



# EASTERN BAND OF CHEROKEE INDIANS TRIBAL HEALTH IMPROVEMENT PLAN (THIP)

NIHBTALC

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# Objectives

- Describe the history of EBCI's Tribal Health Improvement Process (THIP) and its place in the Tribal health improvement cycle
- List achievements and challenges to date in the THIP

# Eastern Band of Cherokee Indians

- 15,300 members
- Western North Carolina: Qualla Boundary, Snowbird, Cherokee Community
- Tribal lands in 6 counties
- Economic base: Primarily tourism (Great Smoky Mountains National Park), gaming (Harrah's Cherokee Casino Resort and Valley River Casino), small business







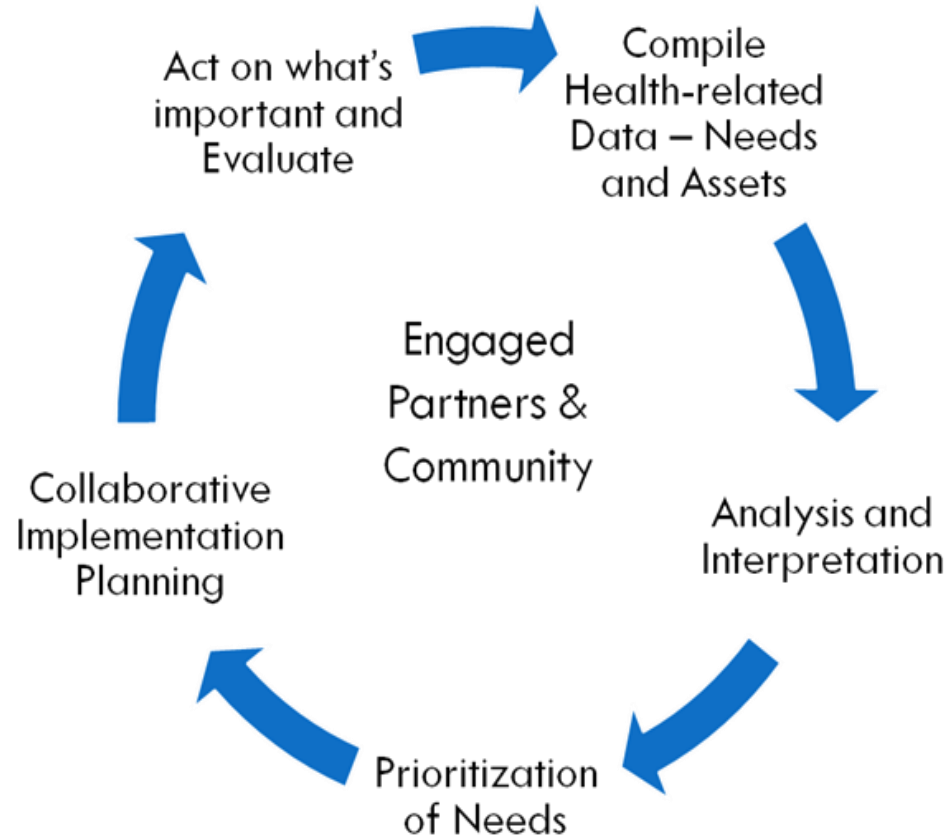


# EBCI Public Health and Human Services Division

- Evolved from “Health Services Delivery” — IHS model
- Shared Public Health functions with partner counties
- Cherokee Health System: PHHS plus Cherokee Indian Hospital Authority
- 2012: directive from Principal Chief to take on all human services from counties
- 2016: Human Services operational



# EBCI's Tribal Health Planning Process



# Steering Committee

- Public Health
- Human Services
- Hospital
- Health Education
- Behavioral Health

# MAPP



# THIP

- Planning for THIP sustainability
  - Inviting a wide range of participants
  - Asking for membership commitments
  - Foreseeing attrition
  - Providing a timeframe and map (MAPP)
    - Expectation of quarterly meetings
      - Team meetings in between
      - Annual meeting with reports from Teams on progress toward objectives
  - Providing at each meeting a training or informational component of interest to participants

# THIP

- Kickoff meeting: 30-40 participants
- Series of meetings that determined key issues:
  - Diabetes
  - Depression
  - Substance Abuse
- Formation of teams for each issue
  - Identified lead and support member

# THIP Process

- Charge to teams:
  - Define your issue
  - Develop SMART objectives
  - Develop measurable activities for each objective
  - Assign timeframe and accountability

# Example

## Depression

- **GOAL:** To improve mental health by recognizing the impact of depression on the community.
  - **OBJECTIVE:** Increase the number of visits to behavioral health providers in all programs and agencies that serve EBCI by 5% from baseline over the next 3 years.
    - **ACTIVITY:** Determine baseline number of visits.
    - **ACTIVITY:** Increase follow-up for depression screens and diagnoses, including BH visits, referrals, and other follow-up options.

# Moving into Implementation

- Teams identified:
  - Strategies
  - Best people/ groups to implement
  - What else was needed to implement



# Accomplishments

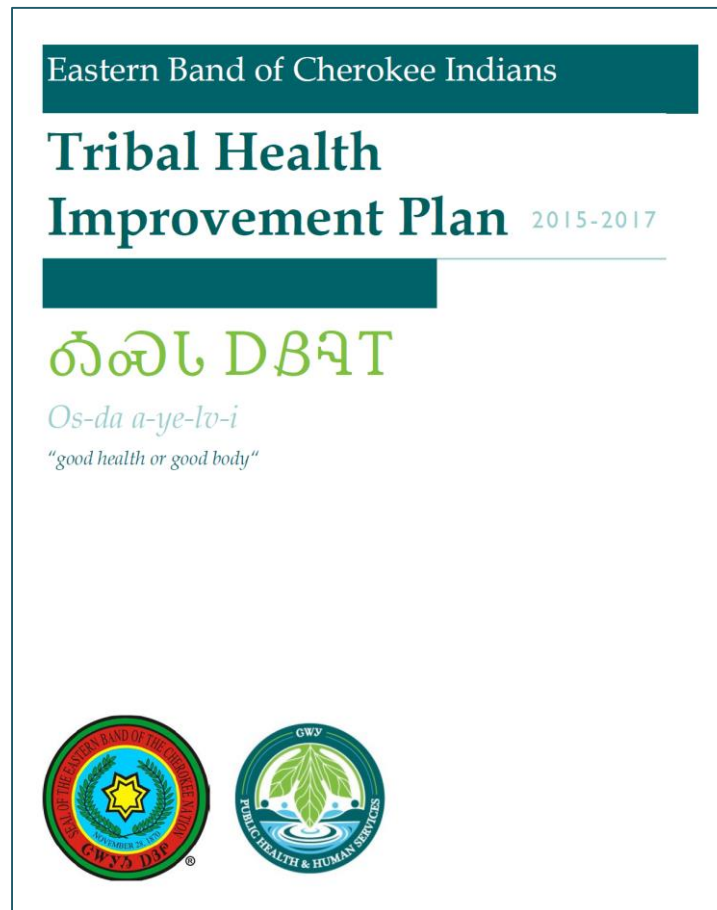
- Improved working relationship between PHHS and the hospital, Behavioral Health, and schools
- Alignment of THIP goals with hospital QI objectives
- PHAPs awarded
- Improved collaboration with counties
- Collaboration with TEC and regional health consortium
- Learning important, actionable things we never knew
- Actual progress on meeting the objectives

# Challenges

- Maintaining participation in THIP
- Changes in support staffing
- Competing Tribal and divisional priorities (Human Services)
- Changes in Tribal Executive and Council

# Please visit our THIP

- [www.cherokee-phhs.com](http://www.cherokee-phhs.com)



# Acknowledgments

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- EBCI Tribal Executive and Legislative Branches, Tribal Health Board
- Tribal friends and confidants



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Thank you!

Questions?

Comments?