



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

Burns-Paiute Tribe
Chehalis Tribe
Coeur d'Alene Tribe
Colville Tribe
Coos, Suislaw &
Lower Umpqua Tribe
Coquille Tribe
Cow Creek Tribe
Cowlitz Tribe
Grand Ronde Tribe
Hoh Tribe
Jamestown S'Klallam Tribe
Kalispel Tribe
Klamath Tribe
Kootenai Tribe
Lower Elwha Tribe
Lummi Tribe
Makah Tribe
Muckleshoot Tribe
Nez Perce Tribe
Nisqually Tribe
Nooksack Tribe
NW Band of Shoshone Tribe
Port Gamble S'Klallam Tribe
Puyallup Tribe
Quileute Tribe
Quinault Tribe
Samish Indian Nation
Sauk-Suiattle Tribe
Shoalwater Bay Tribe
Shoshone-Bannock Tribe
Siletz Tribe
Skokomish Tribe
Snoqualmie Tribe
Spokane Tribe
Squaxin Island Tribe
Stillaguamish Tribe
Suquamish Tribe
Swinomish Tribe
Tulalip Tribe
Umatilla Tribe
Upper Skagit Tribe
Wampanoag Tribe
Yakama Nation

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RESOLUTION #10-03-02

Support to Pursue Funding for Governance Planning Activities for Regional Specialty Referral Centers in the Portland Area

WHEREAS, the Northwest Portland Area Indian Health Board (NPAIHB) is a Tribal organization under P.L. 93-638 that represents forty-three federally recognized Tribes in Idaho, Oregon, and Washington and is dedicated to assisting to promoting the health needs and concerns of Indian people in the Northwest; and

WHEREAS, the Northwest Portland Area Indian Health Board is dedicated to assisting and promoting the health needs and concerns of Indian people; and

WHEREAS, the primary goal of the NPAIHB is to improve the health and quality of life of its member Tribes; and

WHEREAS, in October 2005, the Indian Health Service (IHS) Portland Area Office adopted a Health Services and Facilities Master Plan that identified primary care facility and service needs for the 43 Portland Area Tribes, which also included three regional specialty referral health centers and one area-wide inpatient facility; and

WHEREAS, the Portland Area Facilities Advisory Committee (PAFAC) recently completed oversight of a pilot study to evaluate the means for determining the demand for regional specialty referral centers and to provide recommendations on how to adapt the IHS Health Facility Construction Priority System to score and evaluate such facilities in order to receive funding; and

WHEREAS, the Pilot Study concluded that the demand for a Regional Specialty Referral Centers—when strategically placed to offer specialty care, diagnostic, and ambulatory surgical care—are economically feasible and should be further explored; and

WHEREAS, the Pilot Study further recommended that a demonstration project be completed to prove the viability of Regional Specialty Referral Centers for improved access to specialty, diagnostic, and other secondary care in order to gather necessary—and presently unavailable data—to further inform planning metrics for regional secondary care for the Portland Area that will also have application to the entire IHS system; and

WHEREAS, the PAFAC has identified that a critical issue that must be addressed before being able to develop preliminary business planning documents (business plan, concept of operation, financial pro forma, etc.) is the governing structure for each of the regional referral centers. A business plan and financial pro forma are vital to obtain construction funding; and

WHEREAS, the NPAIHB has been working as a coordinating body to support the work of the PAFAC and to address health facility construction needs of Portland Area Tribes; and

WHEREAS, the PAFAC has recommended that the NPAIHB pursue an Administration for Native American (ANA) grant application under the Social and Economic Development Strategies (SEDS) initiative to fund activities that will lead to the development of the governance structure for Regional Specialty Referral Centers in the Portland Area.

THEREFORE BE IT RESOLVED, that the Northwest Portland Area Indian Health Board directs the Executive Director, with oversight by the PAFAC, to develop a grant application to ANA to fund a governance planning grant for regional specialty referral centers in the Portland Area.

BE IT FURTHER RESOLVED, that if there are additional opportunities to fund governance development and planning activities, that the Board is authorized to pursue such opportunities under authority of this resolution.

CERTIFICATION

NO. 10.03.02

The foregoing resolution was duly adopted at the regular session of the Northwest Portland Area Indian Health Board. A quorum being established; 31 for, _____ against, _____ abstain on April 22, 2010.

Andrew C. Joseph Jr.

Chairman

4-22-10
Date

Manda Nielson
Secretary