

**KARUK TRIBE**  
**HEALTH BOARD MEETING AGENDA**  
Thursday, November 4, 2015 **3 PM**, *Happy Camp, CA*

**A) CALL MEETING TO ORDER – PRAYER - ROLL CALL**

**AA) HEALTH MISSION STATEMENT**

The mission of the Karuk Tribal Health Program is to provide quality healthcare for Native Americans, and other people living in the communities we serve as resources allow. Our purpose is to appropriately assess or reassess conditions of illness, disease, or pain, provide culturally appropriate educational, preventative, and therapeutic services in an environment of continuous quality improvement.

**CH) APPROVAL OF THE AGENDA**

**EE) APPROVAL OF THE MINUTES** (*October 8, 2015*)

**F) GUESTS** (*Ten Minutes Each*)

1. Debbie Bickford, Outreach Coordinator

**H) OLD BUSINESS** (*Five Minutes Each*)

- 1.

**I) DIRECTOR REPORTS** (*Ten Minutes Each*)

1. Vickie Walden, Dental Office Manager (written report)
2. Patricia White, RPMS Site Manager (written report)
3. Lessie Aubrey, Grants, Compliance, Accreditation Manager (written report)
4. Pat Hobbs, Children & Family Services (written report)
5. Raul Recarey, Health CEO (written report)
6. Eric Cutright, IT Director

**II) REQUESTS** (*Five Minutes Each*)

- 1.

**K) INFORMATIONAL** (*Five Minutes Each*)

- 1.

**M) CLOSED SESSION** (*Five Minutes Each*)

1. CHS (dinner break)
2. Laura Olivas
3. Barbara Snider
4. Tribal Council Members

**N) SET DATE FOR NEXT MEETING** (*Thursday, December 3, 2015 at 3 PM in Orleans, CA.*)

**OO) ADJOURN**

**Health Board Meeting – October 8, 2015**  
**Meeting Minutes**

**Meeting called to order at 3pm, by Chairman, Attebery**

**Present:**

Russell “Buster” Attebery, Chairman  
Joseph Waddell, Secretary/Treasurer  
Josh Saxon, Member at Large  
Elsa Goodwin, Member at Large  
Alvis Johnson, Member at Large  
Charron Davis, Member at Large  
Renee Stauffer, Member at Large  
Arch Super, Member at Large

**Absent:**

Robert Super, Vice-Chairman (excused)

**Prayer was done by Sonny Davis and the mission statement was read aloud by Buster Attebery.**

**Agenda:**

Renee Stauffer moved and Elsa Goodwin seconded to approve the agenda with changes, 7 haa, 0 puuhara, 0 pupitihara.

**Minutes of September 10, 2015:**

Arch Super moved and Elsa Goodwin seconded to approve the minutes, 6 haa, 0 puuhara, 1 pupitihara (Josh Saxon).

**Guests:**

1.) **Kirk, TEK Printing:**

Kirk is present to introduce himself and his business. He has been working with staff on orders and in some cases quick deadlines and turnaround times. He provided several examples of his work and gave a pen for each Council Member that displays his work. His business is located in Central Point, Oregon. He provided catalogs for attendees to review.

His company is available to assist with ordering items that the Council likes.

2.) **Suzanna Hardenburger, Business Office Manager:**

Suzanna is present to seek approval of two items. She noted that when Tribal Members are paid for services rendered at the clinics, and they keep it, then the previous Council had suspended Tribal Members access to CHS if that money was not turned into the Tribe. Buster asked if this is standard procedure.

Patty commented that this is and has been an issue for years within Indian Health Services. Buster noted that having Tribal Members on a debt list will further hinder their services. Elsa commented that the patients should be billed ahead of time and then the reimbursement can be provided back to the patient. Suzanna noted that when the patients arrive they don't know what is all going to be charged, so they are seen, and told if they receive payment for the services rendered to bring it into the Tribal office.

Jody Waddell moved and Renee Stauffer seconded to allow a flag in the RPMS regarding patients not returning money received for services at the clinics, 6 haa, 0 puuhara, 1 pupitihara (Elsa Goodwin).

Suzanna then went on to seek approval of the work comp policy 04-002-176. Josh noted that there are three instances in which you must provide notification to OSHA. Vickie asked if this includes Cal OSHA and Federal OSHA. The group was unsure of the specifics, but it can be reviewed and inserted within compliance.

Jody Waddell moved and Sonny Davis seconded to approve the policy and to include OSHA notifications, 7 haa, 0 puuhara, 0 pupitihara.

**3.) April Attebury, Judicial Systems:**

April is present to seek approval of resolution 15-R-126 declaring October as Domestic Violence Awareness Month.

Renee Stauffer moved and Josh Saxon seconded to approve resolution 15-R-126, 7 haa, 0 puuhara, 0 pupitihara.

**Director Reports:**

**1.) Vickie Walden, Dental Office Manager:**

Vickie is present to review her report. She is requesting a clinic closure for October 22, 2015 for a joint staff meeting. She is hoping to utilize telemedicine in the future. Raul asked if Vickie talked to Eric about conferencing. There was further discussion on clinic closures and how that does not allow services to Tribal Members. Buster asked if there are emergencies it would be best to have the clinic open.

Jody Waddell moved and Renee Stauffer seconded to approve a clinic closure October 22<sup>nd</sup>, 6 haa, 0 puuhara, 0 pupitihara.

Vickie's second action item is to request closure for the bi-annual health meeting, October 14<sup>th</sup>.

Renee Stauffer moved and Bud Johnson seconded to allow office closure for Bi-Annual Meeting, 6 haa, 0 puuhara, 0 pupitihara. (Elsa absent for vote).

Vickie updated the Council on the activities of the dental department. She had two staff pass a portion of the RDA testing and they will work toward their next testing working toward an official RDA licensure.

Head Start screenings have been conducted and Vickie provided those results.

ICD10 coding is being released and Susan Beatty is attending training to be prepared for the release.

Vickie's projects are moving along such as coding book ordering, updating the computer systems with Patti White. She hopes to be caught up to September 28<sup>th</sup> on billing next week. She is currently in August billing, and that includes staffing and coverage issues that she must deal with.

Vickie called FMC to determine if they are opening a dental clinic. They have confirmed they are intending on opening one and the date hasn't been released yet. Vickie believes this will assist the overload of the Yreka Dental Clinic. Josh noted that that could go both ways, it's good for

service, but patients may opt to go to another facility. Vickie noted that it is her hope that Native Americans can get appointments again as Non-Native Americans get appointments and come in on emergencies, taking up the schedule. Raul commented that without a start date then it may be off for some time.

Josh Saxon moved and Renee Stauffer seconded to approve Vickie's report, 7 haa, 0 puuhara, 0 pupitihara.

**2.) Patti White, RPMS Site Manager:**

Patti is present to review her report. She provided the standard workload report. She overviewed the visit counts.

The proposed meaningful use is slated for release which has three standards that have to be met. She continues to work toward these standards and it is noted that 3 of 5 validations have been successful. Raul commented that he has information on final rules and he will share that information with her.

Jody Waddell moved and Sonny Davis seconded to approve Patti's report, 7 haa, 0 puuhara, 0 pupitihara.

**3.) Eric Cutright, IT Director:**

Eric is present to review his report. He provided the logo from Aah Industries.

Consensus: approval of the logo for Aah Industries.

Ribbon cutting ceremony for the new internet business is Friday, October 16<sup>th</sup>, 2015 in Orleans.

Jody will open up the meeting and Sonny will complete a prayer. Renee will assist. Renee asked when people will be able to sign up. Eric noted that at the ribbon cutting will have applications for customers to sign up.

Elsa asked about a bill that is going to KTHA that is the Tribes IT department. Eric will look into this and get it worked out.

Eric then noted there was a conference call earlier in the day for the newly redesigned website.

Renee Stauffer moved and Sonny Davis seconded to approve Eric's report, 7 haa, 0 puuhara, 0 pupitihara.

**4.) Lessie Aubrey, Grants Manager:**

Lessie is not present, her report was provided for review. Elsa congratulated the staff on accreditation.

Elsa Goodwin moved and Bud Johnson seconded to approve Lessie's report, 7 haa, 0 puuhara, 0 pupitihara.

**5.) Pat Hobbs, Children & Family Services:**

Pat is present to review her report. She noted that she has position descriptions to seek approval for. She noted that the ACF grant was funded for an additional LCSW position. There was a revised position description for a full time receptionist in Happy Camp. A child welfare / social worker position needs funded. Laura Olivas noted that in the HRSA grant there would be funding

included to allow for recruitment. Elsa asked if the grant application was a little different. It was noted that it was changed slightly.

Josh noted that a release of information needs developed to allow services throughout the system. Pat noted that grant funding will allow for strategic planning to identify how to best serve clients and that can be a part of the planning.

Elsa Goodwin moved and Josh Saxon seconded to approve the revised position description (receptionist), with changes, 7 haa, 0 puuhara, 0 pupitihara.

Jody asked if the AB1896 applies for Tribes. Pat will contact Mark LeBeau on this billing issue.

Pat explained that she does not have enough office space. Josh noted that this is a common theme and he is hoping to come up with a plan to seek additional office space in the Yreka area. Raul is already working on this and has obtained some preliminary information on a potential facility.

Josh Saxon moved and Renee Stauffer seconded to approve the revised LCSW position description, 7 haa, 0 puuhara, 0 pupitihara.

Josh Saxon moved and Arch Super seconded to approve Pat's report, 7 haa, 0 puuhara, 0 pupitihara.

**6.) Raul Recarey, Health CEO:**

Raul is present to review his report. He first sought approval of procurement to allow the purchase of 3 EKG machines.

Arch Super moved and Elsa Goodwin seconded to approve procurement and allow the purchase from Moore Medical for EKG machines, 7 haa, 0 puuhara, 0 pupitihara.

He then sought approval of the revised Project Manager Position description. This will not be a training roll but a person who actually has the experience. He doesn't believe that he needs someone to be experienced but some conceptual experience is needed. The Council wants the position description revised to be a qualification not a requirement.

Elsa Goodwin moved and Josh Saxon seconded to approve the revised position description, 7 haa, 0 puuhara, 0 pupitihara.

Raul then provided an overview of the patient visit numbers for the Health Board. He noted that the numbers are lower, but that is due to providers having less clinic days. Raul updated the Council, noting that Reginna flowers is covering and then will cover Orleans and provide onsite training alongside the current provider. Renee commented to have Reginna overlap with Bill because it is important to get to know the client population. The home that is available is from KTHA and can be worked on with Erin Hillman, KTHA Director.

He reviewed his report commenting that Chelsea Chambers received the highest score and steadily increases quality scores. Renee asked if its quantity or quality. Raul noted that is quality by 66% and then quantity. Renee has a hard time with this and Raul noted that this is a concern but the financial information is business. Renee noted that the intern provided assistance and reduced patient visit times as well, allowing the provider to provide quality care but at a much faster rate, however that isn't calculated.

Josh believes that the system may not be fair because in Orleans the patient population is so low. Josh understands the tele-health option and somehow believes that this may need to be revisited with some options, at a later time.

Arch Super moved and Sonny Davis seconded to approve Raul's report, 7 haa, 0 puuhara, 0 pupitihara.

*Josh excused himself from the meeting at 5pm.*

**Closed Session:**

Informational: employee issue is continuing and will be finalized.

Laura Olivas: provided a fiscal report for the Health Board to review. Laura will be asking the staff about locations of staffing when grants are submitted to ensure the health program is taking into account the office needs of program advancement.

Renee Stauffer moved and Jody Waddell seconded to approve the fiscal report, 5 haa, 0 puuhara, 1 pupitihara (Elsa Goodwin).

*Jody was excused from the meeting.*

Arch Super moved and Bud Johnson seconded to approve the grants coordinator position description and the RFQ Grant Writer, 6 haa, 0 puuhara, 0 pupitihara.

Renee Stauffer moved and Arch Super seconded to approve contract 16-C-008 with changes, 5 haa, 0 puuhara, 0 pupitihara.

*Jody re-entered the meeting.*

Josh Saxon moved and Jody Waddell approved ratification of the emergency vote regarding Vice-Chairperson, 6 haa, 0 puuhara, 0 pupitihara.

Informational: It was reported that the Secretary/Treasurer may not be performing all duties, the newly elected one will perform, and this will be discussed at a later time.

Josh Saxon moved and Jody Waddell seconded to approve Case #FHI 5 haa, 0 puuhara, 1 pupitihara (Elsa Goodwin).

Informational: Health CEO and Yreka Clinic Manger had a meeting with the Health Board. Discussion items will be monitored and taken into consideration, including following the chain of command.

Consensus: to verify that the septic tank is being repaired at DNR in compliance with health and safety needs, and that this is a priority.

Informational: discussion on the team makeup for the clinics regarding the incentive and also follow up on communication about pharmacy services needs done. Patients need to know in advance where to get their medications.

Informational: intern housing needs to be determined.

Informational: Chairman will contact the TANF Director to determine if a new facility remodel request has been submitted to ACF.

Informational: Some Bar residents are seeking relocation assistance and will be referred to KTHA.

**Next Meeting Date: November 5, 2015 at 3pm in Happy Camp, CA.**

Bud Johnson moved and Sonny Davis seconded to adjourn at 7:37pm., 6 haa, 0 puuhara, 0 pupitihara.

**Respectfully Submitted,**

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**Russell “Buster” Attebery, Chairman**

**Recording Secretary, Barbara Snider**





# CALIFORNIA RURAL INDIAN HEALTH BOARD, INC.

Friday, October 30, 2015

Karuk Tribal Health  
P.O. Box 1016  
Happy Camp, CA 96039

Dear Debbie Bickford,

## **Subject: Notice of Award**

On behalf of the California Rural Indian Health Board, Inc. (CRIHB) and the ACORNS Program, we would like to inform you that Karuk Tribal Health has been awarded a Phase II ACORNS mini-grant in the amount of \$25000.

Awardees are responsible for completing proposed activities listed in final workplan.

Phase II minigrantees are responsible for:

- Addressing recommendations in Summary Statement
- Implementing proposed workplan
- Completion and submission of 3 progress reports due 01/29/16, 4/29/16, and 07/29/16
- Completion and submission of a Final report due 09/29/16

Upon receipt of signed Acknowledgement Form, CRIHB will issue 50% of awarded funds. Remaining 50% of funds will be dispersed upon receipt of a final report due 9/29/16.

Should you have any questions, please contact Virginia Hedrick at (916) 929-9761 ext.1518 or via e-mail at [virginia.hedrick@crihb.org](mailto:virginia.hedrick@crihb.org)

Sincerely,

Vanesscia Cresci, MSW, MPA  
Director, Research and Public Health Department  
California Rural Indian Health Board

Enclosures: 1) Summary Statement  
2) Phase II Acknowledgement form

**Karuk Community Health Clinic**  
64236 Second Avenue  
Post Office Box 316  
Happy Camp, CA 96039  
Phone: (530) 493-5257  
Fax: (530) 493-5270

# Karuk Tribe



**Karuk Dental Clinic**  
64236 Second Avenue  
Post Office Box 1016  
Happy Camp, CA 96039  
Phone: (530) 493-2201  
Fax: (530) 493-5364

## Administrative Office

Phone: (530) 493-1600 • Fax: (530) 493-5322  
64236 Second Avenue • Post Office Box 1016 • Happy Camp, CA 96039

### RESOLUTION OF THE KARUK TRIBE

**Resolution No:** 12-R-XXX  
**Date Approved:** [Date Approved]

#### RESOLUTION AUTHORIZING THE SUBMISSION OF THE N7 FUNDING GRANT APPLICATON TO N7 IN THE AMOUNT OF \$10,000.00

**WHEREAS;** the Karuk Tribe is a Sovereign Aboriginal People, that have lived on their own land since long before the European influx of white men came to this continent; and

**WHEREAS;** the members of the Karuk Tribe have approved Article VI of the Constitution delegating to the Tribal Council the authority and responsibility to exercise by resolution or enactment of Tribal laws all the inherent sovereign powers vested in the Tribe as a Sovereign Aboriginal People, including negotiating and contracting with federal, state, Tribal and local governments, private agencies and consultants; and

**WHEREAS;** the members of the Karuk Tribe have approved Article VIII of the Constitution assigning duties to the Chair, Vice Chair, and Secretary/Treasurer including signing and executing all contracts and official documents pertaining to the Karuk Tribe; and

**WHEREAS;** the Karuk Tribe is a federally recognized Tribe and its Tribal Council is eligible to and is designated as an organization authorized to Contract pursuant to P.L. 93-638, as amended, on behalf of the Karuk Tribe; and

**WHEREAS;** The Education and Health departments are dedicated to providing year round seasonal sports programs to include the youth of Happy Camp and surrounding communities to prevent chronic diseases such as diabetes and childhood obesity; now

**THEREFORE BE IT RESOLVED;** that the submission of this application be approved in order to further develop the current seasonal sports programs being offered, specifically Flag Football, Basketball, and Soccer ; now

**THEREFORE BE IT FINALLY RESOLVED;** that the Karuk Tribal Council approve the submission of the N7 Grant for the amount of \$10,000.00.

#### CERTIFICATION

I, the Chairman, hereby certify the foregoing resolution [Resolution Number] which was approved at a [type of meeting or phone vote] on [Date], was duly adopted by a vote of \_\_\_\_ AYES, \_\_\_\_ NOES, \_\_\_\_ ABSTAIN, and said resolution has not been rescinded or amended in any way. The Tribal Council is comprised of 9 members of which \_\_\_\_ voted.

\_\_\_\_\_  
Russell Attebery, Chairman

\_\_\_\_\_  
Date

# REQUEST FOR TRIBAL COUNCIL AUTHORIZATION TO SUBMIT PROPOSAL TO FUNDING SOURCE

**REQUESTOR:** Debbie Bickford / Alan Merrill **DATE:** 11/2/2015

**DEPARTMENT:** Health / Education

**DEADLINE:** 11/15/15 **AMOUNT:** \$ 10,000.00 **DATES FROM:** 4/15/2016 **TO:** 3/31/2017

**BRIEFLY DESCRIBE PURPOSE OF PROPOSAL:**

The purpose of this grant application is to collaborate efforts to fund the sports programs (specifically Flag Football, Basketball, and Soccer) for the youth in Happy Camp and surrounding communities. We are also requesting funds to assist with transportation costs.

REVIEW:	COMPLIANCE	CFO	OTHER:
NARRATIVE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BUDGET:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
INDIRECT COST:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MATCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DOCUMENTATION:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRIBAL RESOLUTION:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**COMMENTS:**

**COMPLIANCE:**

**CFO:**

**OTHER:**

**REQUIRED SIGNATURES\***

<b>REQUESTOR*</b>		<b>DATE</b>	
<b>CFO*</b>		<b>DATE</b>	
<b>COMPLIANCE*</b>		<b>DATE</b>	
<b>CHAIRMAN</b>		<b>DATE</b>	
<b>OTHER</b>		<b>DATE</b>	

# FUND GRANT

To apply for a grant from the N7 Fund, you must fill out the following application by November 15, 2015 11:59 PM PST. Grant requests up to \$10,000 (CASH ONLY).

## GUIDELINES

To be eligible to receive an N7 grant, an applicant must meet all of the following requirements:

1. Submit a complete application.
2. For U.S. applicants, you must be one of the following:
  - A 501(c)(3) public charity;
  - A Federally-recognized Indian Tribe; or
  - A school, but you must have a fiscal sponsor who has tax-exempt status.
3. For Canadian applicants, you must be a non-profit entity.
4. Primarily serve the Native American or Aboriginal community.
5. Have a sports, wellness, or physical activity focus.
6. Serve youth, high school age or younger.
7. Describe how you measure success and results.
8. Agree to provide reports demonstrating success and results from N7 grant funds.
9. Applicants that demonstrate consistent or sustained community programming and impacts, rather than one-time events, will be given priority.

All applicants will receive final funding result notification on or before April 15, 2016.

You can download a sample copy of the application [here](#). Please submit your final application online using the form below.

Thank you for your N7 Fund grant submission. The grant cycle closes on December 31, 2015 at 11:59 PM PST. Announcements of the grant awards will take place in April 2016.

Please see below for a copy of your grant submission. If you need to make changes to your grant application, please reply to this message with the name of your grant submission and we will respond to your email within 3-5 business days.

Best regards,

The N7 Fund

## Organization overview

### Where are you located?

Happy Camp, CA, Siskiyou County, USA

### Are you: (check all that apply)

- Federally Recognized Tribe

### Please provide your Federal Identification Number (EIN US Only)

94-2576572

### Organization name

Karuk Tribe

### Organization address

64236 2nd Ave  
PO BOX 1016  
Happy Camp, CA 96039  
United States

[Map It](#)

### Organization website

<http://www.karuk.us>

### Primary contact name

Debbie Bickford

### Primary contact title

Project Director

### Primary contact address

64236 2nd Ave  
PO BOX 1016  
Happy Camp, CA 96039  
United States

[Map It](#)

**Primary contact phone**

(530)493-1600

**Primary contact email**

[dbickford@karuk.us](mailto:dbickford@karuk.us)

**Second point of contact name**

Alan Merrill

**Second point of contact title**

Education Coordinator

**Second point of contact phone**

(530)493-1600

**Second point of contact email**

[amerrill@karuk.us](mailto:amerrill@karuk.us)

**Dollar amount requested**

\$10,000

**How long has your program/organization been operational?**

30 years (Tribe)

**What is your program's annual operating budget?**

\$88,000 (newly received \$ 118,000, for education only, not to be used for other activities)

**Please list your program's current funding sources:**

BIA (US Dept of Education)

**Youth participation****What Native and/or Aboriginal communities does your program/organization serve?**

Karuk, Yurok, and Hoopa

**How many youth participate in your organization/program?**

400 (include Seiad Valley, Happy Camp, Somes Bar, and Orleans elementary age children)

**What percentages of your participants are Native American or Aboriginal?**

32%

**What ages does your organization/program serve? (Select all that apply)**

- Ages 1 year – 6 years
- Ages 7 years – 12 years
- Ages 13 years – 18 years
- 

**What is the number of males and females that participate in your programming?**

The ratio of male to female is approximately 50/50.

**How many hours per week do you run your programming?**

Varies, depending on season and funding

**Please describe the level of intensity per session.**

High

**What sports and physical activities does your organization/program support?**

Currently, we support youth flag football and sports camps and tournaments for youth basketball. Most recently, we sponsored a one day soccer event to see if there was enough community interest. We now have a group of parents who are working diligently to start an intramural league. We would like to develop a year round program so that as one season ends, another starts. These would include football, basketball, and soccer.

**Program details**

**What is the mission of your program?**

Our mission is to plan a project which will promote a healthy child. Obesity and Diabetes are common problems in the native communities. We know this must begin with exercise and diet. We want to include children from the Happy Camp, Seiad Valley, Somes Bar, and Orleans areas, where such programs are not available.

**Tell us what is unique about your program. What can other programs learn from your program/organization?**

With all of the state and regional budget cuts, there is no official physical education program. Teacher's ability and interest are limited. Therefore as a Tribal unit, we desire to promote a healthy lifestyle for our children and feel the best way to accomplish this is to provide opportunities for physical activities to be enjoyed by the entire family and community.

We are taking stewardship towards being an example to surrounding communities for the promotion of health and wellness for all children. (It is necessary to travel 30-90 minutes to these neighboring schools.)

**How are coaches/teachers/mentors trained to deliver programming?**

We depend on finger printed volunteers; however, have included in our budget monies to provide in-person, online, or DVD training and/instruction for certification.

**Do you have on-going training for your coaches/teachers/mentors? If yes, please describe the components of your training.**

In-person training will be providing according to availability and cost effectiveness. We will provide a DVD Library where materials can be checked out by coaches/teachers/mentors if they wish to know more about each sport. Certified officials will be available to mentor and train new volunteer/coaches/officials.

**Please provide a sample week of your programming:**

Ideally, one practice and one game per week per team, of whichever sport is in season. With lack of facilities, outside of school gyms, it will be difficult to provide more. We have to work around school and travel schedules.

**What elements of your program ensure a fun experience for participants? How do you incentivize your youth to stay involved? Please provide 2-3 examples.**

- We are providing an opportunity to participate in an organized physical activity with an emphasis on sportsmanship.
- We will train Volunteers/Coaches/Parents so that activities can be organized in a professional and sportsmanlike environment. When funding is no longer available, we will have developed a successful program to continue to provide these activities for our youth.
- We will encourage youth to develop good habits and choose a healthy lifestyle, with an emphasis on their continuation on their sports and wellness activities.

**What outcomes do you achieve by retaining youth in your programming?**

- Children will benefit by participating in these fun events, rather than watching television and video games all the time.
- They will physically feel better and perform better in school.
- There will be fun events planned at no charge. They can participate or spectate.
- Certificates of participation will be provided.
- For the older youth, opportunities for officiating (earning stipend) and leadership development will be available.

**Please describe how you track and provide feedback to your youth on their fitness goals.**

There will be a sign in sheet, with permission slips. Also a Feedback and Suggestion box. Pictures will be taken and posted around town and on social media encouraging others to join us. This is a very small town. There are 5 advertising bulletin boards, two schools, one preschool, Tribal Newsletters, and one other large employer email in which to advertise... as well as bulletin boards and Facebook pages in the other school communities.



We will also encourage that individuals participate in a pre and post season weigh-in, with the blood sugar and blood pressure taken as well.

**How does your organization conduct regular outreach to parents & community leaders to help support your youth and your programming?**

We use the Karuk Website; employee email and Quarterly Newsletter as the main source of outreach. We will advertise through the schools and hold monthly meetings with our committee. The local bulletin boards and the Family Resource Center, Tribal Computer Centers, and social media will all be utilized.

**Describe how your program defines & measures program success.**

We will measure success by the number of people who participate in the seasonal programs, as well as volunteer and community commitment. Our goal is to serve 50-60 per sports season, with incremental years growing in number especially from outlying communities. The results of the weigh in, blood sugar and blood pressure measurements be recorded.. This information will be made available to the grantor.

**Program success example 1**

The first Annual Flag Football was a big success in October 2014. Over 60 players from four communities participated. We are currently in the second season with new administration, as well as coaching, and hoping for similar numbers.

**Program success example 2**

Our two day Basketball Camp was also a success in December 2014, with over 40 players just from the Happy Camp community. This will be continued and will include outside areas, depending on funding.

**Program success example 3**

Our most recent Sports event was a one day Soccer Event, with 47 players from Happy Camp. Already a group of parents is actively working together to organize a soccer league in Happy Camp, to include the outlying communities.

**Please provide a detailed budget description of how your program/organization will utilize N7 Funds, if granted.**

Our detailed budget is included in the Narrative, however, here is the summary:

Football	\$ 2,500.00	To include Equipment, Officials, Training, Shirts, Misc.
Basketball	\$ 2,500.00	To include Equipment, Officials, Training, Shirts, Misc.
Soccer	\$ 2,500.00	To include Equipment, Officials, Training, Shirts, Misc.
Transportation	\$ 2,500.00	Transportation to Events (focus on transporting to and from Orleans and Seiad Valley)

**\$10,000.00**

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64236 Second Avenue  
Post Office Box 316  
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Phone: (530) 493-5257  
Fax: (530) 493-5270



**Karuk Dental Clinic**  
64236 Second Avenue  
Post Office Box 1016  
Happy Camp, CA 96039  
Phone: (530) 493-2201  
Fax: (530) 493-5364

**Administrative Office**  
Phone: (530) 493-1600 • Fax: (530) 493-5322  
64236 Second Avenue • Post Office Box 1016 • Happy Camp, CA 96039

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## **N7 Grant Application Narrative**

Happy Camp is a small rural town, located deep in the heart of the Klamath Forest. The nearest town with amenities is 72 miles away along windy mountainous roads. The largest employers are the Karuk Tribe, the USFS, and odd jobs such as logging and construction. The unemployment is greater than 20%. The median wage is less than \$25,000. More than 20% live below the FPL. 32.3% of the population is of native descent. With limited resources, the community remains strong when it comes to providing for our youth. Given our circumstances, we realize that parents can no longer raise a child by themselves, it takes a village. With the lack of things to do in town, many youth turn to experimentation with drugs and other unhealthy behaviors. Our community needs to challenge our youth by providing more outlets with healthy activities.

Currently, there is only one sport program for the Happy Camp elementary age children not involved in school sports teams, and that is Little League Baseball. The first ever Flag football season was held last year. We are currently planning the second year. We are able to hold an annual Basketball clinic and recently, a soccer event. However, often times these events depend on volunteers raising money.

Our Tribal Booster Club is the biggest supporter, but funds are limited. Funds are usually raised through Indian Taco Dinners, always a big hit at any event. TANF also assists but there are certain regulations for what they can do.

Currently, the Karuk Tribe is collaborating with other community groups as they emphasize the physical and mental health of our youth. As mentioned above, Happy Camp is lacking organized activities for our children. There is an after school program that provides homework help, cooking classes, arts and crafts, as well as dance and recess play. Others spend their afternoon in the Computer Center until it closes, playing video games.

We believe that you need to be active in working towards goals. Sitting around waiting for handouts is not within our scope of work. However, if we do not need to spend all of our time with fundraisers, we can put our energy towards volunteering to be with the children and work with them directly. We are living proof that it takes a village to raise a child.

**At this time, we are requesting the amount of \$10,000.00 to be budgeted as follows:**

BASKETBALL	50 children	Cost
Officials	2 officials per game (\$15.00) / 4 games per Saturday for 8 weeks = \$ 960.00	\$ 1,000.00
Equipment	Balls ( 12 x \$15)/ Whistles (32 x \$3)/	\$ 300.00
T-shirts / Pinnies	4 sets (of 12 x \$50) in four colors	\$ 200.00
Misc (Awards, First Aid Kit, etc)		\$ 500.00
Training of Coaches/Officials <a href="http://work.chron.com/become-recreational-basketball-referee-14461.html">http://work.chron.com/become-recreational-basketball-referee-14461.html</a>	Online Courses, DVD's etc	\$ 500.00
	<b>TOTAL</b>	<b>\$ 2,500.00</b>

SOCCER		
Officials	2 officials per game (\$15.00) / 4 games per Saturday for 8 weeks = \$ 960.00	\$ 1,000.00
Equipment	TANF has already purchased the majority of the items but could use more goals, and will need to replace some items.	\$ 500.00
Uniforms / Pinnies	4 sets (of 12 x \$50) in four colors	\$ 200.00
Training Coaches/Officials		\$ 500.00
Misc (Incentives, First Aid Kit, etc.)		\$ 300.00
	<b>TOTAL</b>	<b>\$ 2,500.00</b>

<b>FLAG FOOTBALL</b>		
Officials	2 officials per game (\$15.00) / 4 games per Saturday for 8 weeks = \$ 960.00	\$ 1,000.00
Equipment	Balls ( 12 x \$15)/ Whistles (32 x \$3)/	\$ 300.00
Uniforms / Pinnies	4 sets (of 12 x \$50) in four colors	\$ 200.00
Misc (Incentives, Awards, First Aid Kit, etc)		\$ 500.00
Training of Coaches/Officials  <a href="http://www.cnra.net/become-referee/request-a-course/">http://www.cnra.net/become-referee/request-a-course/</a>  ( \$300 plus \$5.00 per referee)	Online Courses, DVD's etc	\$ 500.00
	<b>TOTAL</b>	<b>\$ 2,500.00</b>

Transportation to Events (focus on transporting to and from Orleans and Seiad Valley)		\$ 2,500.00
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<b>SUMMARY</b>		<b>Totals</b>
Basketball		\$ 2,500.00
Flag Football		\$ 2,500.00
Soccer		\$ 2,500.00
Transportation		\$ 2,500.00
		<b>\$ 10,000.00</b>



## Karuk Tribal Health Board Report



### Dental Activities and Reports

#### 1. Orleans Dental Screening and Fluoride Varnish Clinic

- a. The next Clinic is scheduled for November 18, 2015 this is the last we will hold in 2015. We will be doing the planning for the 2016 schedule soon and hope to have the resources needed expand on the dental services offered in Orleans.

#### 2. Staffing Updates

- a. I received Jessica Courts RDA EF2 resignation on October 29, 2015 and in her letter she said her last day working for the Karuk Tribe will be November 20, 2015.

#### 3. Training

- a. Happy Camp Dental Assistant Bridget Koons is scheduled to attend an infection control and dental law training. She will be on travel November 6<sup>th</sup>, attending the class on November 7 and travel back on November 8, 2015. Bridget's in-house training is going well, the training she got at the Yreka Clinic was a great help and now she is on track to meet her training plan goals.
- b. Yreka RDA Susan Beatty is attending an insurance billing and coding training in Sacramento on October 29, 2015. I hope this training covers ICD 10 Codes and how dental is to use them.

#### 4. Yreka Hygienist Head Start Dental Screenings

Dear Karuk Tribal Council Members:

On September 24 and October 13, 2015 I had the pleasure to provide a fluoride varnish clinic at the Karuk Head Start in Yreka. The following are facts that I gathered during my visit.

AM Class, 19 children under age of 4-

- 9 children with no visible decay
- 8 children with visible decay
- 2 children were uncooperative
- All children had plaque present

PM Class, 17 children under age of 4-

- 9 children with no visible decay

- 8 children with visible decay
- All children had plaque present

All children whom participated received a toothbrush and sticker. Parent reports were also sent home with the children. The staff was accommodating and a pleasure to work with.

The following are facts regarding baby teeth.

These "first teeth" are necessary for a child to chew and speak. But baby teeth serve another very important purpose--they save space for the child's future permanent teeth. A baby tooth usually remains in the child's mouth until a permanent tooth underneath it is ready to emerge through the gums.

Respectfully submitted,

Allison Ortiz, RDH

## 5. **Vickie Walden's Activities**

- a. **Visit Entries:** I am currently finishing the visit entries for the last week in September and will be entering visit for October by the first week of November and hope to be caught up to date by the second week of November.
- b. **Yreka Dental Expansion Project:**
  - i. I traveled to Yreka to meet with Andy from Sullivan Schein Dental Supplies on October 27, 2015. Andy took measurements and we talked about what we would need to convert two dental offices into patient care operatories/rooms. Andy took measurements and will be sending me equipment list/cost estimates/drawings. We also look at our current compressor and vacuum system and discussed the possibility that we may need to upgrade or replace our current systems with systems. This is a work in progress and will take some time and further consultation with Sullivan Schein to come up with a plan.
  - ii. I sent an email to Patterson Dental Supply on Medford, OR asking them to contact me regarding this expansion we want to do in Yreka and have not got any response to date. Patterson and Sullivan Schein are the only suppliers in our area that provide services, so if I do not hear from Patterson Dental Supply, I will contact ADEC Equipment Headquarters in Portland and see if they can come bit on the job.
- c. **ICD Coding For Dental Services**
  - i. I have been working with Diana in billing and Susan Beatty in Yreka on the change from ICD 9 to ICD 10 medical coding, which started on October 1 2015. The change has impacted the coding requirements for dental visit entries. At this time we are in the introductory stage. We are learning the code definitions, how, and when to use the codes and what the provider visit documentation

requirements are. The ICD 10 codes require specific diagnosis and procedure details in the visit narrative to justify why a treatment was done.

- ii. At this time we are not too sure exactly how the ICD 10 codes will be used in our type of dental practice, we will know more as we move forward.

**d. Dental Computer Systems Upgrades**

- i. I sent Patti White an email to let her know Dentrix had released a new upgrade. She is currently working with Sullivan Schein Practice Solutions to upgrade our system to latest Dentrix Enterprise version. She said that she will work with me on a date to do the upgrade; it will take 2 hours of Dentrix down time to complete the upgrade.
- ii. Patti White has started working with I.H.S on transitioning to their RPMS and Dentrix Systems Bridge, which transfer's information to and from the systems.

**6. Budget Report**

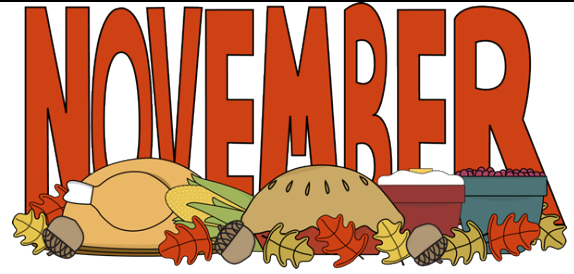
- a. I reviewed the budgets on October 29, 2015 and at this time I have no budget issues to report on.

On October 29, 2015

The Karuk Dental Health Board Dental Report for meeting date November 5, 2015 was respectively submitted by Vickie Walden RDA, Dental Operations Manager.

**RPMS**  
**Karuk Tribal Health and Human Services Program**

**Health Board Meeting-Happy Camp**  
**November 5, 2015**  
**Patricia White, RPMS Site Manager**



**Workload reports**

Below is the September 2015 "Operations Summaries" and Tribal Statistics. During September 2015 there were 2041 visits at all locations. This is a decrease of 65 visit over August 2015 numbers. Happy Camp was down by 70 visits, Yreka was up by 42 visits, and Orleans was down by 37 visits. 664 of these visits were for Native American Patients (33%) See Tribal Statistic chart at the end of the operations summary.

**Meeting / Conference Calls / Training August 2015**

- 10/01 – RPMS EHR Office Hours Conference Call
- 10/05 – Reminders Office Hours Conference Call
- 10/05 – OIT Webmail Connection Conference Call
- 10/07 – ACQI Committee Meeting
- 10/07 – Macro Helix Training Call
- 10/08 – IHS Web Call: HIE Testing
- 10/08 – Health Board Meeting-Yreka
- 10/13 – ICD 10 Implementation Conference Call
- 10/13 – IHS ITAC (Information Technology Access Control) Web Training
- 10/14 – Biannual Health Staff Meeting
- 10/15 – IHS ITAC Web Training
- 10/15 – RPMS EHR Office Hours Conference Call
- 10/19 - PHR/Direct/HIE Conference Call
- 10/20 – ICD 10 Implementation Conference Call
- 10/21 – RPMS EHR Office Hours Conference Call
- 10/27 – Orleans Clinic: VistA Training for new scanning clerk
- 10/29 – RPMS EHR Office Hours Conference Call

**Projects in Process**

**HIE-Direct Messaging-PHR** – We have tested messaging successfully with IHS. We are now in the process of identity verification of the staff that will be using the programs initially. This is a standard set by IHS to assure the security of the data. The next step is to set up the user accounts for HIE/Direct and PHR. This also involves creating and ITAC account for each user with IHS. Many steps are involved in this process.

**Dental**- I have been working with Vickie Walden on an upgrade for the Dentrix program. I will be setting up an appointment with Henry Schein tech support for this upgrade. The upgrade will upgrade the system for ICD-10 and more. The staff will not be able to access Dentrix for a two hour period during the install, but the clinics will not be down. We have also reinitiated talks with IHS to transfer to the IHS interface setup for Dentrix. At the time that we purchased Dentrix it was a standalone program. We contracted with Cimarron Medical Informatics to build an interface to RPMS for us. The IHS interface was not available to us at that time because we had purchased directly from Henry Schein.



**Budget:** October 2015

<b>Program</b>	<b>RPMS</b>
<b>Budget Code</b>	<b>3000-75</b>
<b>Program Year</b>	<b>2014-2015</b>
<b>Appropriation</b>	<b>\$234,558.49</b>
<b>Expenses to Date</b>	<b>8,301.73</b>
<b>Balance</b>	<b>226,256.76</b>
<b>Percent used</b>	<b>3.54%</b>

Respectfully Submitted,

Patricia C White,  
RPMS Site Manager

OPERATIONS SUMMARY FOR KARUK TRB HP Service Unit  
FOR SEP 2015  
Prepared for November 5, 2015  
Health Board Meeting- Happy Camp CA

(Note: In parentheses following each statistic is the percent increase or decrease from the same time period in the previous year. '\*\*' indicates no data is present for one of the two time periods.)

PATIENT REGISTRATION

There are 19,427 (+4.2) living patients registered at this SU. This number does not represent the 'Active User Population' which is found elsewhere in PCC Reports. There were 86 (+17.8) new patients, 0 (\*\*) births, and 3 (+0.0) death(s) during this period. Data is based on the Patient Registration File.

THIRD PARTY ELIGIBILITY

There were 2,930 (+0.3) patients enrolled in Medicare Part A and 2,790 (+0.0) patients enrolled in Part B at the end of this time period.

There were 132 (+12.8) patients enrolled in Medicare Part D.

There were also 7,464 (+4.7) patients enrolled in Medicaid and 6,632 (+5.7) patients with an active private insurance policy as of that date.

CONTRACT HEALTH SERVICES

Total CHS expenditures (obligations adjusted by payments) for this period were 56,108.29 (+13.9). The number and dollar amount of authorizations by type were:

57 - DENTAL	5	3235.2
64 - NON-HOSPITAL SERVICE	1005	52873.09

DIRECT INPATIENT

[NO DIRECT INPATIENT DATA TO REPORT]

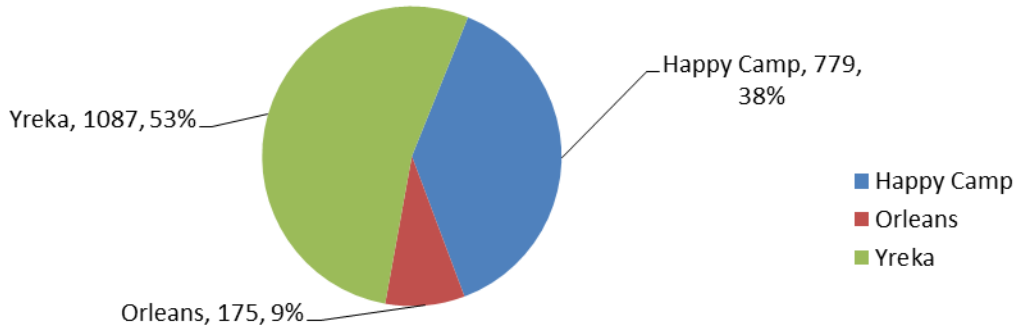
AMBULATORY CARE VISITS

There were a total of 2,041 ambulatory visits (+8.5) during the period for all visit types except CHS.

They are broken down below by Type, Location, Service Category, Clinic, Provider Discipline and leading Diagnoses. These do not equate to 'official' APC Visits which are identified in other PCC Reports.

By Type:		
TRIBE-638 PROGRAM	2,041	(+8.5)
By Location:		
YREKA	1,087	(+7.0)
KARUK COMMUNITY HEALTH CLINIC	779	(+12.2)
ORLEANS	175	(+2.3)

## Visits by Location September 2015



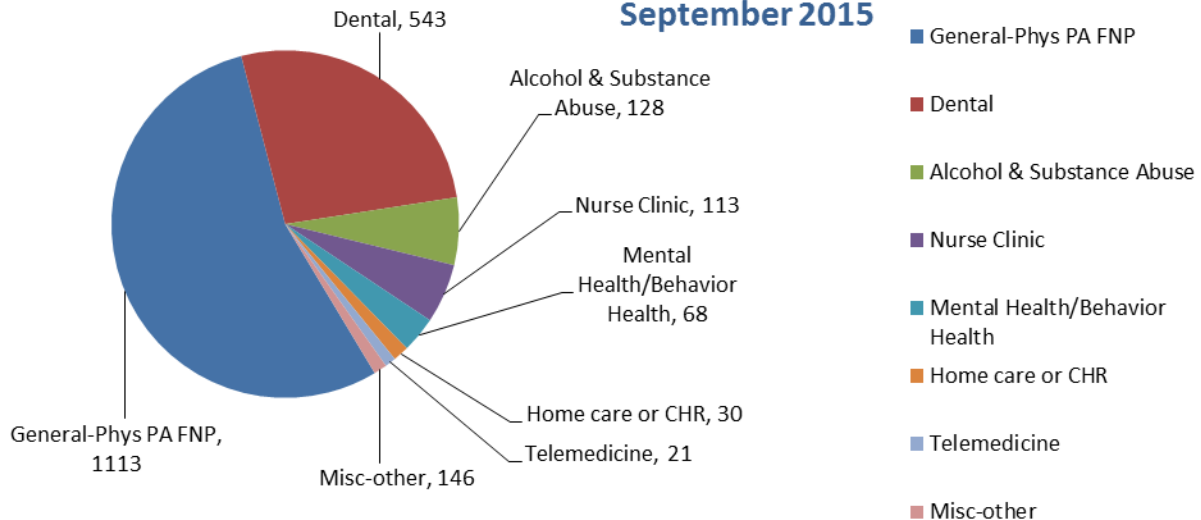
**By Service Category:**

AMBULATORY	2,022	(+9.2)
TELECOMMUNICATIONS	19	(-32.1)

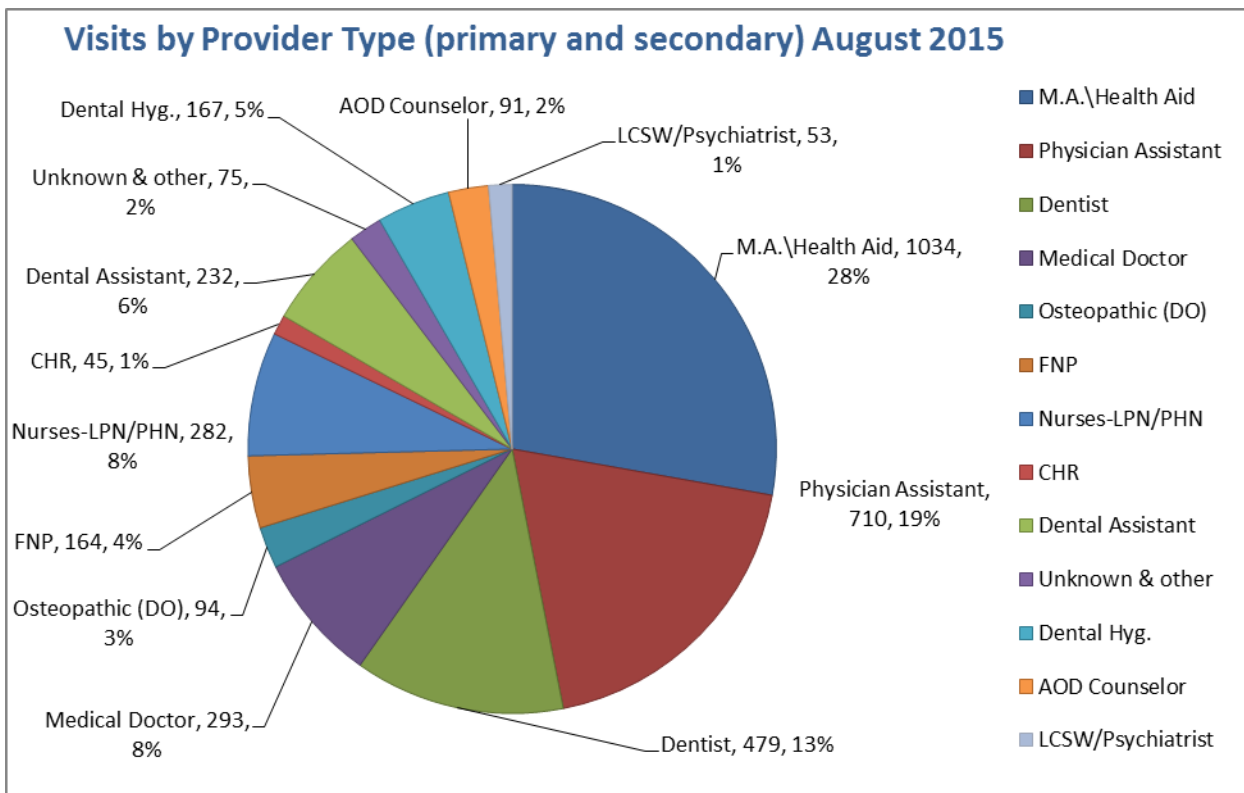
**By Clinic Type:**

GENERAL	1,113	(+132.8)
DENTAL	543	(-2.2)
ALCOHOL AND SUBSTANCE	128	(+68.4)
NURSE CLINIC	109	(-29.7)
BEHAVIORAL HEALTH	47	(+147.4)
HOME CARE	30	(+57.9)
MENTAL HEALTH (PSYCHIATRY)	21	(-73.4)
OTHER	15	(-66.7)
TELEBEHAVIORAL HEALTH	13	(**)
TELEMEDICINE	8	(+100.0)
CHART REV/REC MOD	4	(+300.0)
PHN CLINIC VISIT	4	(**)
LABORATORY SERVICES	2	(+100.0)
TELEPHONE CALL	2	(-71.4)
PHARMACY	1	(**)
PHYSICAL THERAPY	1	(-94.7)

## Visits by Clinic Type September 2015



By Provider Type (Primary and Secondary Providers):		
MEDICAL ASSISTANT	842	(+55.4)
PHYSICIAN ASSISTANT	710	(+36.5)
DENTIST	479	(-1.4)
MD	293	(-30.7)
LICENSED PRACTICAL NURSE	250	(+8.7)
DENTAL ASSISTANT	232	(+78.5)
HEALTH AIDE	192	(+3.2)
DENTAL HYGIENIST	167	(+29.5)
NURSE PRACTITIONER	164	(+8,100.0)
OSTEOPATHIC MEDICINE	94	(-37.3)
ALCOHOLISM/SUB ABUSE COUNSELOR	91	(-4.2)
UNKNOWN	67	(+15.5)
LICENSED CLINICAL SOCIAL WORK	53	(+29.3)
COMMUNITY HEALTH REP	45	(-29.7)
PUBLIC HEALTH NURSE	32	(+39.1)
OTHER	8	(**)



The ten leading purposes of ambulatory visits by individual ICD Code are listed below. Both primary and secondary diagnoses are included in the counts.

By ICD Diagnosis		
1). DENTAL EXAMINATION	555	(+3.5)
2). VACCIN FOR INFLUENZA	307	(+68.7)
3). HYPERTENSION NOS	144	(+35.8)
4). DMII WO CMP NT ST UNCNTR	75	(+31.6)
5). LUMBAGO	71	(+2.9)
6). ANXIETY STATE NOS	57	(+280.0)
7). THERAPEUTIC DRUG MONITOR	57	(-19.7)
8). LONG-TERM USE ANTICOAGUL	56	(-22.2)
9). OBESITY NOS	53	(+20.5)
10). OTHER SPECIFD COUNSELING	49	(-30.0)

**CHART REVIEWS**

There were 1,080 (+24.9) chart reviews performed during this time period.

**INJURIES**

There were 125 visits for injuries (+31.6) reported during this period. Of these, 48 were new injuries (+118.2). The five leading causes were:

- 1). FALL ON STAIR/STEP NEC 2 (\*\*)
- 2). TRAFFIC ACC NOS-PERS NOS 1 (\*\*)
- 3). RIDDEN ANIMAL ACC-RIDER 1 (\*\*)
- 4). WATERCRAFT ACC NEC-SKIER 1 (\*\*)
- 5). FALL-1 LEVEL TO OTH NEC 1 (+0.0)

**EMERGENCY ROOM**

[NO EMERGENCY ROOM VISITS TO REPORT]

**DENTAL**

There were 415 patients (-4.8) seen for Dental Care. They accounted for 543 visits (-2.2). The seven leading service categories were:

- 1). PATIENT REVISIT 395 (-5.5)
- 2). HYPERTENSION SCREENING 233 (+1.3)
- 3). PREVENTIVE PLAN AND INSTRUCTION 145 (+23.9)
- 4). INTRAORAL - PERIAPICAL FIRST RADIOG 132 (+21.1)
- 5). LOCAL ANESTHESIA IN CONJUNCTION WIT 125 (-23.8)
- 6). TOPICAL APPLICATION OF FLUORIDE VAR 124 (+36.3)
- 7). INTRAORAL - PERIAPICAL EACH ADDITIO 107 (+8.1)

**IN-HOSPITAL VISITS**

[NO IN-HOSPITAL VISITS TO REPORT]

**PHARMACY**

There were 2,195 new prescriptions (+44.9) and 0 refills (\*\*) during this period.

**Tribal Statistic September 2015**

	Registered Indian Patients September	Indian Patients Receiving Services September	APC Visits by Indian Patients September
Karuk	2116	427	384
Descendants residing in CA	1902	222	189
All other Tribes	2235	126	91
<b>Total</b>	<b>6253</b>	<b>775</b>	<b>664</b>

Grants, Compliance and Accreditation

Board Report

November 5, 2015

Lessie Aubrey, Manager

\*\*\*\*\*

Period ending 09/30/2015: After all that watching the budget and being spent below the percentage, the final shows my budget at 4.28 % over budget. These are the areas where I am overspent.

F/B – FICA/Medicare	107.00%
FB - SUTA	125.00%
FB - Workers Comp	107.98%
FB - Retirement	110.95%
Vehicle Expense (Mileage)	109.41 % (\$47.05)
Supplies	102.64% (\$52.70)
Employee Health Ins.	118.82%
Cell Phone	121.70% (\$130.20)
IDC	104.28
Total amount of money over = \$7,211.80	

Compliance Training: One tip I'd like to pass on to everyone working for the Karuk Tribe is this:

If you have some personal files in your office you need to label them as such. Here is why. If the government comes in to investigate us, they are allowed to confiscate organizational files and may take your file too, unless you have them labeled as Personal Files. They can't take your personal files. Please pass tip on to other employees.

National Health Service Core: I had a visit with their representative on October 20<sup>th</sup>. He said we need to advertise our vacancies on their website because he knows who is looking for what and can send them in our direction. Vickie Simmons met with him after I did and she gathered more information on this. HR is expected to take the lead on this.

Biannual Health Staff Meeting: It was held on October 14, 2015. Arch Super and Sonny Davis were Board members who attended. The agenda was set up to meet annual training requirements and AAAHC standards. Certificates were made for participants with copies going into their education folders.

CQI Reports:

1. HIV/AIDS Project: There are 11 active patients for this report and there were 13 active patients the last report so percentages will change with the number of patients. CD4/Viral Load has gone down 11% this period. TB testing shows a 10% decrease and Hepatitis C and Syphilis decreased 4%. If we had the same number of patients I believe that numbers would be the same for both reports. It looks like we are giving good care to those who want it.

Grants, Compliance and Accreditation

Board Report

November 5, 2015

Lessie Aubrey, Manager

\*\*\*\*\*

2. GPRA Report Unofficial: Means we still have some time to get numbers up. As of October 7, 2015 Vickie Simmons reports that we have met 7 measures and have not met 16. We still have 3 quarters left.
3. Chart Review Yreka Dental: They went down from 100% in 2 areas; current face sheet was at 85% and Medical History Update Signed was at 80%. She is going to have a meeting to discuss this with the dental staff.
4. Blood Pressures Yreka Dental: Down from 90% to 75%. Goals must be maintained.
5. Hypertension Control: Decreased from 65% last quarter to 52% this quarter. A 13% difference. Need provider input to determine improvements in care.

I've attended several Webinars this month; ICD-10 with IHS, HRSA Grantee Webinar on the restructuring of the Project Directors, and the Grant Tracker webinar demonstration on software. I am sharing this information with several administrative staff and we will discuss it at a later date. It looked like good material.

The first phase of the Acorns Mini Grant was completed on time. Plans to secure funds for the second phase have been requested and approval is pending.

I have met with KCHC and HC Dental to discuss corrective action plans regarding AAAHC survey deficiencies. I plan to meet with Yreka Medical and Dental, Behavioral Health and Orleans Medical soon.

**Debbie Bickford**

Outreach and Enrollment Coordinator

“Coverage for Kids” Project Director

(530) 493-1600, ext. 2105

[dbickford@karuk.us](mailto:dbickford@karuk.us)

**Outreach and Enrollment Events**

Sept 1-4	Work on ONE DAY Soccer Event	HC/ shopping in Medford, Yreka
Sept 7-8	Deliver flyers, posters around town	HCES
Sept 10-11	Collect Insurance/Medi-Cal Info for Soccer	HC
Sept 12	Soccer Event (must show proof of insurance or Medical or sign up with Debbie)	HC – 47 attendees, 2 new Medi-Cal applications
Sept 14	2 Medi-Cal / 2 Medicare appointments	HC
Sept 15	Back to School night at HCHS / Mini Acorn Meeting	HC
Sept 17	CEC Covered Ca Training Online with Sharon D.	Yreka
Sept 18	3 Medicare Appointments	HC
Sept 21 – 24	NIHBE Conference	Washington DC
Sept 28	Conference Call with CHIPRA / CMS	Grantor
Sept 29	Webinar / 1 Medi-Cal Appointment	
Sept 30 – Oct 2	HICAP TRAINING (includes final internship)	Redding
Oct. 3-5	Work on Mini Acorn Grant Paperwork due 10/5	
Oct. 7	Finish Covered Ca Online Training with Sharon D.	Yreka
Oct. 8	3 Medi-Cal Appointments	HC
Oct. 9	Conference Call with CMS and 3 Medi-Cal appointments; started setting up Community Events, such as tribal computer centers, library, etc.	Orleans
Oct. 13 – 20	VACATION	
Oct. 21	4 Medi-Cal appointments	Orleans Clinic
Oct. 28	2 Medicare Appointments	HC
Oct. 29	1 Medicare Appointment / working on Certificate of Creditable Coverage	HC
Oct. 30	1 Medi-Cal appointment	HC



## Outreach Activity Summary:

1. **One Day Soccer Event** – as part of my outreach activities, we collaborated with TANF (who purchased the equipment) and sponsored a ONE DAY Soccer Event. As part of the registration form, a copy of the Medi-Cal/Insurance Card was required. Those without coverage had to apply with me prior to the event. 47 children attended. A group of parents signed up to start a soccer league in HC and they held an event last week at HCES.
2. **National Indian Health Board Exchange Conference** – met with our CMS Grantor and shared ideas. Able to attend classes regarding the ACA, Tribal Sponsorship, visited various booths and collected much information.
3. **Mini-Acorn Grant (MAG)** – our team of 15 people agreed on a Family Friendly Run/Walk Obstacle. HC Community Services District Board has approved use of part of the River Park. Area is covered with overgrown blackberry bushes. Individuals/Groups signed up for fundraising, ground clearing, planning, etc.. (Unfortunately, I did not realize that the Phase II needed to be approved prior to submission to CRIHB. Phase II Awardees will be announced on Oct. 30. Meanwhile, the proper paperwork is being addressed appropriately for submission to the Council. I apologize for the error. I thought that approval of Phase I was all inclusive.)
4. **HICAP Final Internship/Annual Training** – My husband and I are now certified HICAP Counselors, qualified to assist clients with Medicare education and applications. There is no reimbursement to the Tribe for services rendered, however, it will generate a means for reimbursement (from Medicare) for the medications and services offered a no charge to our tribal elders.
5. **Now assisting with** - RWJF Health Prize (not grant) for \$25K application and N7 Grant for \$10K both Due Nov. 12, 2015.
6. **Open Enrollment for Medicare** – Oct. 15- Dec. 7, 2015
7. **Open Enrollment for Covered Ca** - Nov. 1 – Jan. 31, 2016. (year round for Native Americans)
8. **Open Enrollment for Med-iCal** – year round for everyone.

**Karuk Child and Family Services  
Health Board Report  
Patricia Hobbs LCSW  
November 2015**

**Action Items:**

1. Procurement Vehicle – Mental Health

**Updates and Information:**

**Child Welfare Services:**

Administration for Children and Families will conduct a site visit to our Tribe on 11/5 and 11/6/2015 as part of the process of implementing the Tribal TANF/Child Welfare grant recently awarded. The Karuk Tribe was one of eight Indian tribes/tribal organizations awarded the 5 year grant.

Kimberlee Dodge, Social Worker for the Humboldt area left her position and recruitment efforts are being made to fill the position

Mary Gowen Child Welfare Social Worker for the Yreka area has requested transfer to the TANF/Child Welfare position which will be based in Happy Camp.

The Foster Family Recruitment has been postponed due to the site visit from ACF and the health board meeting being held on the day previously selected. In addition the Originating Agency Identifier (ORI) number for the tribe is not in effect and efforts are being made to reestablish it. This number allows the Tribe to conduct background checks for foster/adoptive families and relatives assuming care for children in the child welfare system.

**Alcohol and Other Drug Program:**

See attached report

**Mental Health**

Positions for Licensed Clinical Social Worker or Psychologist has been released. This position will be split between Happy Camp and Yreka. There are two positions which will allow us more flexibility and timely response to referrals.

Darcy Doak, receptionist in the Yreka office has left the position and interviews a replacement are scheduled for 11/6.

ACTIVITY REPORT FOR MENTAL HEALTH PROGRAM

RECORD DATES: OCT 01, 2015 TO OCT 25, 2015

# PATS is the total number of unique, identifiable patients when a patient name was entered on the record. # served is a tally of the number served data value.

	# RECS	ACT TIME (hrs)	# PATS	# SERVED
-----				
AREA: CALIFORNIA TRIBE/638				
SERVICE UNIT: KARUK TRB HP				
FACILITY: YREKA				
PROVIDER: HOBBS, PATRICIA (LICENSED CLINICAL SOCIAL WORK)				
13-INDIVIDUAL TREATMENT/COUNS	7	8.5	5	7
56-RECORDS/DOCUMENTATION	7	0.6	6	7
	=====	=====	=====	=====
PROVIDER TOTAL:	14	9.1	11	14
PROVIDER: KINNEY, BENTON (PHYSICIAN ASSISTANT)				
99-INDIVIDUAL BH EHR VISIT	10	4.0	10	10
	=====	=====	=====	=====
PROVIDER TOTAL:	10	4.0	10	10
PROVIDER: WALTER, KAREENA (LICENSED CLINICAL SOCIAL WORK)				
12-ASSESSMENT/EVALUATION-PATI	1	2.0	1	1
13-INDIVIDUAL TREATMENT/COUNS	12	14.2	8	12
56-RECORDS/DOCUMENTATION	2	0.1	2	2
	=====	=====	=====	=====
PROVIDER TOTAL:	15	16.3	11	15
	=====	=====	=====	=====
FACILITY TOTAL:	39	29.4	32	39
FACILITY: ORLEANS				
PROVIDER: HOBBS, PATRICIA (LICENSED CLINICAL SOCIAL WORK)				
13-INDIVIDUAL TREATMENT/COUNS	4	3.0	3	4
29-FAMILY FACILITATION-PATIEN	2	2.5	1	2
56-RECORDS/DOCUMENTATION	3	0.3	2	3
	=====	=====	=====	=====
PROVIDER TOTAL:	9	5.8	6	9
	=====	=====	=====	=====
FACILITY TOTAL:	9	5.8	6	9
FACILITY: KARUK COMMUNITY HEALTH CLINIC				
PROVIDER: HOBBS, PATRICIA (LICENSED CLINICAL SOCIAL WORK)				
11-SCREENING-PATIENT PRESENT	2	0.7	2	2
13-INDIVIDUAL TREATMENT/COUNS	2	2.0	1	2
21-FOLLOWTHROUGH/FOLLOWUP-PAT	9	1.1	8	9
29-FAMILY FACILITATION-PATIEN	1	0.8	1	1
30-FOLLOWUP/FOLLOWTHROUGH-PAT	1	0.1	1	1
56-RECORDS/DOCUMENTATION	2	0.3	2	2
	=====	=====	=====	=====
PROVIDER TOTAL:	17	4.9	15	17
PROVIDER: WALTER, KAREENA (LICENSED CLINICAL SOCIAL WORK)				
12-ASSESSMENT/EVALUATION-PATI	4	6.8	3	4

13-INDIVIDUAL TREATMENT/COUNS	11	13.1	7	11
56-RECORDS/DOCUMENTATION	6	1.4	4	6
	=====	=====	=====	=====
PROVIDER TOTAL:	21	21.3	14	21

PH

ACTIVITY REPORT FOR MENTAL HEALTH PROGRAM

RECORD DATES: OCT 01, 2015 TO OCT 25, 2015

# PATS is the total number of unique, identifiable patients when a patient name was entered on the record. # served is a tally of the number served data value.

	# RECS	ACT TIME (hrs)	# PATS	# SERVED
FACILITY TOTAL:	38	26.2	29	38
SU TOTAL:	86	61.4	67	86
AREA TOTAL:	86	61.4	67	86

RUN TIME (H.M.S): 0.0.0

Karuk Substance Abuse Program  
 Monthly Report for October 2015

AOD	Total Number of client for each area
Yreka	9
Happy	12
Orleans	1
<b>Total Number of AOD clients 22</b>	
BIP	Total Number of client for each area
Yreka	15 Men 7 women
Happy	2 Men
Orleans	0 Men
<b>Total Number of BIP clients 24</b>	
DUI	Total Number of client for each area
Yreka	3
Happy Camp	5
<b>Total Number of DUI clients 8</b>	

We have 4 people on the wait list for BIP.

I was informed that our numbers appear to be low. I have been diligently working on ways to capture direct and indirect services through RPMS and BMW. One of the aspects that has been lacking in my report is no shows. KSAP staff allocates 2 hours for each assessment. If a client no shows for their assessment that is 2 hours we are unable to provide direct services, which can make our numbers low. When a client no shows KSAP staff quickly moves on to other tasks that need to be done that day. I will be adding the number of no shows per counselor and per site. In addition, KSAP staff has started recording travel, supervision, and the time it takes to formulate our curriculum for each group as well as the time it takes to write notes for each group.

Number of no Shows					
	Yreka	Happy Camp	Orleans		
Angela Baxter	8				
Cheryl Bearchild	3				
Anthony Ballard					

Anthony has not started using BMW to full capacity yet. We will have his numbers on our next report.

Karuk Substance Abuse Program  
Monthly Report for October 2015

There are a few issues I would like to report. The first one is not having enough space for staff. We are currently running a position for a full time counselor who will be based in Yreka. When we fill this position staff will have to share an office. This will be a problem due to the nature of our business. All of our staff needs their own space to facilitate assessments and individual sessions. Also, we do not have our own group room. Though we have been using the conference room, there are a few problems. On several occasions other staff has been in the room, and we have to ask them to leave. Due to waiting for them to leave, our groups start late. Also, the room has desks and other office supplies stacked up against the walls, this does not make for a therapeutic setting. KSAP needs its own space!

On another note, Judge Dixon has requested KASP staff to be present when our tribal members and decedents are attending court. We will meet with the Judge and the drug court team to report how our clients are doing. This will also give staff an opportunity to brainstorm with the team how to address issues with regard to treatment. Judge Dixon will schedule all of our people on the same day, which will prevent KSAP staff from being taken away from treatment multiple times during the month. We will start attending court January 11, 2016.

THANK YOU! For the funding to send our clients to treatment! KASP staff will be meeting to discuss the criteria for clients to be eligible. Staff will be contacting rehabilitation centers to inquire about getting beds for a lower price.

Thank you for allowing me to be of service,

Angela Baxter, BA, CADC II

\*\*\*\*\* CONFIDENTIAL PATIENT INFORMATION \*\*\*\*\*

AVB

OCT 22, 2015 Page 1

ACTIVITY REPORT FOR CHEMICAL DEPENDENCY or A/SA PROGRAM

RECORD DATES: OCT 01, 2015 TO OCT 21, 2015

# PATS is the total number of unique, identifiable patients when a patient name was entered on the record. # served is a tally of the number served data value.

	# RECS	ACT TIME (hrs)	# PATS	# SERVED
-----				
AREA: CALIFORNIA TRIBE/638				
SERVICE UNIT: KARUK TRB HP				
FACILITY: YREKA				
PROVIDER: BALLARD, ANTHONY (UNKNOWN)				
91-GROUP TREATMENT	29	4.0	15	29
	=====	=====	=====	=====
PROVIDER TOTAL:	29	4.0	15	29
PROVIDER: BAXTER, ANGELA V (ALCOHOLISM/SUB ABUSE COUNSELOR)				
12-ASSESSMENT/EVALUATION-PATI	5	5.8	5	5
13-INDIVIDUAL TREATMENT/COUNS	7	3.0	6	7
22-CASE MANAGEMENT-PATIENT PR	1	0.3	1	1
31-CASE MANAGEMENT-PATIENT NO	4	1.3	3	4
40-REFERRAL	1	0.3		1
59-OTHER ADMINISTRATIVE	1	1.0		0
91-GROUP TREATMENT	27	6.0	21	27
	=====	=====	=====	=====
PROVIDER TOTAL:	46	17.5	36	45
PROVIDER: BEARCHILD, CHERYL R (ALCOHOLISM/SUB ABUSE COUNSELOR)				
12-ASSESSMENT/EVALUATION-PATI	4	6.5	4	4
13-INDIVIDUAL TREATMENT/COUNS	4	0.8	2	4
24-MATERIAL/BASIC SUPPORT-PAT	3	4.3		3
31-CASE MANAGEMENT-PATIENT NO	5	2.6	4	5
56-RECORDS/DOCUMENTATION	4	5.0		4
59-OTHER ADMINISTRATIVE	3	6.0		3
91-GROUP TREATMENT	59	10.3	30	59
	=====	=====	=====	=====
PROVIDER TOTAL:	82	35.4	40	82
	=====	=====	=====	=====
FACILITY TOTAL:	157	56.8	91	156
FACILITY: ORLEANS				
PROVIDER: BALLARD, ANTHONY (UNKNOWN)				
13-INDIVIDUAL TREATMENT/COUNS	1	1.0	1	1
	=====	=====	=====	=====
PROVIDER TOTAL:	1	1.0	1	1
	=====	=====	=====	=====
FACILITY TOTAL:	1	1.0	1	1
FACILITY: KARUK COMMUNITY HEALTH CLINIC				
PROVIDER: BALLARD, ANTHONY (UNKNOWN)				
12-ASSESSMENT/EVALUATION-PATI	1	1.0	1	1
13-INDIVIDUAL TREATMENT/COUNS	2	2.0	2	2
59-OTHER ADMINISTRATIVE	1	1.0		0
91-GROUP TREATMENT	16	5.0	9	16



PROVIDER TOTAL:	=====	=====	=====	=====
	20	9.0	12	19

PROVIDER: BAXTER, ANGELA V (ALCOHOLISM/SUB ABUSE COUNSELOR)

\*\*\*\*\* CONFIDENTIAL PATIENT INFORMATION \*\*\*\*\*

AVB

OCT 22, 2015 Page 2

ACTIVITY REPORT FOR CHEMICAL DEPENDENCY or A/SA PROGRAM

RECORD DATES: OCT 01, 2015 TO OCT 21, 2015

# PATS is the total number of unique, identifiable patients when a patient name was entered on the record. # served is a tally of the number served data value.

	# RECS	ACT TIME (hrs)	# PATS	# SERVED
59-OTHER ADMINISTRATIVE	2	8.5		1
72-TRAVEL NOT RELATED TO PATI	2	7.0		1
	=====	=====	=====	=====
PROVIDER TOTAL:	4	15.5	0	2
PROVIDER: BEARCHILD, CHERYL R (ALCOHOLISM/SUB ABUSE COUNSELOR)				
12-ASSESSMENT/EVALUATION-PATI	1	1.5	1	1
13-INDIVIDUAL TREATMENT/COUNS	2	0.5	2	2
24-MATERIAL/BASIC SUPPORT-PAT	1	0.5		1
59-OTHER ADMINISTRATIVE	1	2.5		1
71-TRAVEL RELATED TO PATIENT	2	3.0		2
91-GROUP TREATMENT	3	1.5	3	3
	=====	=====	=====	=====
PROVIDER TOTAL:	10	9.5	6	10
	=====	=====	=====	=====
FACILITY TOTAL:	34	34.0	18	31
	=====	=====	=====	=====
SU TOTAL:	192	91.8	110	188
	=====	=====	=====	=====
AREA TOTAL:	192	91.8	110	188

RUN TIME (H.M.S): 0.0.0



**Health Board Update – HHS Overview**  
Raul Recarey – 11/05/2015

**REPORTING:**

In October 2015, we saw **1055** patients in all 3 clinics. This is the 2<sup>nd</sup> highest volume of patients seen this year. The increase over September was fairly even across all 3 clinics; Yreka saw approximately 40 more patients in October than September, Happy Camp about 20 patients more and Orleans 35 extra patients.

Month	YREKA	HC	OR	MONTHLY TOTALS
Jan	497	332	66	895
Feb	515	336	77	928
Mar	593	332	67	992
Apr	455	253	37	745
May	425	318	30	773
Jun	570	387	47	1004
Jul	508	377	71	956
Aug	511	414	160	1085
Sep	543	313	105	961
<b>Oct</b>	<b>580</b>	<b>335</b>	<b>140</b>	<b>1055</b>
Nov	0	0	0	0
Dec	0	0	0	0
<b>Total</b>	<b>5,197</b>	<b>3,397</b>	<b>800</b>	<b>9394</b>

- In the month of October, Dr. Vazquez’s team saw the most number of patients – **208**. Provider Rotin’s team saw the 2<sup>nd</sup> highest number of patients – **182** and provider Cronin’s team came in 3<sup>rd</sup> place in terms of volume at **176** patients.
- Vazquez Team had a slight improvement in Average Visit Time, down to 57 minutes from 1 hour and 4 minutes in September.
- In Happy Camp, the Dr. Eric Chau team made the highest improvement in quality scores, improving on **11** out of a possible 15 metrics – this was a deliberate push by Dr. Chau and his team to
- The William Pease team in Orleans had the best *Average Visit Times*, but also the lowest quality scores (43%) as compared to all other providers. I intend to work closely with the Orleans team to discuss strategies to improve their quality scores (70-80% of the quality metrics can be addressed by the MA’s)
- Jennifer Cronin’s team saw the highest improvement in overall quality scores, going from a total 61% in September to **67%** in October.

# Karuk Tribe



Improved
Worsened
Same

	Rotin	Cronin	Vasquez	Pease	Chambers	Chau
Measure	% Resolved (Reminders that are DONE)					
DM Hgb A1c	87%	80%	84%	83%	68%	80%
DM Nephropathy Screen	74%	86%	49%	63%	85%	72%
DM Eye Exam	42%	44%	42%	28%	53%	19%
DM Foot Exam	73%	85%	73%	72%	76%	31%
DM EKG	90%	75%	84%	32%	78%	61%
DM ACE/ARB	87%	91%	67%	85%	83%	85%
TSH Test	94%	87%	64%	75%	75%	98%
Hepatitis C Screening	74%	68%	69%	31%	92%	78%
Osteoporosis Screening	41%	22%	37%	19%	64%	38%
Activity Screen	89%	87%	76%	52%	77%	72%
Lipid Screening	79%	74%	51%	42%	75%	67%
Colon Cancer Screening	19%	15%	31%	0%	21%	10%
Pap Smears	63%	60%	19%	28%	77%	29%
Mammograms	60%	58%	35%	4%	60%	19%
Depression Screening	88%	86%	73%	58%	79%	79%
Average Completed:	70%	67%	53%	41%	71%	53%
Total Patients Seen	182	176	208	115	134	164

Average Visit Time:	1:26	1:30	0:57	0:35	0:44	1:10
Average Patients Daily:	10	10	12	6	9	8
Average Visit Time:	1:36	1:17	1:04	0:36	0:42	1:11
Average Patients Daily:	9	10	12	6	10	8
Average Visit Time:	1:16	1:15	0:50	0:36	0:44	1:15
Average Patients Daily:	8	9	9	8	10	9
Average Visit Time:	1:13	1:12	0:47		0:43	1:13
Average Patients Daily:	9	8	11		10	9

# Karuk Tribe



## QUALITY BONUS: OCTOBER

BONUS CALC:	Rotin	Cronin	Vasquez	Pease	Chambers	Chau
Quality Scores	71	68	57	45	71	56
x .67	47.57	45.56	38.19	24.79	47.57	36.18
Patients Seen	182	176	208	115	134	164
x .33	60.06	58.08	68.64	52.8	67.65	57.09
Average Patients seen	10	10	12	6	9	8
<b>GRAND TOTAL</b>	<b>107.6</b>	<b>102.28</b>	<b>100.57</b>	<b>77.59</b>	<b>115.22</b>	<b>93.27</b>
<b>Placement</b>	<b>1</b>	<b>2</b>	<b>3</b>	*	*	*

\* Did not meet minimum (10) Average Patients Seen requirement

1. **Chris Rotin's Team** came in first place with a quality score of **70%** and total patients seen of 182.
2. **Jennifer Cronin's Team** won 2<sup>nd</sup> place with a quality score of **67%** - up from 3<sup>rd</sup> place last month!
3. **3<sup>rd</sup> place goes to the Vazquez Team** with a quality score of **53%** and a whopping **208** patients seen.

I'd like to CONGRATULATE the winners and everyone else for their push to increase our quality metrics. Your efforts are making winners of all of us, however our *patients* are the REAL winners of this initiative.

## DENTAL Patient Visits by Clinic by Month – OCTOBER

	Provider Name				
	Millington	Felker	Ortiz	Brassea	Hokanson
Ave. Visit Time:	0:59	1:02	0:41	1:17	0:48
Ave. Patients Daily:	9	9	6	7	4

	Yreka	Happy Camp	MONTHLY TOTALS
Jan	270	160	430
Feb	271	118	389
Mar	403	215	618
Apr	461	198	659
May	287	156	443
Jun	386	194	580
Jul	312	199	511
Aug	272	167	439
Sep	356	203	559
Oct	376	204	580
Nov			
Dec			
<b>Total</b>	<b>3,394</b>	<b>1,814</b>	<b>5208</b>

	<b>MONTHLY REVENUE REPORT</b>			<b>BUSINESS OFFICE</b>	
	<b>OCTOBER 2015</b>	<b>Happy Camp</b>	<b>Yreka</b>	<b>Orleans</b>	<b>KTHP</b>
	Revenue Medical	\$24,038.41	\$69,249.83	\$18,152.01	\$111,440.25
	PHC Capitation	\$8,297.84	\$12,744.14	\$2,636.36	\$23,678.34
	HPSA Quarterly Incentive	\$823.46	\$1,661.42	\$38.89	\$2,523.77
	Revenue Dental	\$48,566.63	\$49,341.87	\$0.00	\$97,908.50
	Revenue Mental Health	\$3,257.65	\$16,068.53	\$889.56	\$20,215.74
	Revenue Telehealth	\$126.52	\$794.77	\$42.40	\$963.69
	Revenue Homecare	\$0.00		\$0.00	\$0.00
	Revenue Total	<b>\$85,110.51</b>	\$149,860.56	<b>\$21,759.22</b>	<b>\$256,730.29</b>
		<b>END OF MONTH HAS NOT OCCURRED AT THIS TIME</b>			
	Billing OCT Medical	\$114,255.16	\$170,952.69	\$42,824.37	\$328,032.22
	Billing OCT Dental	\$66,248.00	\$86,585.40	\$141.00	\$152,974.40
	Billing OCT Mental Health	\$8,698.24	\$24,298.63	\$2,593.35	\$35,590.22
	Billing OCT Telehealth	\$2,241.68	\$2,965.73	\$951.31	\$6,158.72
	Billing OCT Homecare				
	Billed Grand Total	<b>\$191,443.08</b>	<b>\$284,802.45</b>	<b>\$46,510.03</b>	<b>\$522,755.56</b>
	<b>BILLING DEPARTMENT BUDGET 2016</b>				
					AVAILABLE %
PROGRAM	YEAR END ANNUAL	EXPENSES TO			Could be spent
YEAR	BUDGET	DATE	BALANCE	% USED	at this date
<b>FY 2016</b>	<b>\$520,661.50</b>	<b>\$21,336.37</b>	<b>\$499,092.84</b>	<b>4.14%</b>	<b>8.30%</b>