inspiring tribal members to become part of the medical field themselves. Spillane believes that tribal communities will be churning out even more doctors in the next generation because the communities and patients are the owners of successful tribal health systems.

The bigger question Spillane asks is: “How do we help 200 tribes rather than 40 tribes?”

To learn more about EHR trainings and capacity building contact the SGCE offices via phone at (918) 302-0252.



A Self-Governance pilot site for the TIWAHE Initiative, Red Lake Band of Chippewa Indians brick-and-mortar Abinoojiiyag Noojimoo Wigamig Juvenile Facility (shown here) is a cornerstone of their Initiative program.

TIWAHE Initiative Pilots

Building a Framework

TIWAHE [ti-wah-hay] noun: the Dakota word for family that represents the connection and responsibility to protect all living things around you.

Tackling systemic issues, changing behavior, and finding solutions is a tall feat for anyone but – what if it was with a whole nation watching?

The TIWAHE Initiative began as an idea to better serve Tribal communities in their social service needs, a historically underfunded sector of the Bureau of Indian Affairs (BIA) budget. The tide changed in 2015 with the authorization of funds through the presidential budget to reduce poverty, substance abuse, and domestic violence in Indian Country, thus establishing the TIWAHE Initiative.

As the first step toward implementing the initiative, the BIA set up a pilot program and selected four Tribes with the requirement to pick at least one Self-Governance Tribe as part of the pilot. The Red Lake Band of Chippewa Indians was one of the four selected.

“The ultimate plan is to replicate this anywhere, not just for Tribes but for everybody. We recognize that they are looking to us, it’s a little scary,” explained Red Lake Band of Chippewa Indians Administrative Officer, Dave Conner.

The reason for their involvement in the pilot program may be partly attributed to the previous administration, according to Red Lake Abinoojiiyag Noojimoo Wigamig Juvenile Facility/Recidivism Director, Muriel Dudley.

Through a Department of Justice Correctional Program in Indian Country grant, Red Lake built a juvenile detention facility which sat empty for a decade due to the lack of funds to hire staff to serve the community.

With the funds provided by the pilot program, the Red Lake TIWAHE Initiative hit the ground running and opened its doors to provide the much-needed social services to youth and families, but it wasn’t enough.

“We are really lacking in coordination of services, doing the research and looking at numbers a lot of our youth are sent off reservation, they fall through cracks, and it’s not one person’s problem,” said Dudley.

Dudley further explained that they are looking to make their facility a one-stop-shop and are currently moving into Phase 2 of their TIWAHE roll out.

The Children’s Healing Center is building a data infrastructure utilizing the Global Appraisal of Individual Need short screener (GAIN SS) which screens for mental health issues, substance abuse, crime and violence and recidivism.

“The Children’s Healing Center staff has been working closely with the Chestnut Health Care System for the past two years to implement the GAIN SS and make it culturally relevant not only to the Red Lake Nation but to other American Indian communities throughout Indian Country,” said Dudley.

Although still understaffed, TIWAHE is rapidly trying to make up for lost time by hiring a mental health professional in February specializing in Eye Movement Desensitization and Reprocessing (EMDR) and are currently building a health and wellness piece to their practice that works with other Red Lake programs to integrate all Tribal social services.

“We need to have that cross communication. I really think that a Tribal entity needs to show that this CAN be done,” said Red Lake TIWAHE Initiative Lead Planner Donovan Sather. “Once we become professional in this work force...getting the mindset that I have a job, I have a duty – shifting to I’m a provider...we’re all in this together mind set. Once our clients see that we’re working together. It makes clients want to participate and hold up their end.”

Sather and the Red Lake TIWAHE Initiative team will be rolling out a Resource Booklet later this year to educate the Tribal community on the social service programs provided by the Tribe and garner awareness.

Future funding for the TIWAHE Initiative is still unclear in the coming year, but the Red Lake TIWAHE Initiative team is hard at work to make their program accessible for all those wanting to serve their communities.

To learn more about the Red Lake TIWAHE Initiative program contact Donovan Sather via email at Donovan.Sather@redlakenation.org.

Tribal Health Care Systems

There's an App for that!

When looking at the next phase to advance quality patient care at the Choctaw Nation, Chief Information Officer at Choctaw Nation Health Services Authority (CNHSA), Dwane Sorrells and his team turned to mobile technology.

Officially launched January 1, 2017, the new myCNHSA phone app puts advanced health care services directly into the hands of CNHSA patients.

Originally imagined for use by CNHSA employees and health care providers, Sorrells and his team found that there was an opportunity to expand the application beyond the staff and streamline workflow to serve patients directly.

"Patients can view past visits, immunizations for kids for school, request an appointment by facility or clinic, dates and times," said Sorrells. "Our team receives the request and looks at the doctor's schedule and reviews and schedules the appointment."

There is also a Shopping Cart located on the app that enables patients to add prescription refills to their basket, which can then be ordered and shipped to the patient's preferred clinic location.

Since its launch, myCNHSA has been downloaded by over 4,000 Tribal members who have filled hundreds of prescriptions and scheduled as many appointments all in compliance with HIPPA regulations. The app is also integrated with the Choctaw Nation Tribal Transit enabling patients to schedule transportation to and from their appointments.

When asked about the 18-month development process and his recommendations for those looking to implement a similar technology, Sorrells explained two key areas to focus energy: 1) to establish a strong technical development team early; and 2) to develop a robust communications plan that engages Tribal membership and educates the community.

Sorrells went on to say that his team decided to develop the app from the ground up spending a considerable amount of time making sure to develop an app that was customized to the needs of the Choctaw Nation.

"I feel like we did reinvent the wheel a little bit," said Sorrells. "We really wanted to tailor it to our demographic. A lot of [the content] is very unique to Choctaw Nation. Other applications we looked at didn't have the flexibility."

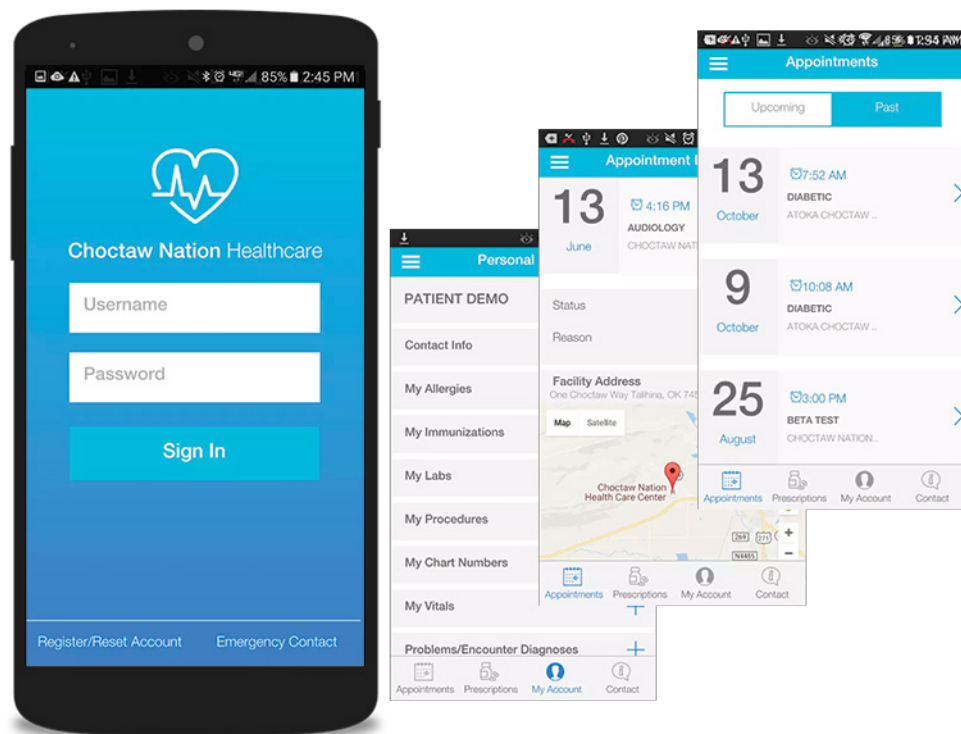
Now that myCNHSA is officially launched, the team is already working on its first version update set to launch this fall.

"We have so much more functionality planned out," said Sorrells. "We're over the hurdle of having it published."

Future updates potentially include integration of wearable technology like FitBits for sleep studies and diabetic transmitters.

"This is just the tip of the iceberg," said Sorrells.

To learn more about myCNHSA and the development journey, contact Dwane Sorrells via email at desorrells@cnhsa.com.



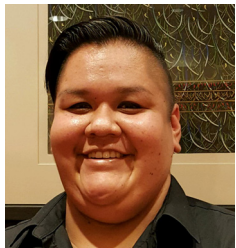
The myCNHSA app is the next step in technology developments for tribal health care facilities.



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Nothing but Numbers



Lummi Treasurer Celina Phair, voted into office in 2014, is the youngest tribal council member and treasurer in Lummi Nation history.

At the age of 23 when most college graduates were

deciding on a master's program or interviewing for that first grown up job, Lummi Nation's Celina Phair was taking on the role of becoming one of the youngest Controllers in the country.

Fast forward two years and an election later, Phair was elected to the Lummi Nation Tribal Council and was subsequently elected as the Lummi Nation Treasurer – the youngest in Lummi history.

The now 27-year-old is approaching her two-year mark as Treasurer and looking forward to the future financial plans of the Nation with the help of her Chief Financial Officer Nicole Lewis and Controller Stephanie Lambert.

Did we mention that all three women are Lummi Nation Tribal Members and the leaders of the financial department of the tribe?

"From what I've noticed, [Lummi Nation Tribal Members] are really supportive of having tribal members in finance positions," said Phair. "I don't think that they ever imagined that we would be all women though."

Over the past three years Lummi Nation has made a shift in their finance department hiring, looking inward to find talent and growing candidates within the Nation's professional ranks.

"I don't think that any of us ever thought that we'd get this far in the organization or even this soon," said Phair.

When paired against national averages, women in finance positions only make up 12.4 percent of executive officers, and 18.3 percent of board directors, according to Center for American Progress, whereas Lummi Nation is looking at a 100 percent woman-led finance team.

"I fully recognize they have strengths that I don't have," said Phair of her team. "I think between the three of us, we have strengths that complement each other."

The success for these ladies is not without its challenges both internally and externally.

"If you work for Lummi you can work anywhere. We're supportive of each other, but it's not without challenges," Phair elaborated. "Pressure at home makes it tough. But had I not had it drilled into me at home. When I have to go fight for us, I feel stronger because of it."

Looking to the future, Phair is working to help those who want to pursue a career in finance, but is also realistic about the potential pipeline of qualified personnel.

"I've asked people, how do we recruit people to work in finance?" said Phair. "In reality, there are very few people who go to school and say 'I want to be an accountant!'"

Phair said that she encourages those who have expressed an interest in finance to focus on good grades and test scores, as well as preparing themselves for a competitive environment when applying to any university business school or economics department.

The next generation of Lummi Nation financial leaders is still a few years in the making, per Phair, but she is hopeful that the current trend continues.

To learn more about Lummi Nation's tribal enterprises and economic development, visit www.lummi-nsn.org.