



Ho-Chunk Nation



Department of Health

Annual Report 2022



Department of Health

Executive Director: Kiana Beaudin

Ho-Chunk Nation Department of Health Vision:
Building a strong mind, body, and spirit together.
Waza highwire (we care)

Ho-Chunk Nation Department of Health Mission Statement:

To promote a high quality of life with holistic health care to those we serve
with an emphasis on the traditional Ho-Chunk way of life;
and to empower each individual and family to make informed decisions regarding their present and future
health.

I. Accomplishments during the prior fiscal year:

- Behavioral Health
 - Ho-Chunk Nation Award for services outlined in GFO-SA20214URWSUS on January 20, 2021 (Revised) Urban Rural Women's Substance Use Services Grant. We will be designing this program around Hosto Pii Hoci. The intent is to have a safe place for women to stay while they wait to enter treatment. The women will also be able to return to strengthen their new foundation in sobriety for a greater chance of success. We plan to offer a number of groups on site utilizing the following curriculums specific to Native participants such as Positive Indian Parenting, Motherhood/Fatherhood is Sacred, Mothers of Tradition, Linking Generations and 12 Steps for Women, WhyTry, and the Matrix Model.
 - Tele-Health Services implemented for outpatient services with Behavioral Health & Substance Abuse Counselors due to the COVID-19 pandemic with continued use by our contracted Psychiatrist.
 - Continued award BH COVID-19 Response Grant awarded on February 1, 2021 in the amount of \$500,000. Supplementary award in the amount of \$1,240,510 for a total award of \$1,740,510.
 - Continued award SAMHSA Tribal Opioid Response Grant in the amount of \$488,435.
 - Continued award SAMHSA MAT-PDOA in the amount of \$1,050,000.
 - Annual Prevent Suicide Conference Cancelled due to the COVID-19 Pandemic.
 - Applied Suicide Intervention Skills Training (ASIST) continue in various communities with a total number trained to date of over 200. Although MSPI funding has ended trainings have continued with IHS funding.
 - Integrative team meetings resumed as hybrid (virtual and in person) in August 2021 for the House of Wellness and at Ho-Chunk Health Care Center (held on two separate dates). All medical, pharmacy, community health, and behavioral health staff meet on a monthly basis to discuss difficult cases to improve the welfare of the tribal member.
 - Virtual Coping Skills Groups (10 weeks duration) for Community Members & Staff, to provide coping skills to manage the changes related to the COVID-19 Pandemic.
 - Virtual Daily Mindfulness for staff to manage the changes related to the COVID-19 Pandemic.
 - Parent Support Group for staff to manage the changes in the household related to the COVID-19 Pandemic.
 - *July 1, 2021 through May 30, 2022 with FY ending June 30, 2026*

- The following is the number of tribal members that requested funding for inpatient treatment this includes detox, inpatient treatment, Transitional Living, Sober Living and outpatient for At Large, these will be further broken down. 42 treatment funding requests for a total of \$772,605.72 expended.
- The following is the number of tribal members that requested funding for Inpatient Treatment. 29 requests for a total of \$543,891.14 expended.
- Number of Individuals transitioned from Inpatient Treatment to Transitional/Sober Living: 8 requests for a total of \$56,516 expended.
- The following is the number of tribal members that requested funding for Outpatient Treatment. 2 requests for a total of \$26,210 expended.
- The following are the number of diagnosed clients with an addictive disorder, mental health diagnosis and dually diagnosed that were seen between July 1, 2020 and May 30, 2021 for FY ending June 30, 2021.

○ BH	○ 07/01/2020 - 05/30/2021	○ 07/01/2021 - 05/30/2022
○ total unique patients seen	○ 856	○ 440
○ total mental health patients/dual diagnoses	○ 634	○ 380
○ total alcohol dependence/abuse diagnoses	○ 348	○ 255
○ total opioid dependence/abuse diagnoses	○ 80	○ 72
○ total heroin	○ 14	○ 72
○ total cannabis	○ 231	○ 167
○ total meth	○ 97	○ 80
○ total other	○ 46	○ 4

○ Psychiatric Services Dr. Cullen	○ 07/01/2020 - 05/30/2021		○ 07/01/2021 - 05/30/2022	
○ total # kept appointments	○ 82		○ 74	
○ total unique patients seen	○ 48		○ 47	
○ Gender breakdown	○ Male 29	○ Female 19	○ Male 19	○ Female 28
○ Under 18 year of age	○ 16		○ 14	
○ Over age 18	○ 32		○ 33	

- Environmental Health

- The Division of Environmental Health (DEH) was a critical component in the COVID-19 response. Specifically, DEH worked on public information, creating response plans, and oversight of the Strike Team testing events. The Strike Team administered over 2,000 COVID tests in FY 22. DEH has been instrumental in the Health ICS structure and the community testing and vaccination events. EH has staff attending tribal, federal, state, and local calls/meetings to gather information regarding COVID-19.
- The DEH Injury Prevention program provided 233 car seats, 118 bike helmets, 118 sets of knee and elbow pads, and bike safety equipment for 6 Head Start centers to tribal members in FY 22. The Injury Prevention program also trained 7 Child Passenger Safety Technicians, held two car

seat check events, attended two health fairs and implemented the Buckle Bear car seat program for Head Start children. The DEH Injury Prevention program created 3 billboard campaigns for prevention of communicable and vector borne diseases.

- The DEH coordinated the following construction and maintenance projects in FY 22:
 - Hosto Pii Hoci remodeling project.
 - Tomah Health Office exterior remodeling project.
 - Ho-Chunk Health Care Center and Community Health office landscaping project.
 - Ho-Chunk Health Care Center and House of Wellness X-Ray room upgrade projects.
- The DEH Onsite Well and Septic Program completed construction projects through the IHS 121 grant and Health Third Party Revenue funding which included the construction of 2 wells and 1 septic system, resolution of 22 septic system emergencies, 12 out of water well emergencies, 15 well and pressure system repairs, installation of 5 water treatment systems and educated 39 Tribal members on well, septic, and water treatment systems.
- DEH continues to oversee the operation and maintenance of 7 wastewater treatment systems and 9 community water systems. During FY 22 no major outages occurred and all facilities received top scores during the FY 22 IHS Operation and Maintenance surveys.
- DEH replaced/installed new water meters for 75 homes in Cex' Ha Ci and Indian Heights communities in FY 22.
- DEH completed "Curb Stop Valve Location Surveys" for over 130 homes in Sand Pillow and Ho-Chunk Che Nunk communities.
- Water Quality monitoring was completed on (16) tribal streams during Ho-Chunk FY 22. Monitoring included chemical sampling, fish surveys, macroinvertebrate sampling and habitat assessments.
- DEH drafted a Two-Year Water Quality Assessment Report for all tribal streams monitored during the period January 1, 2020-December 31, 2021.
- Wetlands were delineated, classified and mapped by DEH on (6) parcels totaling approximately 230 acres in Monroe County during FY 2022. This information was incorporated into the Geographic Information System (GIS) to assist with land-use and project planning.
- Invasive plant management actions were completed by DEH on approximately 292 acres of tribal land in Shawano County during HCN FY21 using BIA Great Lakes Restoration Initiative grant funding.
- The DEH provided hands-on environmental education programs and/or presentations to approximately (243) tribal and non-tribal youth and adults on (10) occasions including UW Madison Indigenous Arts and Sciences Listening Sessions, Teejop Hocira Madison area community event, Monroe County Invasive Species Working Group Field Day and various presentations and field trips to Sacred Earth with participants associated with U.W. Madison Nelson Institute, Natural Resources Foundation, Sauk Prairie Conservation Alliance, Aldo Leopold Foundation, International Crane Foundation and school groups.
- The DEH completed (44) environmental reviews for development projects funded or facilitated by Indian Health Service, Housing and Urban Development, BIA Roads Program, American Rescue Plan funding and HHCDA.
- The DEH Brownfields Tribal Response Program completed field inventory of all tribal parcels with ingress and egress. Environmental hazards have been ranked and prioritized for clean-up as funding becomes available.
- DEH submitted a BIA Environmental Management Program funding application during the year and was awarded \$149,500 for the remediation of environmental issues on the O'Connor,

Kingsley Bend, Nine Eagles, Muscoda and multiple Jackson County parcels. Environmental clean-ups were completed on the O'Connor, Kingsley Bend and Nine Eagles parcels during FY 22.

- DEH facilitated the asbestos abatement and demolition of the Army's Environmental Laboratory building at the Sacred Earth parcel during FY 22.
- DEH stockpiled and facilitated the proper disposal of approximately 111 tons of weathered railroad ties at the Sacred Earth parcel during FY 22.
- The DEH Air Quality Program successfully operated two ambient air monitoring stations located near Tomah and Black River Falls that are designed to quantify the levels of Particulate Matter (PM2.5 and PM10) in the outside air. This data is being used to compare measured levels to the National Ambient Air Quality Standard for particulate matter.
- In FY 22 DEH drafted a Treatment as an Affected State (TAS) Application for authorities under 505(a)2 and Section 105 of the Clean Air Act.

- Finance

- Remained staffed and operational during the duration of the Covid-19 Pandemic while internally struggling to manage an increasing amount of Covid-19 infections within the Health Finance employee groups.
- Structured and administered multiple sources of Covid-19 funding to support clinical and other health programs for the people without audit finding and within federal and state allowability rules and regulations.
- Organized, Lead and Administered the Department of Health Information Systems rapid response to a network outage affecting all Nation enterprises and mandating comprehensive inter-divisional solutions.
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- Continued with internal training, report generation and the clarification of user access rights surrounding the Ho-Chunk Nation Infor Lawson Accounting system.
- Completed multiple contract agreements with additional managed care health and pharmacy insurance plans, this helps ensure and increase self-sustainability through the generation and collection of third-party revenues.
- The Health Information Systems Department updated internal Citrix licensing to streamline the online access to current health program staff and patients. Citrix provides a secure HIPAA compliant virtual connection between patients and providers.
- Provided all appropriate financial documents and mandated audit materials to the Accreditation Association for Ambulatory Healthcare regulatory inspectors to maintain Medicare and Medicaid participation.

- Medical Services

- After three years vacancy, in July Dr Ram Rizal joined the Health team as the Dentist for House of Wellness.
- In November, tribal descendent Dr. Thomas Walker onboarded to serve as the Medical Director for the Health Department Providers for six months. In May, Dr. Laura Pattison agrees to assume Medical Director position after Dr. Walker.
- In November, tribal member Dr. Alex Kivimaki onboarded to serve as a physician for the Ho-Chunk Health Care Center. He fills a two-year, physician vacancy.
- In December, inspection by Accreditation Association for Ambulatory Health Care. By February, both clinics received notice of their 8th three-year accreditation certification. Ho-

Chunk Health leads in longevity of retaining such certification amongst tribes in the Midwest region.

- By April, all HHCC and HOW providers were trained in the “Beginning at Birth” program under the Reach out and Read Program.
- Throughout the year, Medical Services Director gave cultural presentations to ProCrisis (Juneau, Sauk collaboration team of law enforcement), UW-Eau Claire School of Nursing, Pharmacy Division, and new hires in the Department of Health.
- Involved in Jackson County Servant Leadership Community seeks to build strategic plans to improve the communities in Jackson County.
- Established relationship with UW-Madison School of Medicine for Ambulatory Acting Internship (AAI) to host Medical students at the Ho-Chunk Health Care Center.
- Pharmacy
 - Continued playing an active role in COVID-19 efforts by administering vaccination, providing home COVID-19 tests and stocking and dispensing COVID-19 anti-viral medications.
 - Two pharmacy technicians became certified in administering immunizations, allowing for increased pharmacy vaccine administration of influenza and COVID-19.
 - After 2 years of COVID restrictions, medication assistance treatment (MAT) appointments doubled from October to May.
 - Contracted with a 2nd pharmacy wholesaler in order to increase medication availability in light of ongoing drug shortages, as well as increase cost effectiveness of medications dispensed by pharmacy.
 - Moved forward on planting the herbal medicine garden, a project that was put on hold due to the COVID pandemic.
 - Resumed community events such as Smoking cessation and Narcan community training. Also added Fentanyl test strip training as another tool to combat opioid overdose in the community.
 - Despite total prescription volume being lower (at the time this report was generated) compared to the previous fiscal year, the pharmacy revenue generated is similar to the previous fiscal year. See charts below.
- Public Health
 - The Public Health Division was newly developed during 2021-2022 fiscal year. This includes the addition of a new public health director.
- Quality Improvement
 - Helped develop and implement COVID-19 data dashboards and update each week
 - Continued to monitor the COVID-19 pandemic through vaccination, burden, and testing reports; spearheaded a long COVID (long hauler)/impact study among Ho-Chunk Tribal members living within PRCDA counties
 - Helped with the COVID-19 response including community testing and vaccinations.
 - Expanded the use and leverage of HealthStream for training and compliance
 - Participated in the review and approval of policies and procedures submitted to the Health Department committee
 - Conducted annual employee satisfaction survey to study employee satisfaction with the Health Dept.
 - Collected and reviewed vaccination records for all Health Department employees to ensure health of employees and patients
 - Tracked and reported all infectious and communicable diseases within the Health Department
 - Verified licensing credentials and background checks for Health Department staff as needed

- Monitored Patient complaints to ensure that concerns are addressed to meet care of patients
- Convened Quality Improvement meetings
- House of Wellness clinic designated as a satellite site for AAAHC accreditation purposes
- Maintained AAAHC accreditation for both clinic sites (HHCC and HOW)
- Resumed patient satisfaction surveys twice a year and distributed results with Health Accreditation Board
- Completed annual comprehensive Infection Control Risk Assessment and Plan
- Provide a central point for two-way communication between tribal, local and state health departments in WI, again, very important with the COVID-19 pandemic raging
- Continued a robust infection control surveillance program including all infectious and communicable diseases, hand hygiene, surgical site infection, and sterilization
- Continued to coordinate standardization infection control policies and practices across Health Department Divisions
- Developed several standardized skills competency checklists related to infection control
- Hired two (2) Infection Prevention/Employee Health RNs, one (1) at each clinic
- Conducted Workforce Development Survey with Health Department staff to update Health Department Workforce Development Plan
- Implemented Stay Interviews for Health Department
- Conducted Health Department divisions/program data gap interviews
- Community Health
 - The Community Health Division is proud of the many accomplishments of the various subdivisions within. Like many work units, the Community Health Division has adapted to several changes with the standard program service delivery models in order to keep our families and communities safe, but also serve the other important needs within our villages.
 - The first most notable impact is ensuring homes have been properly nourished through accessing national, regional, and statewide food banks. This has yield thousands of food boxes in excess of 1.5 million pounds of fresh food that found its way to thousands of tribal community homes.
 - Next, the Community Health Nursing team kept a priority of Tribal Member needs to which emergent services maintained while still adhering to precautionary guidelines issued by our Department's Incident Command System. This means critical needs were addressed along with routine testing and vaccinations both at an individual level and at public events. The subdivision maintains the critical health needs of our most vulnerable populations will remain at the top priority.
 - Food Distribution adapted to delivery systems by instituting a more broad "tailgate" system. Tailgates allow the squad to load the orders into a refrigerated vehicle and bring them to a local community instead of traveling to the headquarters in Black River Falls, WI. This keeps both cost and risk down and also increases our direct engagements in the communities we serve.
 - The Community Health Representatives have established a strong and highly trained team to address a number of issues plaguing our communities. These are not always as overt so much of the training centers on identifying the results of both the health and economic disparities. The hallmark of the Representatives is a caring approach yet attentive to many needs that often go unvoiced. This is important and one of the many successes that add to the overall success of the Community Health Division.
 - Health and Wellness has taken on a strong challenge to transition the government granting model(s) of health and diet education to be delivered through the lens of our Indigenous Foods systems. We have had the pleasure of gathering foods, preparing, preserving, and serving them in

the traditional fashion while also incorporating the most essential element of our people, the Ho-Chunk Language.

II. Pandemic problems and corrective actions taken:

- Space for staff is an ongoing issue as writing for grants that could potentially hire additional providers to meet the rising need for mental health providers in all areas.
- DEH has identified the Infor Lawson implementation as their largest challenge at this time. The main issue is that many vouchers are being processed on our end but checks are not being sent consistently to the vendors. This results in continual disconnect notices being sent by vendors. This is an issue as some of these notices affect our community water and sewer systems. If these services such as electrical, heat, and data are disconnected water and sewer services for tribal members may be affected.
- The second challenge would be the lack of a true Public Health Program to address the COVID-19 pandemic. The response to this pandemic has overwhelmed our entire Health Department staff due to lack of resources and staffing. Resources are now available but staff are tired and weary from doing double and triple duty. Federal funding has been made available to increase Public Health Program capacity. The Health Department has created this program and has hired a Public Health Director via grant funding. Having this program will be a huge help once it is fully developed and staffed.
- Another challenge that DEH is facing is the decrease in water and wastewater revenue due to the COVID shut downs/decreased commercial water use and the suspension of residential billing. The revenue generated by these services fund repair and maintenance of the water and sewer systems. With a lack of funding there are concerns of funding emergency repairs that may be needed in the future.
- Lastly, there was a lack of support from other Departments due to the 4-day work week of most other Department's staff. Areas of specific need are courier services between clinics, personnel assistance, contracting assistance, assistance from TOB Maintenance, and generally no support from other Departments on Fridays. This has since been addressed; however, some services such as courier services have not yet resumed.
- PP: With no applicants and no hires, No available community workers for continue COVID (Moderna & Pfizer) vaccinations. With the opening of clinic visits, No clinic staff for continue COVID (Moderna & Pfizer) vaccinations.
- CA: Medical Services office team assumed project for COVID vaccination mini-pods in the clinics. Pharmacy and same day providers stepped in to vaccinate after the WEAVR volunteers were no longer available.
- PP: Medical Service office team acquired and disbursed Home Test kits, then HC Health Department no longer are aware of patients testing positive and may be eligible for anti-viral medication acquired for our patient population.
- CA: Medical Services office outlined a new process to address those positive test cases from Home Tests for the medical clinic teams rapid test to confirm, telephone follow-up and possible issuance of the anti-viral medication.
- PP: Health wanted to survey former COVID positive community members to assess the possible long-haul effects experience for some. In return participants of the survey would receive a participation gift. Surveyors had no one to prepare gift reimbursements.

- CA: In late January, Medical Services office stepped forward to help with the reimbursements. As a result, from January to February, we went from processing about 100 invoices a month to well over 300 invoices a month and participants received their participant gift relatively quickly.
- Space for public health staff is an issue. Building the division will require additional staff members and space for current staff is already limited.
- We were fortunate to begin virtual outreach before the pandemic hit recognizing the importance of reaching all our communities. Platforms were researched and later became a part of the daily process to advance our curriculum and communication to a virtual setting. Unfortunately, virtual platforms are not a parallel setting for service delivery. Regardless, we were able to maintain the numbers of client reports for grant suitability through the technology, a feature not a lot of other Intertribal Offices were able to do.
- We also transitioned to a management model of remote workers. While it's not a new concept, moving over half the staff at least some parts of their schedule to "work from home" meant that a new way of evaluating employee performance and profession [work] integrity was a staple for daily operations. So, for a period, the actual work "product" was sought regardless of the hours worked.
- We, like many work units, were challenged with the greater needs of the Department and Nation with staff reassignments. Although we understood the need, taking staff from the routine duties creates a void that regardless of conditions, still needs to be filled. To correct this, management utilized the "other duties as assigned" feature of our job descriptions to reassign help, enlist outside support, or just do the jobs themselves.

III. Goals and strategies for the next fiscal year, recovery:

- Complete the policies and procedures as well as protocols for Behavioral Health to provide Intoxicated Driver Assessments at each of the seven outpatient offices. This can be also a 3rd party billing revenue for Behavioral Health.
- Develop and implement Intensive Outpatient Program (IOP) for patients that are not progressing in traditional weekly outpatient treatment: but do not need to a higher level of care, like residential, inpatient and/or hospitalization. The primary goal is to promote and support long-term recovery through the development of an ongoing plan for well-being. This can be also a 3rd party billing revenue for Behavioral Health.
- Develop and implement preventative programming for children and youth focusing on resiliency. This programming would include the Elementary School, Middle School, as well as High School populations. Some potential programming for each are as follows (please note not a comprehensive list):
 - Elementary School
 - Caring School Community Program
 - Classroom-Centered (CC) and Family-School Partnership (FSP) Intervention
 - Promoting Alternative Thinking Strategies (PATHS)
 - Skills, Opportunity, And Recognition (SOAR)
 - Middle School
 - Guiding Good Choices
 - Life Skills Training (LST) Program
 - Lions-Quest Skills for Adolescence (SFA)
 - Project ALERT
 - Project STAR

- The Strengthening Families Program: For Parents and Youth 10–14 (SFP 10–14)
 - High School
 - Life Skills Training: Booster Program
 - Lions-Quest Skills for Adolescence
 - Project ALERT Plus
 - The Strengthening Families Program: For Parents and Youth 10–14
- Working more broadly with families, schools, and communities, scientists have found effective ways to help people gain the skills and approaches to stop problem behaviors before they occur.
- DEH will continue to assist in COVID-19 response in regards to testing, vaccinations, media outreach, and incident command.
- The DEH has identified Environmental Public Health Tribal ordinances that require updates. The Environmental Health Program will update the existing Tribal Food Code and expand language to include mobile food trucks, and temporary food stands.
- The DEH will assist in the coordination of all efforts to complete the Public Health Accreditation Board ACAR. This will include a fully updated Community Health Assessment and updated Public Health Emergency Preparedness Plan.
- The DEH Invasive Species program will be inventorying an additional 1,500 acres of trust land in the Kickapoo Valley Reserve. This will build upon the existing inventory of over 5,000 acres.
- The DEH will continue to address remediation of environmental issues which will include the removal of abandoned mobile homes in Jackson County, clean up activities at the Muscoda farm, and the clean up of weathered railroad ties at the Sacred Earth parcel.
- DEH will seek funding from IHS to replace watermains in Ho-Chunk Che Nunk and Ho-Chunk Village and to rehab the hydro tank in Ho-Chunk village. These projects will cost approximately \$1 million.
- DEH will oversee the Ho-Chunk Health Care Center Nurses station/lab remodeling project.
- DEH will oversee the Ho-Chunk Health Care Center entrance sign upgrade project.
- Create new sources of funding and further leverage Covid-19 Funding to bolster Health Services to the people.
- Propose a legislative revisit to further review resolution 05-09-17 D which unbeknownst and without prior Health Department consultation removed the ability for the Department of Health to be self-sustainable.
- Create a deficiency-free financial audit environment and maintain our Self-Governance Status as an Indian Self Determination Act Title V Enterprise.
- Develop and implement strategies to increase the Health Department’s service line offerings via the New Public Health Division.
- Develop and maintain third-party payer contract agreements with both clinic and pharmacy operations
- Implement a streamlined billing process for specialized Diabetes Management supplies and patient education.
- Continue to update and utilize the Department of Health’s strategic plan to supplement current strategies which braid all Health divisions into one mission.
- Monitor spending within Health Department to ensure future sustainability if possible.
- Get back-on-track with inter-tribal networking and continuing education efforts for all Finance Department employees
- Take all precautions learned at the start of COVID-19 pandemic, to maintain full health care services for our patients in the clinics to the greatest extent possible:
- Hire a permanent Medical Director as a supervisor for the clinic’s providers.

- Hire a second, full-time dentist for the Ho-Chunk Health Care Center to improve oral health care in the largest tribal community area.
- Work on quality measures associated with tribal patients, to show the positive impact Health care has on tribal population.
- Opened 2nd optical exam room at HHCC that should increase ability to receive more patients for eye care.
- Ensure proper clinical training of nurses recently hired after loss of RN Jenny K after 10 years of service in November, loss of RN Kachina S after 5 years of service in March, loss of RN Alissa G after 11 years of service in May.
- Gain approval for purchase of Up-To-Date software for all providers in Health.
- Transition prevention-based public health programs from Community and Environmental Health to the new division
- Complete policies, procedures, and onboarding for the PH division to ensure a smooth transition for existing staff members from other divisions.
- PH will continue to support implementing COVID-19 testing, vaccinations, and education for the community
- PH would like to build the current division to include a health educator and health communications specialist as part of the division and to assist with COVID-19 recovery efforts.
- Continue to update Health Dept. Performance Measures with each Health Dept. division
- Implement expanded functions in HealthStream (checklists, tracking and individualized training)
- Develop position orientation, training and back-up manuals for each job/role in QI
- Continue to monitor quality improvement projects and peer reviews
- Continue to conduct annual audits of our programs
- Continue to review Patient Complaints to ensure patient health care satisfaction
- Continue annual employee satisfaction survey and distribute results with staff and work to address concerns with them
- Continue active participation in the Safety, Infection Control and Policies and Procedures committees
- Continue to verify licensing credentials and background checks as necessary
- Complete an updated Workforce Development Plan
- Obtain full PHAB accreditation
- Create and disseminate public notifications and education related to infection control
- Continue implementing Infection Control plan to reduce risk
- We are excited to enter into a more active year although we do approach with caution. The long-term effects of the pandemic has created administrative “triggers” which sometimes prevent long distance planning. Over the course of time, it’s hard to lock onto a vision that gives us a strong, positive outlook. This is why it’s important to acknowledge the teams who have maintained their duties throughout the pandemic because having been inhibited from caring for the people we are sworn to can be damaging.
- We look forward to implementing and prioritizing staff development to lead us in the post-pandemic world by allowing them the necessary experiences while adding the element of mental health training. This will be an overall benefit for all the work units in their service to the memberships.

IV. Alternative funding sources and partnerships:

- Continue to have working relationships and partnerships with the Department of Corrections; Jackson Co. for Kids, WhyTry, Native American Fatherhood and Families Association and other HCN departments.
- Continue to work with billing to streamline process to assure timely billing occurs for continued revenue.
- Certify community members to become Peer Specialist after which the Nation can apply for Comprehensive Community Services (CCS) which a CCS provider will receive full reimbursement for any Medicaid allowable program operation costs incurred on or after its DQA certification date.
- The DEH is managing 28 grants totaling approximately \$5.6 million and has not had any budget or programing auditing issues. These grants include funding for wells, septic systems, emergency repairs, clinic maintenance and improvement funding, community water and sewer upgrades, injury prevention, emergency preparedness, communicable disease prevention, COVID-19 response, invasive species, wildlife habitat protection, and EPA programs such as clean air, clean water, general assistance, and Brownfields.
- The DEH is continuously seeking new grant funding sources and will continue to do so in the future.
- The DEH oversees 10 additional budgets which include NPD, Health third party revenue, and 6 restricted accounts. In total, DEH oversees 38 budgets totaling approximately \$8.5 million annually.
- Continue partnership with Jackson County Servant Leadership.
- Continue partnership with Black River Memorial Hospital, Mayo Health Systems, Gundersen Health Systems, St Clare Hospital, and other local health facilities.
- Throughout the pandemic, the Community Health Division has expanded it financial, asset and supportive resources for further delivery of new services or capacity building. Although the division has been hindered by the unnecessary bureaucratic process and system, we have increased our intake of financial and assets nearly \$500,000 not to mention over 2.2 million pounds of food. None of which, required match grants or even in-kind delivery. We are very proud or our managers who recognized there are a variety of resources that help the greater cause. We look forward to our Nation to streamline grant processes so we can seek more viable grants.

V. Photographs of accomplishments, events, etc. Team members:



Inspection of Ho-Chunk Che Nunk wastewater treatment site



Buckle Bear



Car Seat check event



Hosto Pii Hoci new front porch



Clean up of the Sacred Earth parcel



Controlled burning at the Sacred Earth parcel



Controlled burning at the Sacred Earth parcel



Invasive Plant Management at Kingsley Bend Parcel-Dan Shawley (Environmental Technician)



Environmental Hazard Remediation at Kingsley Bend Parcel- Pit toilet demolition



Environmental Hazard Remediation at Sacred Earth Parcel- Lab building demolition



DEH facilitated wetland delineation training for the 11 Federally Recognized Tribes of WI in FY 22.







