

SQUAXIN ISLAND TRIBE

WEST 81 HIGHWAY 108
SHELTON, WASHINGTON 98584
(206) 426-9781

RESOLUTION NO. 83-42

of the

SQUAXIN ISLAND TRIBAL COUNCIL

WHEREAS, the Squaxin Island Tribal Council is the duly constituted governing body of the Squaxin Island Indian Reservation by authority of the Constitution and Bylaws for the Squaxin Island Tribe of the Squaxin Island Indian Reservation as approved July 8, 1965, by the Under-Secretary of the Interior; and,

WHEREAS, the Squaxin Island Tribal Council, through the Squaxin Island Constitution and Bylaws, is charged with the duty of protecting the health, security and general welfare of the Squaxin Island Tribal Community members; and,

WHEREAS, the Squaxin Island Indian Tribe is a member of the Puget Sound Health Board whose primary purpose is to make known the health needs of the Puget Sound member tribes - to impact the decision making process of the Indian Health Service and the United States Congress in determining funding packages and establishing priorities for delivery of services to Indian tribes; and,

WHEREAS, the Squaxin Island Tribal Council supports the Puget Sound Health Board's Fiscal Year 1984 proposal to contract for the following activities:


1. Provide coordination and liaison between the member tribes and the Indian Health Service.
2. Coordinate/Facilitate bimonthly CHR training activities.
3. Tribal Resource Center.
4. Provide and facilitate provision of comprehensive up-to-date information on health issues to member tribes and Board members.
5. Maintain administrative systems to support health board operations.
6. Assist in improvement in organization and operation of contract health services for the Puget Sound tribes.

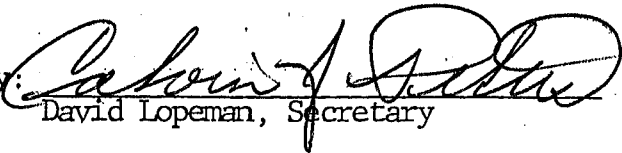
7. Watch dog Federal/Congressional activities dealing with tribal health programs that require tribal input.
8. Develop public awareness of the health needs of the Puget Sound tribes.

NOW THEREFORE BE IT RESOLVED, that the Squaxin Island Tribal Council requests the Portland Area Office - Indian Health Service Director Dr. C. S. Stitt, Jr., to fund the Puget Sound Health Board's FY 1984 proposal.

C E R T I F I C A T I O N

The foregoing resolution was duly enacted by the Squaxin Island Tribal Council in regular session - on this 27th day of July, 1983, by a vote of 2 FOR, 0 AGAINST, 0 ABSTENTIONS. A quorum was present.


David W. Whitener, Chairman

Attested By:  7207
David Lopeman, Secretary


Evelyn Allen, Vice Chairperson

cc: Puget Sound Health Board

PUGET SOUND HEALTH BOARD PROPOSAL

I. TITLE OF PROPOSED PROGRAM

"Multi-tribal Health Planning and Development"

II. PROPOSED START AND COMPLETION DATES

October 1, 1983 to September 30, 1984

III. DATE SUBMITTED

June 14, 1983

IV. TRIBAL ORGANIZATION

Puget Sound Health Board
Keller Kort
11002-2 Pacific Avenue
Tacoma, Washington 98444
(206) 537-8611

V. TRIBAL CONTRACT PERSONNEL

Karen Fryberg, Chairman
Tulalip Tribal Office
6700 Totem Beach Road
Marysville, Washington 98270

Marilyn A. Wandrey, Executive Director
Puget Sound Health Board
11002-2 Pacific Avenue
Tacoma, Washington 98444
(206) 537-8611

VI. TRIBAL AFFILIATIONS

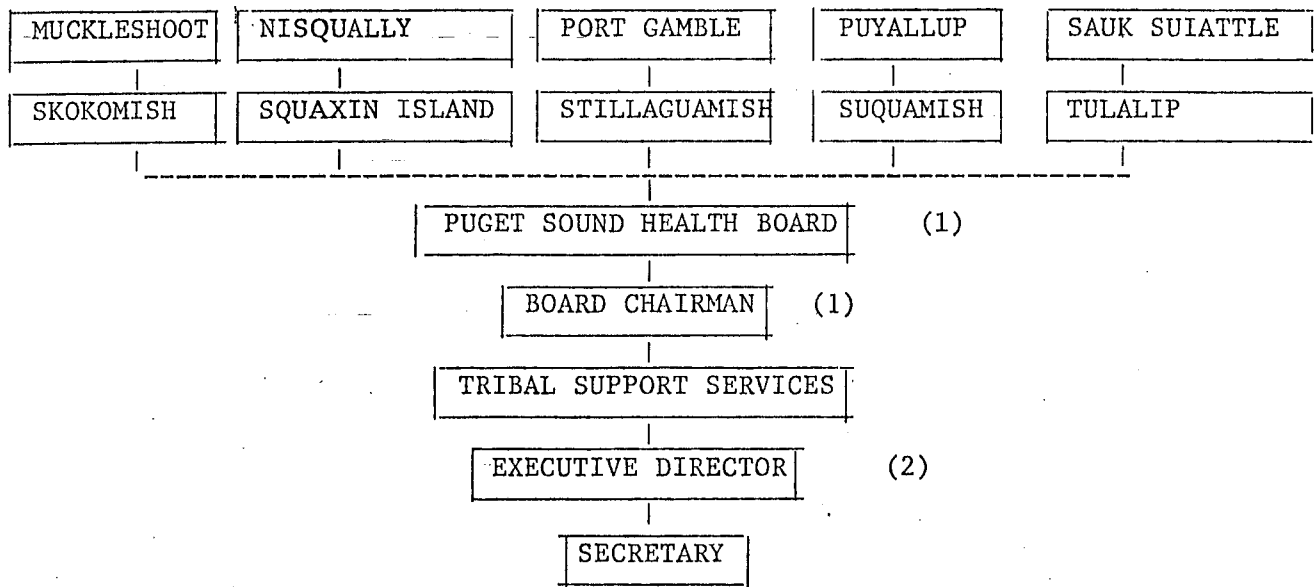
Muckleshoot Tribe, King County
Nisqually Tribe, Thurston County
Port Gamble Band of Klallams, Kitsap County
Puyallup Tribe, Pierce County
Sauk Suiattle Tribe, Snohomish County
Skokomish Tribe, Mason County
Squaxin Island Tribe, Mason County
Suquamish Tribe, Kitsap County
Tulalip Tribe, Snohomish County

VII. DESCRIPTION OF CONTRACTOR'S ORGANIZATION, STAFF AND RESOURCES

The Puget Sound Health Board is a duly sanctioned multi-tribal organization through the Board's Constitution and Bylaws endorsed by the Puget Sound tribes upon their attaining membership status.

The Board has successfully contracted with the Indian Health Service for the past seven years. Board program spot audits, close out audits and financial audits have received favorable recognition for its administrative systems, program procedures, staff knowledge and competencies in carrying out program deliverables utilizing approved systems and procedures, and staff's willingness and capabilities to develop and implement recommendations of audit findings.

ORGANIZATION CHART



ADMINISTRATIVE PROGRAM FUNCTIONS:

Coordination and liaison between the member tribes and Indian Health Service	1, 2
Facilitate health information to member tribes	2
Maintenance of administrative systems	2
Liaison with federal, state, and county representatives	2
CHR Training	2
Participation with the Northwest Portland Area Indian Health Board	1, 2
Technical Assistance and Training Coordination	2
Keeping abreast of federal and congressional activities pertaining to tribal health issues.	2

BOARD STAFF

The Puget Sound Health Board support staff (Executive Director Marilyn A. Wandrey has received extensive experience/training in administering the Board's current/prior Indian Health Service contracts and grants. Her knowledge and competencies are more than sufficient to meet the administrative program functions outlined above.

PROGRAM AUTHORITY ASSIGNMENTS

Contract Revisions, requests, prior approval and amendments

- Karen Fryberg, Chairman
- Marilyn A. Wandrey, Executive Director

Sign contracts and purchase agreements

- Karen Fryberg, Chairman
- Marilyn A. Wandrey, Executive Director

Sign Checks

- Karen Fryberg, Chairman
- Ray Ives, Secretary-Treasurer
- Marilyn A. Wandrey, Executive Director

Submit required reports

- Marilyn A. Wandrey, Executive Director

Notification of cancelled insurance

- Marilyn A. Wandrey, Executive Director

Custodian of Records

- Marilyn A. Wandrey, Executive Director

Handle complaints and approve personnel action

- Karen Fryberg, Chairman
- Marilyn A. Wandrey, Executive Director

TRIBAL ORGANIZATION

The ten Puget Sound Service Unit Tribes have come together and formed the Puget Sound Health Board to be representative of the tribes in working with Indian Health Service in developing and implementing health program policies; to keep the tribes aware of health legislation that will affect Indian tribes; and to identify common health interest to be dealt with in a joint effort.

CONSTITUTION AND BYLAWS AND ARTICLES OF INCORPORATION

See Exhibit I.

ELECTION PROCEDURES/VOTING

The Board meets monthly at which time the tribes send their respective tribal representative to attend the board meetings to provide direction of

Board activities. Each tribal representative has a vote on all board business. Each tribe, serviced by the Board, is a member by a tribal resolution.

Annual elections for board officers takes place with board members nominating at least two people for each position (3 positions) before casting their vote on the candidate of their choice. The three positions voted on are: Chairman, Vice-Chairman, Secretary-Treasurer. A quorum of 51% of the Board membership needs to be present at all Board meetings.

VIII. PERSONNEL SYSTEMS (Key personnel)

Marilyn A. Wandrey, Executive Director

Personnel policies and job descriptions - See Exhibit II.

IX. PROGRAM DESCRIPTION AND WORK PLAN

Population serviced - 23,000

OBJECTIVES/FUNCTIONS/NARRATIVE DESCRIPTION

The Puget Sound Health Board was organized and sanctioned by the eight Puget Sound Tribes in the Fall of 1972. Two Puget Sound tribes gaining federal recognition have since become members of the Board.

The function has been to promote the Federal responsibility for the health care and education of the Indian people.

The Board actively participates with the Indian Health Service, Puget Sound Service Unit, Portland Area Office and Indian Health Service Headquarters, to improve health services/health facilities serving the Puget Sound tribes.

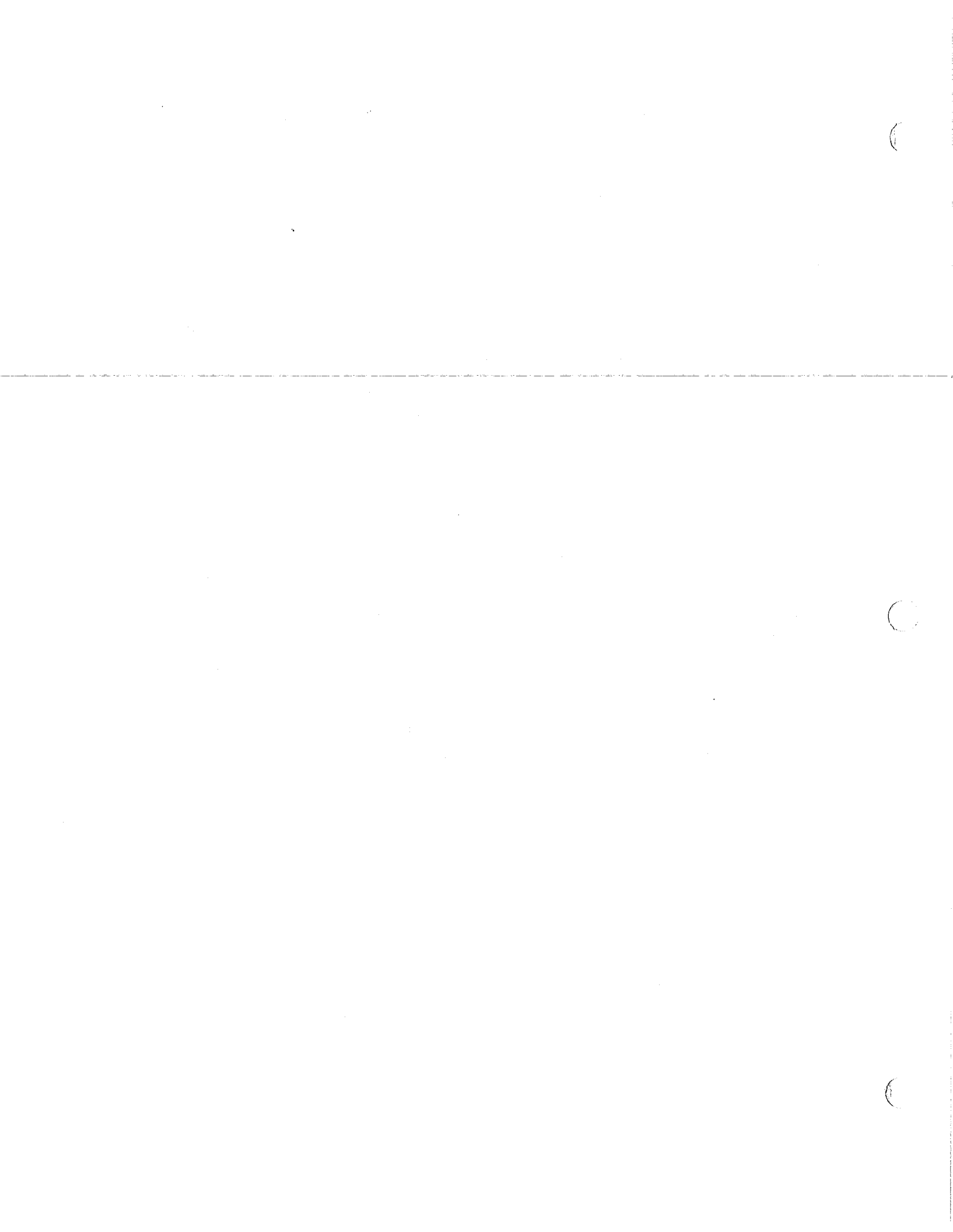
Functions the Board wishes to contract for:

1. Provide coordination and liaison between the member tribes and the Indian Health Service.
2. Coordinate/Facilitate bimonthly CHR training activities.
3. Tribal Resource Center.
4. Provide and facilitate provision of comprehensive up-to-date information on health issues to member tribes and Board members.
5. Maintain administrative systems to support health board operations.
6. Assist in improvement in organization and operation of contract health services for the Puget Sound tribes.
7. Watch dog Federal/Congressional activities dealing with tribal health programs that require tribal input.

8. Develop public awareness of the health needs of the Puget Sound tribes.

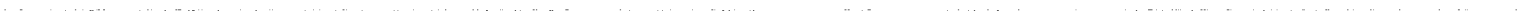
WORK PLANS AND MILESTONES

1. Provide coordination and liaison between the member tribes and the Indian Health Service.
 - a) Maintain/improve a communications network between the ten Puget Sound tribes and the Indian Health Service.
 - b) Monthly Board meetings (except for July and December) for the continuation of the tribes mutual agreement in dealing with common problems, coordinating and consolidating efforts which can best be dealt with jointly, and joining together with Indian Health Service in coping with ways of improving health services to Indian people.
 - c) Coordinate/facilitate monthly training sessions (requested by Board members) to be part of the monthly Board meetings.
2. Coordinate/Facilitate Bi-Monthly Community Health Representative Training Activities.
 - a) Assess Community Health Representative training needs of the Puget Sound tribes.
 - b) Coordinate and facilitate bi-monthly training activities utilizing Board and other training resources, eg., Indian Health Service, State and County health agencies.
3. Tribal Resource Center for the purpose of:
 - a) Promote health maintenance through holistic/traditional health concepts utilizing Indian Health Service, Puget Sound Health Board and community resources.
 - b) Provide/coordinate technical assistance requirements for member tribes and tribal health organizations, as requested, to promote realization of individual tribal health objectives and priorities.
 - c) Assist member tribes in development/enhancement of tribal health boards and committees. To promote maximum tribal participation in the health delivery systems to tribes.
 - d) Coordinate existing/developmental training resources within the Indian Health Service/other Federal agencies to tribes wanting assistance in meeting the mandates of 638 to man and manage their own programs.



- e) Provide/coordinate health service related training upon request, utilizing internal/external sources.
4. Provide and facilitate provision of comprehensive up to date information on health issues to member tribes and Board members:
 - a) Distribution of current pertinent health service delivery, management and planning information to member tribes as received through the Indian Health Service; Area/National Indian Health Board, Federal/State/County health agencies, Board periodicals, etc.
5. Maintain administrative systems to support Health Board operations.
 - a) Provision of staff to do staff work on Board decisions, maintenance of files and records keeping systems, supervision of staff time, and assisting in provisions of contract requirements.
6. Assist in improvement in organization and operation of contract health service for the Puget Sound Tribes.
 - a) Continued direct dialogue between the Indian Health Service and Board members/staff on problems tribes encounter with the Indian Health Service - Contract Health Care Program.
 - b) Continued Board tribal advocacy to the Indian Health Service at the area and headquarters level in regards to unresolved issues with the contract health care program at the service unit level.
7. Watch dog Federal/Congressional activities dealing with Tribal Health programs that require tribal input.
 - a) Provide direct contacts with tribes when special notification are sent to tribes in regards to Federal/Congressional actions that require tribal responses within a specified time.
 - b) Poll tribal representatives and provide tribes with a draft tribal response to proposed rule making/regulations pertinent to tribal health issues when the response period is limited/notification is late getting to the tribes.
 - c) Make tribal desires/needs known to the Indian Health Service, Congressional representatives and other officials as deemed necessary.
8. Develop public awareness of the health needs of the Puget Sound tribes.
 - a) Board members/staff participation in Northwest Portland Area Indian Health Board quarterly meetings.
 - b) Promote maximum Puget Sound tribal input/tribal advocacy into the health board advisory system to the Indian Health Service, i.e., tribal health committees; Puget Sound Health Board; Northwest Portland Area

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Indian Health Board; the National Indian Health Board.

- c) Actively participate in service unit management review and service unit zero based budgeting process.
- d) Participate, when deemed necessary in service unit staff meetings.
- e) Maintain communications with state, county, city and other related agencies in promoting health needs of the Puget Sound Tribes.

TASK DOCUMENTATION

1.
 - a) Correspondence/phone logs and related reports.
 - b) Monthly Board meeting minutes and agendas.
 - c) Board meeting minutes and facilitated training activity.
2.
 - a) Correspondence, phone log and Board training agendas.
 - b) Community Health Representative training evaluation completion forms.
3.
 - a) Correspondence, board meeting minutes and joint Puget Sound Service Unit/Board Planning Committee minutes.
 - b) Correspondence, telephone log, and meeting notes.
 - c) Training agenda and evaluations.
 - d) Correspondence, phone logs and meeting notes.
 - e) Correspondence, phone logs and meeting notes.
4.
 - a) Correspondence logs.
5.
 - a) Employee records, office administrative/procedures manuals and correspondence logs.
6.
 - a) Board meeting minutes and telephone logs.
 - b) Correspondence logs, resolutions and board meeting minutes.
7.
 - a) Telephone log, correspondence and meeting notes.
 - b) Telephone log and draft resolutions.
 - c) Correspondence and resolutions.
 - d) Meeting notes.
 - e) Correspondence and meeting minutes.
8.
 - a) Board meeting minutes
 - b) Correspondence and board meeting agendas.

WORK PLAN AND MILESTONES CHART

See Attachment.

X. EVALUATIONS

- 1) Quarterly meetings with Board Chairman, Board staff and Board Contract-Project Officer to assess program progress and to determine necessary changes deemed necessary.
- 2) Performance evaluations of new key personnel are done the first 30 days, again 60 days later, and annually thereafter - by their respective supervisors.
- 3) By above committees' quarterly assessments or if resources are available - an outside consultant/committee to review and assess program credibility.

XI. EQUIPMENT AND FACILITIES

Major equipment needed to carry out the Board's program operations have been purchased under prior contracts. Rent/leasing copy machine an ongoing cost to the Board for the large mail outs to the tribes in facilitating health information.

Board office space is an ongoing need as the Board does not have facilities of its' own.

The Board had gone through an identity crises, along with other inherent factors, when it was officed in an Indian Health Service facility and later a tribal facility. The Board's decision was to seek office space of its' own.

The Board's offices adequately serves the Board's program purposes of a central location site to hold Board meetings/committee meetings; Tribal Resource Center for technical assistance and training activities; parking; filing; copying; collating for mail outs; etc.

XII. FEDERAL EMPLOYEE ASSIGNMENT

N/A

XIII. TRAINING AND TECHNICAL ASSISTANCE

Technical assistance and training requirements contemplated to be filled by Indian Health Service consultants and technical specialists include:

<u>1. Puget Sound Service Unit:</u>	<u>Man-days</u>
Health Service Administrator, Nicholas Redeye	12
Health Planner, Ernie Kimball	6
Contract Health Care Staff	6
Steve Werelaus	
Anna Matte	6
Other	6
 <u>2. Portland Area Office</u>	
Area Director, Dr. C.S. Stitt, Jr	2
Program Operations, Bill Steeler, AAD	1
Planning & Evaluation, Tom Seidl, AAD	1
Community Resources, Tom Austin, AAD	1
Quality Assurance, Ron Gilbert, AAD	1
Administrative Services, James Thomas	1
Contract Health Services, Iona Hansel	1
Human Resources Services, Robert Batchelder	1
Financial Management Services, John Cordova	1

	<u>Man-days</u>
3. <u>Rockville Headquarters</u>	
Director - Dr. Everett Rhoades	1
Staff	2
4. <u>ORD - Tribal Management Resource Center</u>	
Director, Jack Knight	6
Chief Contracts and Grants Assistance Services, Bill Katzel	6

XIV. INSURANCE COVERAGE

Enclosed bonding (employee dishonesty) Coverage.

Need to purchase fire/contents/liability insurance when contract awarded.

XV. ADVANCE PAYMENT

The Board will request advance payment to enhance the efficiency of Board office operations as the Puget Sound Health Board has no funds of its own.

XVI. TRIBAL CLEARANCE

The request for renewal of the Puget Sound Health Board's contract has been submitted to each member tribe. (see attached proposal cover letter).

Respectfully submitted;

Marilyn A. Wandrey
Executive Director

WORK AND TIME SCHEDULE

Δ = COMPLETION DATES

Outline Principal Goals or Objectives (Show Sub-goals and sub-objectives under each principal goal or objective)	Target Date in Months after Contract/Grant												
	1	2	3	4	5	6	7	8	9	10	11	12	
7. Watch dog Federal/Congressional activities dealing with Tribal Health programs that require tribal input.		X											
a) Provide direct contacts with tribes when special notification are sent to tribes in regards to Federal/Congressional actions that require tribal responses within a specified time.				X		X		X		X			
b) Poll tribal representatives and provide tribes with a draft tribal response to proposed rule making/regulations pertinent to tribal health issues when the response period is limited/notification is late getting to the tribes.	X		X										
c) Make tribal desires/needs known to the Indian Health Service, Congressional representatives and other officials as deemed necessary.			X			X			X				X
8. Develop public awareness of the health needs of the Puget Sound tribes.													
a) Board members/staff participation in Northwest Portland Area Indian Health Board quarterly meetings.	X			X			X			X			
b) Promote maximum Puget Sound tribal input/tribal advocacy into the health board advisory system to the Indian Health Service, i.e., tribal health committees; Puget Sound Health Board; Northwest Portland Area Indian Health Board; the National Indian Health Board.	X	X	X	X	X	X	X	X	X	X	X	X	X
c) Actively participate in service unit management review and service unit zero based budgeting process.						X							
d) Participate, when deemed necessary in service unit staff meetings.				X				X					X
e) Maintain communications with state, county, city and other related agencies in promoting health needs of the Puget Sound Tribes.		X			X			X			X		

APPLICANT				
SUMMARY BUDGET FOR THIS PERIOD		TOTAL AMOUNT REQUIRED	SOURCE OF FUNDS	
FROM	THROUGH		APPLICANT AND OTHER	REQUEST FROM IHS
1. DIRECT LABOR (SALARIES AND WAGES)		33,462.00		33,462
2. FRINGE BENEFITS @18%		6,023.00		6023.0
3. MATERIALS AND SUPPLIES		600.00		600.0
4. TRAVEL		2,500.00		2500.0
5. CONSULTANT FEES		180.00		180.0
6. SUBCONTRACTS AND PATIENT CARE				
7. EQUIPMENT		1,968.00		1968.0
8. CONSTRUCTION				
9. OTHER DIRECT COSTS		7,744.00		7744.0
10. INDIRECT COSTS (%)				
11. TOTAL COSTS		\$52,477.00	\$	\$52,477
12. SOURCES OF FUNDS (APPLICANT AND OTHER)				
A. APPLICANTS FUNDS				
B. OTHER SOURCES (IDENTIFY EACH SOURCE SEPARATELY)				
C. PAYMENT FOR SERVICES PROVIDED BY PROJECT (FEES, COLLECTIONS, ETC.)				
(1) TITLE XIX (MEDICAL & DENTAL)				
(2) OTHER				
TOTAL		\$	52,477.00	

APPLICANT

DETAILED BUDGET FOR THIS PERIOD (DIRECT COSTS ONLY)	ANNUAL SALARY RATE	NO MOS BUDG	% TIME	TOTAL AMOUNT REQUIRED	SOURCE OF FUNDS	
					APPLICANT AND OTHER	REQUESTED FROM IHS
	(1)	(2)	(3)	(4)	(5)	(6)
1. DIRECT LABOR (SALARIES & WAGES)						
Marilyn A. Wandrey , Executive Director	23,462.00	12	100	23,462.00		23462.0
Secretary	10,000.00	12	100	10,000.00		10000.0
CATAGORY TOTAL				\$ 33,462.00	\$	\$ 33462
2. FRINGE BENEFITS (RATE <u>18</u>)				6.023.00		6023
CATAGORY TOTAL				\$ 39,485.00	\$	\$ 39485

APPLICANT			
DETAILED BUDGET FOR THIS PERIOD	TOTAL AMOUNT REQUIRED	SOURCE OF FUNDS	
	(4)	APPLICANT AND OTHER	REQUESTED FROM IHS
		(5)	(6)
3. MATERIALS AND SUPPLIES	600.00		600.00
CATAGORY TOTAL	\$ 600.00	\$	\$ 600.00
4. TRAVEL			
Executive Director Travel	1500.00		1500.00
Board Member Travel stipend	1000.00		1000.00
CATAGORY TOTAL	\$ 2500.00	\$	\$ 2500.00
5. CONSULTANT FEES			
Accounting Service	180.00		180.00
CATAGORY TOTAL	\$ 180.00	\$	\$ 180.00

APPLICANT			
DETAILED BUDGET FOR THIS PERIOD. (CONTINUED)	TOTAL AMOUNT REQUIRED	SOURCE OF FUNDS	
	(4)	APPLICANT AND OTHER (5)	REQUESTED FROM IHS (6)
6. SUBCONTRACTS AND PATIENT CARE			
CATAGORY TOTAL	\$	\$	\$
7. EQUIPMENT Lease of Savin Copier	1968.00		1968.00
CATAGORY TOTAL	\$ 1968.00	\$	\$ 1968.00
8. CONSTRUCTION			
CATAGORY TOTAL	\$	\$	

APPLICANT

DETAILED BUDGET FOR THIS PERIOD (CONTINUED)

TOTAL
AMOUNT
REQUIRED

SOURCE OF FUNDS
APPLICANT
AND OTHER
REQUESTED
FROM IHS

(4)

(5)

(6)

9. OTHER DIRECT COSTS

Rent @ 400.

4800.00

4800.00

Insurance Contents

160.00

160.00

Insurance Bonding

254.00

254.00

Telephone @ 175/mo

2100.00

2100.00

Postage @ 33.33/mo

400.00

400.00

Bank Charges

30.00

30.00

CATAGORY TOTAL

\$ 7744.00

\$

\$ 7744.00