Empowering Native Wellness

2018 ANNUAL REPORT
INDIAN HEALTH COUNCIL, INC.
IHC has been continuously accredited by the Accreditation Association for Ambulatory Health Care (AAAHC) since 2001. In Spring 2018, the clinic also received maximum three-year AAAHC accreditation as a Patient-Centered Home for both its Medical and Dental Departments. This combined prestigious status positions IHC among the pinnacle of healthcare facilities that serve American Indian/Alaska Native communities, and indeed, among mainstream community clinics, in the nation.

**About the Cover**

The photo features a traditional medicine rock donated by the Esther/Dan Calac family, which is situated in IHC’s Medical/Dental atrium. Showcasing varieties of sage used medicinally in Native cultural and wellness practices, the overall image represents the productive combination of western and traditional medicine. It celebrates the interconnectedness of elements around the grinding hole and their interdependence toward achieving the balance described in our Mission Statement.
A STATEMENT FROM OUR BOARD CHAIRMAN

As a consortium of nine individual local Tribes, Indian Health Council, Inc. aims to promote the health and wellness of Native communities throughout the region. In 2018, IHC made great strides in upholding the traditions and values of Native communities.

From bringing on a new CEO, Steve Gold; to introducing the new Dial-A-Script feature to streamline Pharmacy refills; to expanding the Patient Satisfaction/Engagement Telephone Survey, IHC had a productive year. These and other exciting changes and improvements will help us better serve our communities, and promote the health and wellness of current and future generations.

Robert H. Smith

A MESSAGE FROM OUR CEO

With 2018 behind us, a promising year in 2019, and our upcoming 50th Anniversary Celebration in 2020, I wanted to take this opportunity to send out a genuine “Thank You” to all of our members, partners, friends, family, Board members and employees at Indian Health Council. Without all of you and your support, we would not be where we are today, doing what we love. And more importantly, we would not have the opportunity to assist our Tribal members with improved access to care and improved health outcomes.

To Our Tribal Members and Communities

IHC provides our client base of over 6,000 Tribal members with an amazing array of health care services. Thanks to each of you for your loyalty and utilization of our services and especially to those who have provided feedback to us. The strides we have been able to make this past year are due in large part to our many members and their support.

Employee Team Members

Our team members run our operations, day in and day out. Each new day presents an exciting new opportunity or challenge and there is nothing insurmountable to each one of them. As one of the most efficient and effective teams of professionals around, there are no doubts that our organization will continue to flourish through 2019 and beyond. Thank you all for the hard work, new ideas and unrelenting dedication and determination in seeing us succeed and assisting our Tribal members to achieve improved health quality and outcomes.

To Our Board Members

Eighteen Board members and alternates support IHC operations throughout the year. There are a number of required meetings, policy reviews, clinic discussions, and board education throughout the year. It takes a special commitment to be on the Board of IHC. It also includes sharing information with each of the Tribal communities represented. IHC’s reputation flourishes on these relationships. Many thanks to our Board members for your commitment, reliability, quality of work, and service to our communities.

To Our Future and 50 Years of Operation

We are ready to face the future, continue to serve our communities, and improve the quality of care we provide with improved outcomes. We have a solid team in place, a loyal client base, and some of the best partners and professionals to help us along the way. This coming year will, again, be all about providing the best service possible and producing the most cost-effective results for each one of our communities and clients. Some of the main ways we will meet these goals include:

• Continuous quality improvement of our services, technology and equipment so we can continue delivering the best results possible.
• New partnerships to help IHC better serve its current clients and to encourage those not maintaining health visitation and updates to visit our providers.
• Even more helpful and targeted education and information to keep our services on the cutting edge.
• Continued education and research internally to keep our team sharp and knowledgeable.

We’re ready to help make a positive difference in the health and outcomes of our communities!

Steve Gold
In 2007, Whitney Baugher left her Cahuilla reservation in Riverside County to attend UCSD. In an experience that can be overwhelming for any student, especially one of a tiny cohort of Native students, Whitney found a sense of community through IHC’s CA-NARCH Student Development Program (SDP). Today, she serves her community at IHC.

The journey has not been without roadblocks, but the SDP provided a nurturing “family” connection and opportunities to advance her education and career.

Whitney confides, “I wasn’t always the best student, and struggled with depression and anxiety. SDP Coordinator Geneva Lofton-Fitzsimmons and the team kept me on track and focused. They were always on my side and encouraged me as I worked toward earning a degree.”

Whitney joined the IHC staff in 2015 as a PEI Health Educator in Health Promotion Services. In 2017, she was promoted to PEI Health Educator II and in 2018, promoted again to Domestic Violence/Sexual Assault Coordinator.

Whitney earned her B.A. in Psychology from UCSD in June 2019. She will pursue a Master’s in Social Work through SDSU. In addition, Whitney is a Certified Instructor in Adult and Youth Mental Health First Aid. She also provides suicide prevention trainings as both a SafeTalk Instructor and Question, Persuade, Refer Gatekeeper Instructor.

Whitney says, “I am so pleased to be here serving our Native community. Knowing that I can make a difference by helping others and giving back makes my work meaningful.”
**Medical** is a health program built out of a dream to bring a better life to Native Americans and it is a dream that is realized every day in the care we strive to provide. From newborns to elders in the community, personalized care is given across generations, helping one life at a time.

**WOUND CARE SERVICES MAKING A DIFFERENCE**

A patient who initially preferred to be seen by an outside provider turned 360 after we closed her large abdominal wound and stabilized her colostomy bag in one and a half months. Since then, patient has been compliant with her medical needs in IHC including her physicals, diabetes, and other chronic care management.

A couple of our patients surprised us with knee pads and head lamps to assist us in our wound clinic days because they see us on the floor doing wound care and using our iPhone for light especially to those wounds that are difficult to reach. This heartfelt gift showed that patients care about their caregivers.

A patient called us the next morning after his major transplant surgery to express his sincere gratitude. We were able to close his wound on time prior to his surgery to avoid postponement or delays to his surgery.

---

**45** 911 TRANSPORTS FROM IHC TO THE HOSPITAL

**61** BABIES DELIVERED AT HOSPITAL

**4,109** VACCINATIONS ADMINISTERED

**1,845** REFERRALS TO SPECIALISTS

**19,751** MEDICAL VISITS

**29,381:** Lab tests ordered

**1,760:** X-rays taken

**1,063:** Well Child Exams

Dan Calac, MD, Medical Director and Chief Medical Officer

---

5

---
The Dental Department strives to deliver comprehensive quality services in a friendly and caring environment. As a certified Dental Home, we provide both general and specialty care and are committed to educating and encouraging patients to achieve and maintain optimal oral health.

NATALIA OROSCO COMES FULL CIRCLE AT IHC

Every time Natalia Orosco of San Pasqual was featured in the IHC Newsletter for her academic achievements as a teenager, she sported a winsome smile. Now, as a Registered Dental Hygienist (RDH) at the clinic since 2011, she gives her clients bright, healthy smiles.

In 1995, Natalia’s answer to questions such as “Why is Drosophila melanogaster used for genetic studies?” helped her Orange Glen High School team get to the finals of the Inter-Tribal Science Bowl. She graduated in 1997 with a 4.1 GPA, armful of accolades, prestigious university acceptances and $10,000 scholarship based on her attainments, including working as a summer youth worker in IHC’s Behavioral Health Department. A recommender said, “Natalia is a person of high integrity, great patience and caring who has a strong connection to her Native American culture.”

Natalia graduated from UCSD with a B.A. in Human Development and minor in Health Care Studies. She went on to earn MPH and RDH degrees. She is married to a Mesa Grande Tribal member and has three children.

“Working at IHC is full circle for me,” Natalia says. “As far back as I can remember, I was a patient. The first thing I did at dental appointments was ask for a toothbrush, since I was usually rushing straight from school. I clearly remember Conchi Zuniga assisting Dr. Baker, Sr. on my ortho, so it is special now being co-workers with Conchi and Dr. Baker Jr. I remember lying back in the chair enjoying posters with inspirational sayings and little kittens on the ceiling. Now my children will grow up having similar positive experiences at our clinic and in our community.”

Carrie Lambert, DDS, Dental Director
Behavioral Health Services Department (BHD):
The BHD provides client-centered, co-occurring, recovery-oriented, trauma-informed, and resiliency-focused therapeutic and counseling services. BHD is committed to improving the well-being of the community through integrated clinical practice, education and cultural activities.

THE REZ BEATS MOVEMENT ENCOURAGES YOUTH:
"We want you to write, draw, build, play, dance and live as only you can." 
"The performances were amazing! People sang in their Native language, recited original poetry, rapped, and shared other talents. I was so inspired."  
- REZ Beats attendee

BHD recognized as 2018’s top-scoring organization in the country by Crossroads Group, a highly respected national healthcare organization that tallies customer service and quality.

Established Indigenous club at Valley Center Middle School.

Initiated transportation for transitional age youth, adult and elder clients to access BHD services

## BEHAVIORAL HEALTH SERVICES

Awarded 3-Year Mental Health Services Innovations grant from San Diego County to fund the Roaming Outpatient Access Mobile (ROAM) project to provide mental health and substance abuse services in a mobile unit for clients in remote areas

REZ Beats open mike nights with 307 participants hosted on local reservations

Coed Sweat lodge ceremonies facilitated

Men’s Drum Group Sessions

Community Nights offered to provide education on the risks and dangers of illicit substance use

4,985 Visits provided

6

11

3

Cheryl Pfent, Psy. D., Behavioral Health Director

2018 Indian Health Council, Inc. Annual Report
The staff is very friendly and talk to you like they really know you, like family and friends. Everything was good. They are my pharmacy.

- IHC Patient

**PHARMACY**

**AVERAGE 280 PRESCRIPTIONS FILLED A DAY**

*Pharmacy:* Fully stocked, well organized and professionally staffed by Pharmacists and Pharmacy Technicians, the Pharmacy coordinates with various healthcare providers to ensure optimum patient outcomes.

**TOP 5 Medications Dispensed**

1. Ibuprofen
2. Test Strips for Glucometer
3. Tramadol
4. Metformin
5. Albuterol Inhaler

**AUTOMATION**

Interactive phone system to streamline the refill process.

**26,376 CALLS RECEIVED**

**Pharmacist-Patient CONSULTATION**

- Name of your medication and what it is supposed to do
- How and when to take your medication
- Response, side effects, and possible interactions with your medication

**21% REDUCTION**

Reduction in opioid prescriptions filled between 2017 and 2018 with institution of a new policy effective 8/1/18 which limits the dispensing of opioid pain medications in excess of 90 morphine milligram equivalents (MME) daily

**LICENSED AS**

Licensed as a collector of unused or expired prescribed and over the counter medications

Ella Solis, PharmD, Pharmacy Director
Public Health Programs: Bridging the people to IHC services, resources, and personal wellness.

- IHC Client, A1C decreased from 6.9 to 5.8, lost 24 lbs. in 6 months.

- IHC Client, A1C decreased from 9.1 to 6.6 and lost 80 pounds in 2 years.

- IHC Client, A1C decreased from 6.3 to 5.8. Lost 35 lbs. in 6 months.

Angelina Renteria, BS, MA, Public Health Programs Director

2018 Indian Health Council, Inc. Annual Report
HEALTH PROMOTION SERVICES

What we do:
- Support Groups
- Targeted Outreach
- Intergenerational Events
- Classes, Trainings and Workshops
- Client Advocacy and Support Services
- Prevention education on mental health and substance use; life skills development

Thank you, IHC, for supporting our future leaders and helping our Native youth to be productive citizens of our Tribal communities by providing programs they can look back on when a temptation occurs and remember the consequences and effects.

-HPS Client

HPS provides culturally specific outreach, education, and prevention services along with resources to empower community members on a path toward healthy lifestyle choices.

4 Community partnerships established with local schools to implement programming.
98 Outreach and prevention education activities.
29 Tribal TANF clients receiving services.
82 Domestic Assault / Sexual Survivors served.
22 Trainings provided.
2 Performing arts community events planned by youth at La Jolla and Santa Ysabel with participants.
150 Pounds of unused or expired medications collected since program’s inception.
960 Individuals reached through Heart and Soul Soiree, Empowered Expressions Gathering, Suicide Prevention Campaign, Fall Festival, and Veterans Luncheon.

Beth Turner, MPH, Health Promotion Services Director
TFS works to protect the best interests of Indian children and the stability and security of families by offering an array of culturally specific strength-based services. Collaborating with tribal communities, supportive efforts are directed to maintain or reconnect children with their families and provide intensive case management, assistance, and resources.

**FOSTER CARE STATISTICS**

- In 1994, there were 489 Native children in Foster Care from 7 Tribes
- 6 were female

- In 2018, there were 17 Native children in Foster Care from 7 Tribes
- 11 were male

<table>
<thead>
<tr>
<th>Average Age</th>
<th>Average time spent in Foster Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>18 MONTHS</td>
</tr>
</tbody>
</table>

**Foster Care Statistics**

- **In 1994:**
  - 489 Native children in Foster Care from 7 Tribes
  - 6 were female

- **In 2018:**
  - 17 Native children in Foster Care from 7 Tribes
  - 11 were male

**FOSTER CARE STATISTICS**

<table>
<thead>
<tr>
<th>Average Age</th>
<th>Average time spent in Foster Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>18 MONTHS</td>
</tr>
</tbody>
</table>

**10 ICWA REUNIFICATION CASES INVOLVING 17 CHILDREN**

- **8** Living with Relatives
- **2** Tribally Approved Foster Homes
- **5** Non-Indian Foster Homes
- **2** Group Homes

**BY COUNTY:**
- 13 San Diego, 2 San Bernardino, 2 Riverside

**CASE MANAGEMENT OF**

- **33** At Risk Families through Child Protection Team to help overcome adversity
- **350** General Assistance Clients
- **37** Loving Solutions Parenting Classes
- **90** Foster Youth provided with gifts, crafts and dinner at the Annual Foster Youth Christmas Party

**19 INDIAN CHILD WELFARE ACT PERMANENT PLAN CASES INVOLVING 17 CHILDREN**

- **9** Tribal Customary Adoptions
- **9** Guardianships
- **1** State Adoption

**Karan D. Kolb, M.A. Psy., Social Services Director**

2018 Indian Health Council, Inc. Annual Report
**Supportive Services**

**Human Resources**
- 207 Employees
- 75 New Employees
- 71 New Hire Sessions Provided to Staff
- 1,810 Hours of Staff Training through Relias Learning System
- 75 New Employees
- 71 New Hire Sessions Provided to Staff

**Operations**
- 23 Fleet Vehicles
- 870 Rides provided to patients
- 172,775 Miles driven in the year
- $247,846 Spent on Facilities Maintenance
- 57,706 Sq. ft of facility space cleaned and maintained
- 6.7 Acres of grounds kept

**Information Technology**
- 6,600 Internal Workorders Completed
- Maintain, Support and Operate:
  - 45 Virtual Servers
  - 6 Physical Servers
  - 220 Computers
  - 60+ Tablets/Devices
- Utilized Cloud Infrastructure to Enhance Patient Applications

**Health Information Management**
- 63,328 Pages of clinical information scanned into Patient Electronic Health Records
- 1,164 Outside records requests processed for continuing care
- 500 Requests for patient information processed (personal requests, healthcare facilities, subpoenas)

**Business Operations**
- Patient Registration
- Eligibility & Resource Connection
  - 594 Medi-cal applications/renewals
  - 76 CalFresh applications/renewals
  - 5 Covered California applications/renewals

**Clinical Appointment Scheduling and Billing**
- 49,832 Appointments Scheduled
- 30,661 Claims Billed
Balance Sheet
as of December 31, 2018 (unaudited)

Assets
- Cash & Investments $15,180,085
- Receivables from services $790,897
- Grant Receivables $4,758,653
- Other Current Assets $649,868
- Property & Equipment $16,242,249

Total Assets $37,621,752

Liabilities & Fund Balance
- Liabilities
  - Accounts payable/Accrued expenses $1,388,198
  - Unearned Revenue $4,258,942
  - Investment in Grant property $16,242,249

- Total Liabilities $21,889,389

- Fund Balances
  - Unrestricted $15,732,363

Total Liabilities & Fund Balance $37,621,752

Income Statement
for the year ended December 31, 2018 (unaudited)

Revenue
- Indian Health Service Funding $12,684,900
- Grants $4,672,074
- Patient/Other Revenue $5,643,672

Total Revenues $23,000,646

Expenses
- Personnel $13,668,500
- Supplies $2,707,868
- Contracted Services $3,515,134
- Utilities $283,260
- Insurance $148,061
- Equipment-Purchases, repair, & maintenance $1,298,990
- Other Expenses $1,199,775

Total Expenses $22,821,588

Net Revenue $179,058
Grant funding allows Indian Health Council to expand services and provide innovative programming. This funding is a key component of our operations and helps to improve health outcomes of the community. We wish to thank our funders for their ongoing support.
Following my 2018 graduation from SDSU with an MPH, Epidemiology, I attended a UC Davis One Health course in Tanzania, then began a year-long post-baccalaureate program at NIH on my way to earning a PhD. Being part of CA-NARCH has been amazing. The staff has been so supportive and encouraging. They play a large part in my awesome past and future opportunities.

-Kelly Hagadorn, Rincon Band of Luiseno Indians

**IHC** is funded as a California Native American Research Center for Health (CA-NARCH) by Indian Health Service and the National Institutes for Health. Since its 2001 inception, this innovative partnership with these government entities and four area colleges – the first in California and a role model for the nation – has been dedicated to reducing health disparities in Native American populations and increasing the number of Native scientists and health professionals.

---

### CA-NARCH

**RESEARCH PROJECTS**

14 PROJECTS CONDUCTED OVERALL

In Fall 2018, two CA-NARCH VII research projects sunsetted: Prescription Opiate Painkiller Misuse (Pill Take-Back) and Healthy Native Nation (Fetal Alcohol Spectrum Disorders). Two new CA-NARCH X projects were initiated: Addressing HIV/STI Awareness and Prevention Among Rural American Indians and Healthy Native Nation Family Support Program. All projects involve and benefit local Native communities.

### STUDENT DEVELOPMENT PROGRAM

150 STUDENTS MENTORED OVERALL

Supported by robust mentoring, networking and professional development opportunities, Native students, including several from consortium Tribes, have graduated from college on their way to attaining MDs, PhDs and other advanced degrees. With federal funding ending in 2018, the SDP now operates via IHC support and recent generous donations including: Pauma Band of Luiseno Indians, $75,000; Pala Band of Mission Indians, $15,000; and San Manuel Band of Mission Indians, $50,000.

---

### CONNER WHITTEIN’S SUCCESS STORY

Three years ago, Conner Whitten (Pechanga Band of Luiseno Indians), a first-gen college student, was bartending while attending community college; unsure how to pursue his abiding interest in Neuroscience. He fortuitously connected with CA-NARCH. The experience was transformative.

Recently, Conner graduated with a B.A. in Psychology from California State University San Marcos, where he was one of only six students in the 3,800-member class to receive President’s Outstanding Graduate and Dean’s Award honors.

Armed with these and diverse other accolades, this stellar student was sought after by prestigious universities around the country. He elected to pursue a PhD in Psychological and Brain Science at the University of Tennessee.

Saying he has benefited greatly from the support of SDP’s Richard Armenta, PhD and other staff, Conner states, “I intend to keep working with CA-NARCH throughout my career. Having experienced the challenges of navigating through college and overcoming barriers, I want to become a mentor and role model for Native students so that they, too, can achieve a successful future in science.”
Indian Health Council, Inc. is a nine-reservation-consortium, healthcare facility providing a full spectrum of on-site and outreach health and wellness programs and services, from pre-natal to elder care, to 15,000 clients. Open Monday through Friday from 8:00 am to 6:30 pm, the clinic offers an after-hours care line, patient transportation and additional client-oriented services. Communication platforms include an interactive website, social media platforms and a quarterly newsletter.

With roots dating back to 1968 as the California Rural Indian Health Demonstration Project, Indian Health Council, Inc. was incorporated in 1970. IHC stands strong and continues to build resiliency as a part of growth and change. The organization is deeply committed to addressing community health needs and improving quality of life through the provision of a broad range of integrated services.

*It is not only possible to combine advanced healthcare with a culturally relevant approach; this synergy is essential to Empowering Native Wellness of each patient and the community.*