Navajo Area Indian Health Service Spring Session Report 24th Navajo Nation Tribal Council

U.S. Department of Health and Human Services

April 20, 2020





The Navajo Area Indian Health service is pleased to submit the Executive Summary to the 24th Navajo Nation Tribal Council, Spring Session. The summary is intended to serve as an update on Navajo Area IHS's efforts to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. For ease of reading, the summary is organized into the following five sections: *Leading Change, Leading People, Business Acumen, Building Coalitions*, and *Results Driven*. The content provided in the report covers Navajo Area IHS activities quarter 1 of 2020.

This report will primarily focus on our work around the COVID 19 Pandemic efforts for the Navajo Area. This enormous task cannot be accomplished without the many wonderful men and women that work on the frontlines of the Navajo Area IHS. I also have to recognize the support from members of the 24th Navajo Nation Tribal Council as your advocacy support our daily efforts to care for our patients.

LEADING CHANGE

- In preparation for COVID 19, the Navajo Area IHS immediately mobilized its planning efforts at all levels of the organization. This included:
 - Development of Surge plans to describe anticipated workload and required workforce.
 - Develop data platform to collect essential data. This data was used to develop projection charts to prepare for surges.
 - Established a robust communication plan to ensure that information flow was in place.
 - Established regular communication with internal stakeholders to provide information, guidance, support and assurance of safe workplace environment.
- NAIHS activated its response to hot areas identified on the Navajo Nation by mobilizing teams to support and secure critical information.
- NAIHS leadership provided regular guidance and support to improve understanding of COVID 19 to all NAIHS employees
- NAIHS is fully utilizing the relaxed Office of Personnel Management hiring process to hire needed and required staff.
- NAIHS is fully unitizing adjusted business process to procure needed supplies and equipment. This required mobilization of procurement staff and understanding of streamlined business processes.

LEADING PEOPLE

- Increased communication with NAIHS leadership team members to support communication flow. Updates are provided in a uniform manner that supports the efforts from the National to local level and visa versa.
- Provided uniform guidance to medical team members regarding updates and or policy development and implementation.
- NAIHS Director provides regular updates to all NAIHS staff to support coordinated communication and sharing of the collected work effort to address the COVID 19.
- Safety of the NAIHS workforce remains a priority for NAIHS Leadership, including providing guidance on appropriate use of personal protective equipment.

BUSINESS ACUMAN

- NAIHS received 39 Abbott ID Now Lab Analyzers and disbursed to end users as of Monday, April 14. Training was provided and lab analyzers came with limited test kids. The purpose and intent of the equipment is to assist with COVID 19 testing throughout Navajo Area. The lab analyzers were disbursed as follows:
 - o NAIHS Federal Service Unit 23
 - o Navajo Nation PL 93-638 Programs 13
- All COVID 19 funds received in the NAIHS have been disbursed. Any additional funds will be disbursed within 24 hours.
 - o Navajo Nation PL 93-638 Programs \$26,331,141
 - o NAIHS Federal Service Unit \$53,241,364
- Developed written material to support improved understanding and guidance to Navajo Nation people as they relate to COVID 19. Information was shared widely through various mechanism and translated in Navajo.
- NAIHS is closely monitoring all COVID 19 costs, including all required procurement of supplies, equipment and manpower. This includes the requirement to pay hazard pay for all front line staff.
- NAIHS is closely monitoring the loss of revenue, with the change in services, revenue is expected to be far less than expected. This change will have affect throughout the NAIHS for the remainder of the fiscal year.

RESULTS DRIVEN

- On February 25, NAIHS stood up the planning phase of the Emergency Operation Center. In coordination with the Navajo Nation the following additional steps are in place:
 - Navajo Nation issued 45-day quarantine for Commissioned Officers deployed from the Navajo area.
 - NAIHS participate with the Navajo Nation on radio announcement and press conferences, as requested.
 - NAIHS activated its Epidemiology team to assist the Navajo Nation Epidemiology team and in effort to collect critical data.
 - On 2/27/20 Navajo Nation President stands up NN task force or NN COVID-19 team to address the people of the Navajo Reservation
 - On 3/2/20 Navajo Nation Department of Health and NAIHS presents to the NAABIK'ÍYÁTI' Committee of the 24th Navajo Nation Council.
- Developed partnership with the Veteran Administration to support the Gallup Indian Medical Center with patients that require higher level of health care, including care for non-Veterans.

BUILDING COALITIONS

- On February 27, the NAIHS joined the Navajo Nation COVID 19 Task Force to support the overall coordination effort to ensure that health care component for the Navajo Area.
- NAIHS provides regular updates to Navajo Nation COVID 19 team through written or verbal repots. NAIHS support weekly Navajo Nation Agency calls to provide updates on NAIHS work related to COVID 19 activities
- NAIHS assigned PHS Officer to Navajo Nation Command Center to assist with communication and coordination.
- NAIHS worked with the Gallup Indian Medical Center to strengthen relationship to support high risk population, these communication includes stakeholders with the City of Gallup, and members of the 24h Nation Tribal Council.
- In partnership with the New Mexico Department of Health, NAIHS coordinate the establishment of the alternate care site that support 60 beds. This will allow the GIMC additional space to support lower acute care for patients.