

WORKFORCE ADVISORY COUNCIL PRESENTATION

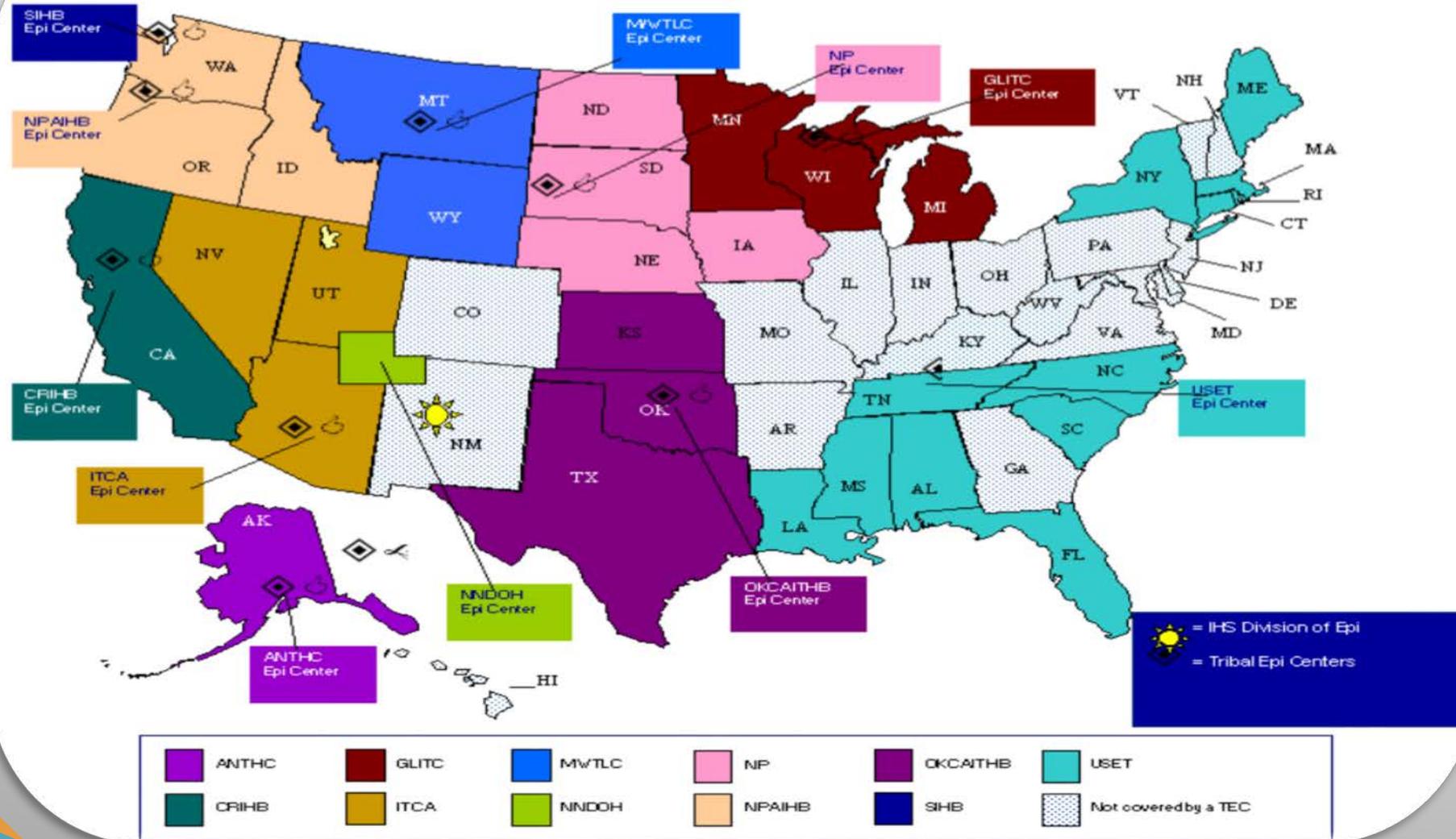
▶ April 3rd 2017

ROCKY MOUNTAIN
TRIBAL EPIDEMIOLOGY
CENTER



Tribal Epidemiology Centers

Tribal Epidemiology Centers By State



Rocky Mountain Tribal Epidemiology Center (RMTEC)

- ▶ A division of the Rocky Mountain Tribal Leaders Council (RMTLC)
- ▶ RMTEC serves the tribes of Montana, and Wyoming
- ▶ TECs and HHS:
 - ▶ *In addition to designating TECs as public health authorities, IHCIA allows TECs access to data held by the secretary of HHS. IHCIA states that the secretary “shall grant to each epidemiology center . . . access to use of the data, data sets, monitoring systems, delivery systems, and other protected health information in the possession of the Secretary.”²² It also directs the director of the Centers for Disease Control and Prevention (CDC) to provide technical assistance to TECs in performing the functions outlined in ICHIA*

Rocky Mountain Tribal Epidemiology Center (RMTEC)



RMTEC Mission Statement

- ▶ To empower American Indian Nations and Urban Indian communities by building community-driven public health and epidemiological capacity through outreach and creative partnerships.

...Empowering tribes with reliable data for planning and program development.



The communities we serve

The Rocky Mountain Tribal Epidemiology Center is a community participatory based Public Health center created under a cooperative agreement with the Indian Health Service, the Centers for Disease Control and Prevention, the Nation Institutes of Health and others.

In order to meet the Tribal Health Department priorities, RMTEC established public health partnerships with:

- ▶ Tribes
- ▶ Billings Area Indian Health Service (BAO-IHS)
- ▶ Yellowstone City-County Public Health Department (YCCPHD)
- ▶ MT Department of Public Health and Human Services (MT DPHHS)
- ▶ Wyoming Dept. of Health (WY DOH)
- ▶ Numerous Universities and private contractors

Past and current RMTEC activities documents the history of its capability to plan, implement and evaluate previous, present and future projects for the target population on Montana and Wyoming Reservations and Urban Indian Health Centers

based on Community Health Priorities



Healthy People 20/20 Focus Areas

1. Capacity Building:

- ▶ Strengthening Public Health Capacity through Workforce Development
- ▶ Emergency Preparedness

2. Chronic/Infections Disease:

- ▶ **Chronic**/Infectious Disease Surveillance
- ▶ A Comprehensive Approach to Good Health and Wellness in Indian Country

3. Healthy Lifestyles:

- ▶ **Obesity Prevention (CYP/CHM)**
- ▶ Maternal and Child Health through the **Blackfeet Coalition Team**; activities designed to support organizations working in the area of drug use in pregnancy
- ▶ Transitional Recovery and Culture Project.



Healthy People 20/20 Focus Areas Continued

4. Disease Prevention/Environmental Health:

- ▶ Tribal Injury Prevention Cooperative Agreement Project (TIPCAP) and Injury Surveillance
- ▶ Cancer Prevention and Screening
- ▶ Environmental Health Initiative

5. Community Health Profiles: (Annual Factsheets and Publications)

- ▶ Data Improvement Projects
- ▶ Behavioral Risk Factor Surveillances System -BRFSS
- ▶ Emerging Projects



Transitional Recovery and Culture Project (TRAC)

- ▶ Currently, working with the state of MT to adapt Peer Specialist training curriculum for Tribes
- ▶ Goal is to meet state and Tribal standards as we train and develop a cadre of peer specialists for substance misuse, behavioral health and chronic disease
- ▶ Model includes core curriculum, training, ongoing education and supervision standards
- ▶ Will be sustainable through 3rd party billing and contracts with state
- ▶ It is pertinent to AHEC because peer specialists are considered para-professionals in the public health realm.



Good Health and Wellness in Indian Country (GHWIC)

The three long-term goals of **GHWIC** are to:

- ▶ Reduce rates of death and disability from tobacco use
- ▶ Reduce prevalence of obesity
- ▶ Reduce rates of death and disability from diabetes, heart disease, and stroke

Note CDC's largest single investment to ease health disparities that affect American Indians and Alaska Natives is good health and wellness in Indian country, a 5-year, \$16 million/year program that started in FY 2014. Twelve tribes work on effective community-chosen and culturally adapted strategies to reduce commercial tobacco use and exposure, improve nutrition and physical activity, increase support for health literacy, and strengthen team-based care and community-clinical links



Tribal Injury Prevention Program (TIPCAP)

The purpose of the Tribal Injury Prevention Cooperative Agreement Program (TIPCAP) is to support Tribes to build sustainable IPP's that conduct effective evidence-based strategies for motor vehicle safety and falls prevention. Support is given through technical assistance, data collection, data management, data analysis, and data reporting on all intentional and unintentional injuries.

How we support the Tribes

- ▶ Continually collect, analyze and report intentional and un-intentional injury data annually
- ▶ Annual Strategic Intervention Planning for all Service Units
- ▶ Assist each service unit with monitoring and evaluating designated interventions
- ▶ Provide car seats to service units in need
- ▶ Provide Strategic Planning software – actionstrategy.org – to assist with implementing, monitoring, and evaluating strategic intervention plans
- ▶ Report to the Tribal Government structures to build partnerships and community ownership



Child Health Measures (CHM) Secondary Data Analysis

*A Clinical Translational Research Program (CTRP)
through Montana State University (MSU) and National
Institutes of Health (NIH)*

- ▶ The CHM Project is a 10-year cohort initiative (2007-2017) that collects health data on school aged children 5-19 years
- ▶ to highlight the high rates of childhood obesity and heart disease among children on participating tribal reservations.
- ▶ The primary goal of the project is to describe CHM data to identify and address a Diabetes intervention for American Indian youth



Goals and Functions of the TECs

IHCIA's 1992 amendments authorized the establishment of TECs to serve each Indian Health Service region.⁶ TECs perform a variety of functions " [i]n consultation with and on the request of Indian tribes, tribal organizations, and urban Indian organizations" to elevate the health status of tribal and urban Indian communities, including:

1. Collecting and monitoring data on the health status objectives of the Indian Health Service, Indian tribes, tribal organizations, and urban Indian organizations;
2. Evaluating delivery and data systems that impact Indian health;
3. Assisting tribes, tribal organizations, and urban Indian organizations to determine health status objectives and services needed to meet those objectives;
4. Making recommendations of services to assist Indian communities;*
5. Making recommendations to improve Indian healthcare delivery systems;*
6. Providing technical assistance to tribes, tribal organizations, and urban Indian organizations to develop local health priorities and disease incidence and prevalence rates; and
7. Providing disease surveillance and promoting public health.*

