MEMORANDUM

DATE: June 17, 2016

TO: NPAIHB Delegates, Tribal Health Directors and Tribal Chairs

FROM: Joe Finkbonner, RPh, MHA, Executive Director

RE: WEEKLY MAILOUT

• 2016 Direct Service Tribes Award – Call for Nominations

 Direct Service Tribes 13th Annual National Meeting & GPTCHB Health Summit, August 31-September 1, 2016 in Rapid City, SD

Delegates and Tribal Health Directors:

• Good Health and Wellness in Indian Country Tribal Resource Digest

From: Longenecker, Emmalani (IHS/HQ) [mailto:Emmalani.Longenecker@ihs.gov]

Sent: Thursday, June 16, 2016 1:34 PM

Subject: Call for Nominations - 2016 Direct Service Tribes Awards

Dear DSTAC:

Please share and distribute widely.

The Direct Service Tribes (DST) Awards Ceremony is scheduled during the DST National Meeting & GPTCHB Health Summit on August 31 - September 1, 2016 in Rapid City, SD. If you would like to recognize your Tribal Leaders, Chief Executive Officers, or staff for an achievement or accomplishment, please find attached 2016 Annual Awards information and nomination form. Nominations may be submitted by any DSTAC stakeholder (DSTAC Member, Elected Tribal Leader, Tribal Administrator, IHS Area Director, or Tribal Health Board Member).

All nominations are due to <u>kenneth.coriz@ihs.gov</u> by <u>Wednesday, July 20, 2016.</u> For additional information, please contact Kenneth Coriz at 301-443-1104.

Thank you,

Emmalani Longenecker (Diné)

Management Analyst

Office of Direct Service and Contracting Tribes

Indian Health Service, Headquarters

5600 Fishers Lane; Mail Stop 08E17

Rockville, MD 20857

Tel. 301.443.1104

DIRECT SERVICE TRIBES ADVISORY COMMITTEE RECOGNITION AND APPRECIATION AWARDS

Establishment: The Direct Service Tribes (DST) Advisory Committee hereby establishes

the "Direct Service Tribes Advisory Committee Recognition and

Appreciation Awards."

Purpose: The Direct Service Tribes Advisory Committee Recognition and

Appreciation Awards are established to acknowledge and bestow gratitude upon individuals and groups that have advanced the goals and mission of the DST Advisory Committee (DSTAC) and DST. Award recipients are individuals and groups that have exhibited personal and professional commitment in the delivery of quality healthcare services and programs through exceptional leadership and performance for the benefit of American

Indians, Alaskan Natives and Indian tribes and communities.

Background:

The DSTAC was established to provide leadership, advocacy and policy guidance for Indian tribes that receive primary health care directly from the Indian Health Service (IHS). The DSTAC has been actively defining the role of the DST within the IHS. The DSTAC coordinates an annual meeting that provides a national forum for the discussion of issues of importance to DST; advocates for tribal representation on agency and Department-level workgroups and committees that address policy and funding issues impacting DST; and participates in the IHS budget formulation process by developing budget priorities and recommendations solely reflecting DST needs and concerns.

In 2009 during the DST National Meeting in Oklahoma City, OK, the DSTAC recognized for the first time several tribal and federal Indian health advocates with awards for their professional contributions to the advancement of Indian health care services, policy and leadership. Examples of such efforts and contributions included exceptional initiative or leadership in carrying out activities to improve the direct care programs and benefit the IHS environment.

The Awards also represented the promotion and respect of tribal cultures, customs and traditions, consistent with all aspects of DSTAC activities.

Eligibility:

Categories and There are four categories of recognition and appreciation awards:

Carole Anne Heart Spirit Award	Chief Executive Officers Awards	Outstanding Achievement Award	Special Certificate of Recognition and Appreciation
• There is one (1) recipient for this award	• There are two (2) recipients for this award	recipients for this recipients for this	• Ten (10) recipients will be recognized, one from each of
 Eligible candidates are Tribal Leaders, Health Administrators, Health Policy Advocates The recipient exemplifies the following traits, in memory of the late-Carole Anne Heart Leadership and Advocacy Sense of Humor and Wit Energy and Compassion Commitment to Improve Indian Health and Education for all Native Peoples 	 Eligible candidates are Federal Chief Executive Officers (CEO) at IHS facilities and Non-Federal CEO at a Tribally Administered facility The recipients are CEOs that have developed best practices and innovative ways to provide health care which result in improved performance and effectiveness to Direct Service Communities. 	 Eligible candidates are Federal and Non-Federal employees and groups. The recipients are individuals or groups recognized for their contributions to IHS direct care programs as demonstrated by their performance, commitment to excellence and dedication to DST. 	the following Areas: Albuquerque, Bemidji, Billings, Great Plains, Nashville, Navajo, Oklahoma City, Phoenix, Portland, and Tucson. • Eligible candidates are Federal employees, Tribal leaders, health directors, employees, etc. • Recognizes dedicated service and significant contributions to IHS Direct Service Tribes healthcare programs and activities

Nomination: Individuals and groups may be nominated by any DSTAC stakeholder*. A DSTAC stakeholder is a DSTAC Member, Elected Tribal Leader, Tribal Administrator, IHS Area Director or Tribal Health Board Member. A nomination form must be completed and submitted by the established date.

Key Dates: Award Nomination Announcement: June 15, 2016 Award Nomination Period: June 15 – July 20, 2016 Notification to Award Recipients: July 25 - August 1, 2016 September 1, 2016

Awards Presentation: All dates noted above are approximate and subject to

slight modification.

^{*} Federal employees may submit nominations but concurrence by their respective Area Director is required. The signature of the Area Director on the nomination form signifies concurrence.

Selection: Members of the DSTAC Awards Subcommittee will review, evaluate and

score all nominations received. The Awards Subcommittee shall provide an in-depth review of all nominations and recommend approval of award

recipients to the DSTAC.

The DSTAC shall approve Award Recipients upon recommendation from

Awards Subcommittee.

Notification: Award Recipients will be announced at the annual DST National Meeting

during a public presentation.

DIRECT SERVICE TRIBES ADVISORY COMMITTEE DSTAC ANNUAL RECOGNITION AND APPRECIATION AWARD

All nominations must include the following information (please print or type)

I. Award Inform	ation:			
NOMINATION	0		0	0
FORM (√ one):	Carole Anne Heart Spirit Award	Chief Executive Officers Awards	Outstanding Achievement Award	Special Certificate of Recognition and Appreciation
Eligibility ($\sqrt{\text{one}}$):	Federal	O Tribal	10	Other O
II. General Inform	nation:			
Nominee First Nan	ne:	Last Na	ame:	
Tribal Affiliation (optional):			
Title / Position:				7
Organization:				
Address 1:				
Address 2:				
City:		State:	7	Cip:
Phone:]	Email:		
Nominated by:				
Phone:]	Email:		
III. Accomplishme	ents and Biography (n	arrative)		

On the attached page provide:

- Brief detailed narrative of the nominee's award justification and accomplishments
- Short biography with photo (optional)

Contact the Office of Direct Service and Contracting Tribes (ODSCT) with any questions. Completed nomination forms must be received by July 20, 2016. Forms may be submitted to the ODSCT by first-class mail or electronic mail.

> Indian Health Service - ODSCT ATTN: Kenneth Coriz 5600 Fishers Lane 08E13A Rockville, MD 20857 Tel. (301) 443-1104

E-mail: kenneth.coriz@ihs.gov

Nomine	e First Name:		Last Name:	· · · · · · · · · · · · · · · · · · ·		
III. Acc	omplishment ar	nd Biography (narrative form)				
1.	Provide a brief narrative of the nominee's award justification and accomplishments					
2.	Provide a short biography and attach a picture (optional)					









Direct Service Tribes Advisory Committee & Great Plains Tribal Chairmen's Health Board invite you to:

DIRECT SERVICE TRIBES 13TH ANNUAL NATIONAL MEETING & 6TH ANNUAL GPTCHB HEALTH SUMMIT

AUGUST 31 SEPTEMBER 1, 2016

RUSHMORE PLAZA HOLIDAY INN RAPID CITY, SD

"Empowering Indian Health for Future Generations"

For more information and registration visit: www.ihs.gov/dstnm or www.gptchb.org/events

Join us for pre-conference workshops and meetings hosted by GPTCHB on August 30, 2016!

TRIBAL RESOURCE DIGEST

2016 - Issue 73



Adrienne, from the Yellowhawk Health Center, leads a field demonstration on composting

Welcome to the Centers for Disease Control and Prevention's (CDC) tribal resource digest for the week of June 13, 2016. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Hannah Cain at kzq3@cdc.gov with the words "TRIBAL DIGEST" in the subject line.

TRIBAL RESOURCE DIGEST

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TRIBAL RESOURCE DIGEST

2016 - Issue 73

I. ARTICLES

Electronic Cigarette Use among Working Adults



Electronic cigarettes (e-cigarettes) are battery-powered devices that deliver a heated aerosol, which typically contains nicotine, flavorings, and other additives, to the user. The e-cigarette marketplace is rapidly evolving, but the long-term health effects of these products are not known. Carcinogens and toxins such as diacetyl, acetaldehyde, and other harmful chemicals have been

documented in the aerosol from some e-cigarettes. On May 5, 2016, the Food and Drug Administration (FDA) finalized a rule extending its authority to all tobacco products, including e-cigarettes. The prevalence of e-cigarette use among U.S. adults has increased in recent years, particularly among current and former conventional cigarette smokers.

Read the full article here: <u>Electronic Cigarette Use Among Working Adults — United States</u>, 2014 | MMWR

II. RESOURCES

Tobacco Cessation Protocols are now live on the Million Hearts Website!



Go to http://millionhearts.hhs.gov/tools-protocols.html#TCP to review the new customizable template and explore sample evidence-based protocols.

III. WEBINARS, TRAININGS, AND CONFERENCES

Tribal Injury Prevention: Successes and Challenges from the Tribal Injury Prevention Cooperative Agreement Program (TIPCAP)

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This webinar will focus on the implementation and evaluation of the Indian Health Service (IHS) Tribal Injury Prevention Cooperative Agreement Program (TIPCAP), which aimed to enhance the capacity of Tribes to build sustainable injury prevention (IP) programs during 2011 - 2015. To maximize the impact of these programs, Econometrica, Inc., supported the 33 grantees in 9 IHS Areas to operate autonomously and with the flexibility necessary to ensure that program activities were tailored to the unique needs and circumstances of each Tribal community.

Wednesday, June 29th, 2016

2:00 - 3:00 PM Eastern Time

Click on the link to register: <u>Tribal Injury Prevention</u>

National Research Mentoring Network: Grant Writing Uncovered

Hone your grantwriting skills and gain insights into the process of submitting an NIH research grant proposal by participating as a NRMN GUMSHOE mentee!

This program, sponsored by the National Research Mentoring Network and with support from Washington State University and the University of Colorado, is designed to enhance participants' career development, preparing them to meet each program's ultimate goal: the submission of strong research and research career development proposals for funding in the biomedical or biobehavioral sciences. Each GUMSHOE program focuses on a different population.

The populations the research focuses on include 1) American Indians, Alaska Natives, Native Hawaiians, and Other Pacific Islanders; 2) African Americans; 3) Hispanics or Latinos; 4) Rural communities; and 5) other pre-specified populations as resources permit.

Note: Applications are welcome from individuals from all backgrounds; you need not belong to a particular population in order to participate in any of the GUMSHOE cohorts.

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When: GUMSHOE is offered as a 6-month long program 3 times in 2016. Each program will hold a 3-day in-person kickoff event and will focus on a distinct population. Apply now for one or both of the next cohorts.

- <u>Population of Focus:</u> African American/Black populations
- In-person kickoff: September 28-30, 2016 in Detroit, MI
- Application deadline: September 5, 2016 at midnight CDT
- Population of Focus: Rural populations
- In-person kickoff: October 19-21, 2016 in Spokane, WA
- Application deadline: September 26, 2016 at midnight CDT

NRMN offers up to \$1,000 to support each participant's travel expenses related to attending GUMSHOE in-person sessions.

Applications are being accepted for both Fall 2016 sessions! For more information, and to apply, please click here.

University of Washington/Indigenous Wellness Research Institute (IWRI): Training. Ethics Training for Health in Indigenous Communities (ETHICS)

This program aims to strengthen research capacity and increase community involvement in NIH-funded research by developing a culturally-adapted ethical research training that is relevant and accessible to American Indian and Alaska Native communities. For more information, please contact goethics@uw.edu.

IV. FUNDING OPPORTUNITIES

EPA Tribal ecoAmbassadors Grant Program

Environmental Protection Agency (EPA): <u>2016-2017</u> Tribal ecoAmbassadors Grant Program. Supports environmental projects at Tribal Colleges and Universities (TCU) and partners the TCU participants of these projects with EPA scientists to study the environmental problems most important to the participating tribal communities. Deadline is <u>June 17</u>, <u>2016</u>. <u>Learn more</u>.

USDA, Community Connect Grants

This program helps fund broadband deployment into rural communities where it is not yet economically viable for private sector providers to deliver service.

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Eligible areas include rural areas that lack any existing broadband speed of at least 4 Mbps downstream and 1 Mbps upstream (download plus upload) is eligible.

Application due: June 17, 2016

For more information: Community Connect Grants | USDA Rural Development

Health Center Program, New Access Points Technical Assistance Funding Opportunity

The purpose of the Health Center Program New Access Point (NAP) funding opportunity is to improve the health of the Nation's underserved communities and vulnerable populations by increasing access to comprehensive, culturally competent, quality primary health care services. NAP funding provides operational support for new primary health care service delivery sites (i.e., new access points). A new access point is a new service delivery site for the provision of comprehensive health care services. Applicants must propose at least one full-time, permanent new access point site that has primary medical care as its main purpose.

Application deadline: June 17, 2016

More information can be found here: <u>Health Center Program New Access Points (HRSA-17-009)</u> Technical Assistance

V. CONTACT INFORMATION

National Center for Chronic Disease Prevention and Health Promotion Office of the Medical Director 4770 Buford Highway, MS F80 Atlanta, GA 30341 (770) 488-5131

http://www.cdc.gov/chronicdisease/index.htm

For Tribal Digest related questions, comments, or concerns please contact: Hannah Cain, Public Health Associate KZQ3@cdc.gov 505-232-9908

