

Mille Lacs Band of Ojibwe Presentation to Indian Health Services





NE IA SHING HEALTH CENTER

18562 MINOBIMAADIZI LOOP, ONAMIA, MINNESOTA



Chief Executive Melanie Benjamin

Chief Executive Melanie Benjamin leads the Executive Branch of tribal government, which implements Band laws and programs. As Chief Executive of the Non-Removable Mille Lacs Band of Ojibwe, Benjamin is statutorily responsible for conducting external relations on the Band's behalf with all other governments and political subdivisions.

Benjamin was first elected Chief Executive in 2000, and was re-elected in 2004, 2008, 2012 and 2016.

Other positions Melanie has held include:

- Commissioner of Administration 1989 -1997
- Senior Vice President of Administration and Finance at Grand Casino Hinckley
- Interim Director of the Pine Grove Leadership Academy
- American Indian Law Resource Center
- Minnesota Board on Aging
- Women Empowering Women for Indian Nations
- U.S. Attorney General's Tribal Nations Leadership Council,
- National Indian Gaming Association (alternate)
- Past Secretary and Vice Chair for the Minnesota Chippewa Tribe

Benjamin earned a master's degree in education from the University of Minnesota Duluth and a Business Administration degree from Bemidji State University.

The daughter of the late Frances Reynolds and George Staples, Benjamin is the mother of Clayton (Candace) Benjamin and the proud grandmother of 11 beautiful grandchildren and a member of the drum society.

The Mille Lacs Band of Ojibwe Reservation

The Mille Lacs Reservation (Misi-zaaga'iganiing) consists of three districts composed of several distinct communities that have existed in East Central Minnesota for hundreds of years. In each community, the Band has created jobs for Band members and non-members alike, and also provides a variety of programs and services to Band members.

District I

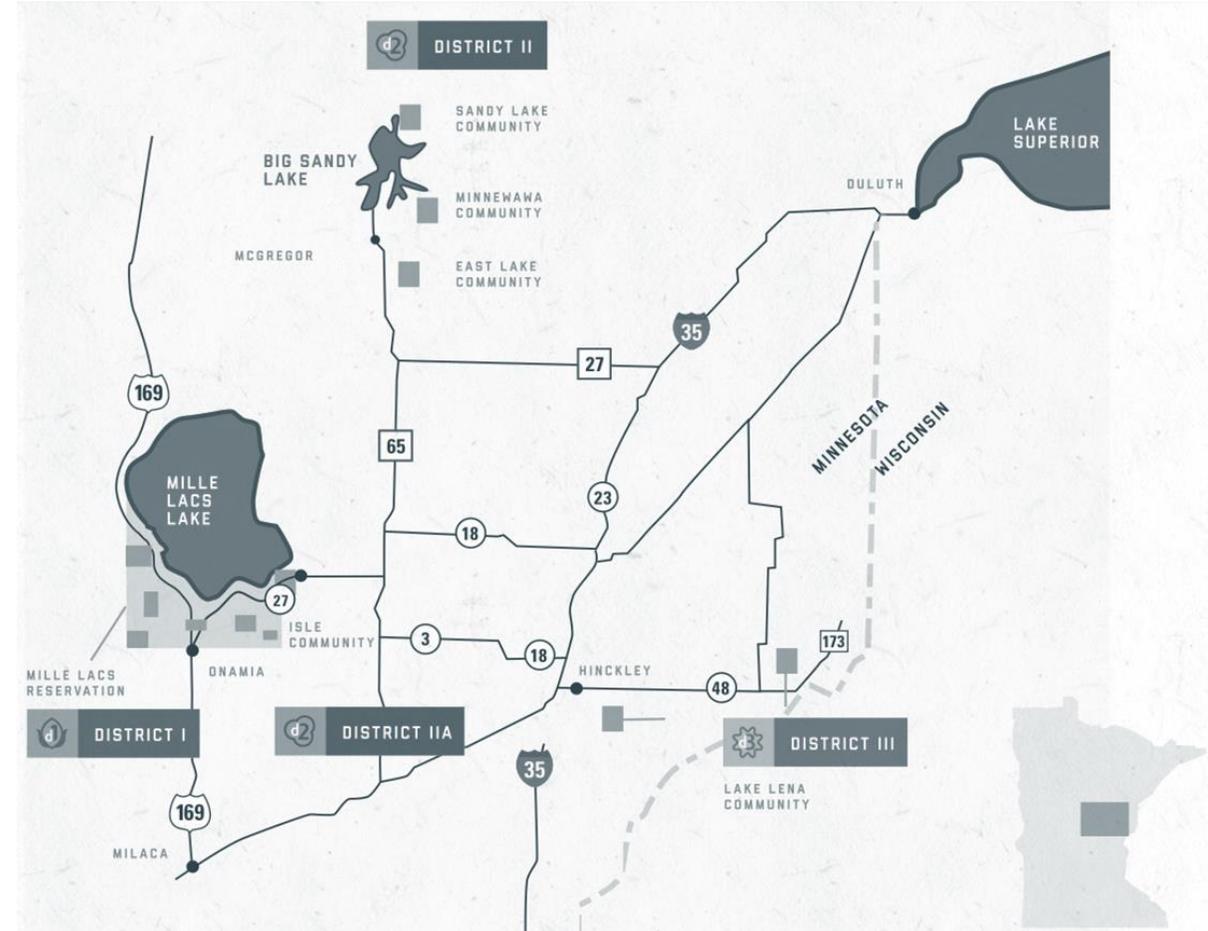
District I includes the main reservation area on the west side of Mille Lacs Lake, sometimes referred to as "Neyaashiing," or "The Point" in the Anishinaabe language.

District II

District II includes the communities in Minisinaakwaang (East Lake), Sandy Lake, and Minnewawa near McGregor, as well as the community of Chiminising in Isle on the south side of Mille Lacs, which we call District IIa.

District III

District III includes the Aazhoomog (Lake Lena) community near the St. Croix River east of Hinckley, as well as a large community of Band members living in Hinckley.



MLBO Department of Health and Human Services

- Health Services
- Substance Use Disorder Services
- Mental Health
- Community Support Services
- Public Health Services
- Family Services
- Quality and Compliance
- Crisis Resources

The MLBO Department of Health and Human Services strives to make high-quality health and social programs and services more accessible to everyone in the community. The department is overseen by the Commissioner of Health and Human Services, who is appointed by the Chief Executive and ratified by the Band Assembly. The current Commissioner is Nicole Anderson.

The Mille Lacs Band's Department of Health and Human Services operates three clinics across the Reservation to make high-quality health care available to Band members.

The Band also provides assisted living facilities to Elders in all three districts, as well as Circle of Health, an insurance program set up to help Band members with health care costs.

Ne Ia Shing Clinic

Services include:

- Family Practice
- Internal Medicine
- Obstetrics
- Pediatrics
- Dental
- Podiatry
- Optometry
- Audiology

We also offer traditional healing and operate a laboratory, diabetes program, and pharmacy, with services in all three districts.

Ne-Ia-Shing Clinic is a Federally Qualified Health Center (FQHC) in Onamia, Minnesota.

Primary care clinics acts as principal point of healthcare services to patients of all ages - evaluation and treatment is usually provided by general practitioners and family medicine doctors.

Currently Ne-Ia-Shing Health Center's 20 physicians cover 9 specialty areas of medicine.



Timeline



- 1960** Sam Yankee was elected Chairman of the Mille Lacs Band's tribal government. *Under his leadership, modern homes, public buildings, health services, educational opportunities, and social programs began to appear on the reservation.*
- 1972** Arthur Gahbow was elected Chairman of the Mille Lacs Band's tribal government. *Gahbow led the Band toward self-determination by advancing economic development on the reservation, pursuing land claims to expand the reservation's land base, and overseeing a restructuring of the Band's government to a separation-of-powers system.*
- 1988** Congress passed the Indian Gaming Regulatory Act. *That was the big opportunity we had been waiting for. The late Art Gahbow, who was Mille Lacs Band Chairman at the time, led the tribal government in negotiating gaming compacts with the State of Minnesota. "For a long time after the reservations were set up there was no local economy, just federal government handouts," Marge Anderson said. "The casinos have brought jobs and the basis for a real economy."*
- 1989** Governor Rudy Perpich signed the Band's gaming compacts. *Now it was time to make gaming a reality on the Mille Lacs Reservation. "When the Indian Gaming Regulatory Act was passed, we couldn't find a bank that would help us build a casino," Marge recalled. "Local banks nixed the idea. But then this firm (later known as Grand Casinos, Inc.) offered to help."*

1991

Built around the Band's bingo hall in District I, Grand Casino Mille Lacs opened on April 4, 1991.

Grand Casino was a hit from day one, with hundreds of people lining up to play the 200 machines that had been installed. "We had a handful of employees, and we were in a tin building," Marge said. "We had customers coming in and getting mad because they couldn't find a machine. We decided to expand right then."

After Gahbow's death on April 11, 1991, the Band Assembly appointed Anderson to fill his term.

"We made a decision early on that we would use gaming revenues to provide jobs, invest in economic development and community infrastructure, provide programs and services to Band members, and reach other long-overdue goals," Marge said.

"Because of casino revenues, our people have better lives and more opportunities. I never want to see our situation revert to how it used to be. In the first 20 years, we've helped people find jobs, access health care, drink cleaner water, and live in quality homes."

The Band became the first tribe in the United States to issue community improvement bonds backed by casino revenues.

Those bonds supplied \$20 million to fund reservation construction projects including new schools, clinics, community centers, ceremonial buildings, housing, a water tower, water treatment plant, lagoon system, roads, other reservation infrastructure, and a long-term savings and investment fund.

1992

The Mille Lacs Band opened Grand Casino Hinckley.

1993

The Band opened the new Ne-la-Shing Clinic, the first tribal health facility in the nation built with casino revenues.

1994

Marge championed the Band's infrastructure, helping to funnel dollars into schools, clinics, government and community centers.

By this time, the Band's two casinos had created 2,428 local jobs and paid \$33,500,000 in employee wages in 1993. The



1996

Not only have employment opportunities been provided for tribal members, but the tribe had improved needed infrastructure and built several major new buildings. *Using their government status, they obtained tax-free bonds backed by casino revenue to fund several of their major building projects. **By 1996, the bonds had been paid off.***

1997

The success of the casinos had brought about a stunning transformation on the reservation and in the surrounding area. *The casinos were (and still are) the largest employers in both Mille Lacs and Pine Counties. Making up for "150 years of need," the band had expanded road work, water and sewer systems, built the Upper and Lower Nay Ah Sing Schools, two tribal schools and childcare facilities, **Ne-la-Shing health clinic**, two ceremonial buildings and a powwow ground, two community centers, new day care and elder centers, and, completed in 1997, a Tribal Government Center.*

1999

The Band introduced Circle of Health, a health insurance program focused on paying Band members' co-pays and deductibles.

2000

Clinic programming started by DSGW.

2000

Sandra Blake was elected District I Representative, a position she held from 2000-2004 and resumed in 2008 to 2020.



2000

Melanie Benjamin was elected Chief Executive, a position she held from 2000-2008 and resumed in 2012.

2001-2

The Band opened assisted living units for it's elders in all three reservation districts.

2003

The use of clinic services had far exceeded expectations. Space to expand is limited. Talk of building a new clinic had started.

2014

Mille Lacs County filed an appeal of a U.S. Department of Interior decision to allow the Mille Lacs Band of Ojibwe to place the Sher parcel, in Kathio Township in northern Mille Lacs, into trust status for the Band.

2015

Numbers were updated by DSGW.
Those July 2015 numbers were used to develop the Architect RFP.

2015

Programming called for a total of 67,000 square feet; the final design ended up at 76,140 square feet. An Ophthalmology Department was added which was not in the original programming. Site selection determined the building layout, adding more open public space. Additional departmental future growth was also considered.

2016

Design Committee Kickoff Meetings began.



2017

Ten General Contractors submitted their firm's qualification statements. *These submissions were reviewed and scored by staff from the building design group. Selections were narrowed to seven for interviews.*

Contractors were interviewed in conjunction with the D1 Community Center and the group was narrowed down to the top 5 to be qualified for bidding the project.

During the bidding phase two of the qualified contractors withdrew their participation due to bonding issues with the MLBO contract. The next-in-line contractor was offered the chance to complete a bid proposal.

Four qualified bids were received. Bid values were all within 1% of each other - A very competitive bidding environment.

Contractor was ready to mobilize as soon as contract was approved, anticipated an 8/21/17 start. Estimated 18-month construction schedule. Estimated completion in February 2019.

August - Groundbreaking



2017

September – Excavation and construction had begun.

October - Exterior footings and foundation walls were almost complete.

December – Structural steel began going up and work on above ground masonry work began.

2018

August - The building was almost entirely enclosed, with walls going up, flooring going down, and miles of electrical cable being strung to transmit the reams of data on which health care depends in the 21st century.

2019

Construction complete! Move in began in 2020.

2020

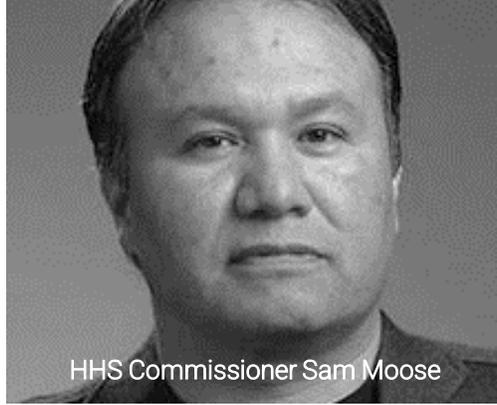
COVID-19 Pandemic began.

June – Move to new building took place.



Planning





HHS Commissioner Sam Moose



Chief Executive Melanie Benjamin



Secretary -Treasurer Carolyn Beaulieu

Project Development

The project began under Chief Executive Benjamin's Administration.

Planning was developed under former HHS Commissioner Sam Moose and was approved and funded by the previous Band Assembly, composed of: Secretary/Treasurer Carolyn Beaulieu and Representatives Sandra Blake, David 'Niib' Aubid, and Harry Davis.



DI Representative Sandra Blake

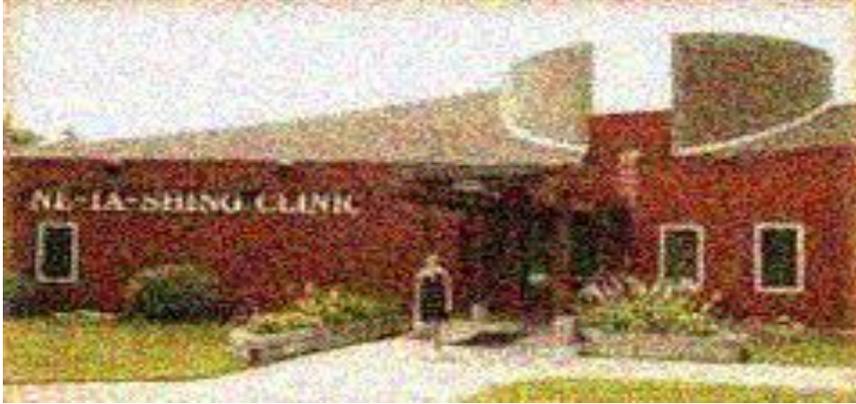


D II Representative David 'Niib' Aubid



DIII Representative Harry Davis

Former Clinics

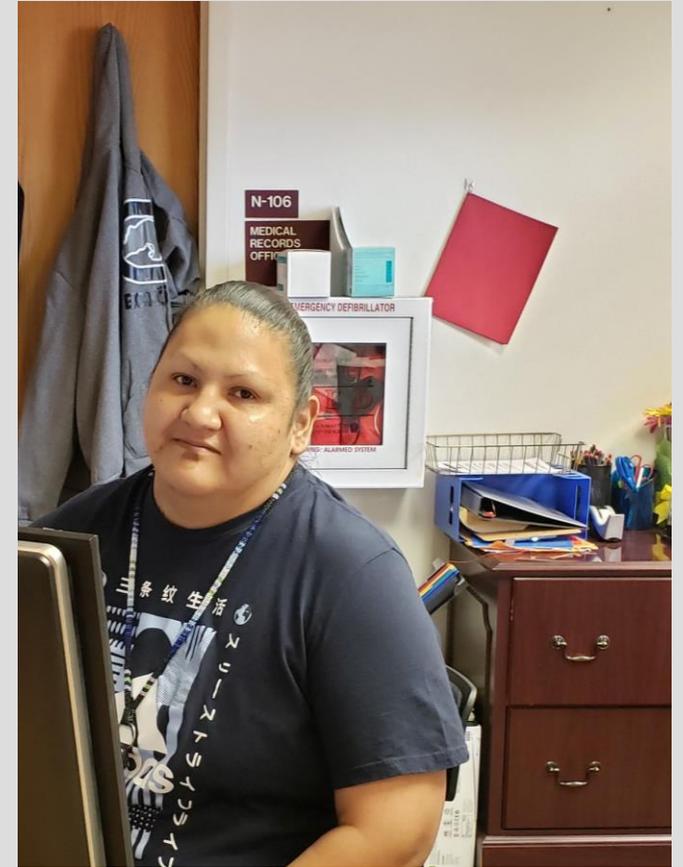


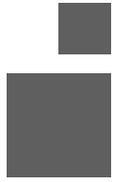
- 43500 Migizi Drive, Onamia, Minnesota
- Built in 1993
- 19,782 square feet
- 7 exam rooms

This was technically the third clinic...



Issues that the Clinic was facing...





Guiding Principles

"This has to work for our community."

Service accessibility for customers.

Patient privacy is crucial.

Preventative model drives services.

Promote holistic wellness.

Support established programs.

Be the provider of choice.

Be welcoming to customers.

Reflect the culture and traditions of the people.

Include plans for exterior wellness features.

Integration of traditional medicine.

Accommodate meeting spaces.

Support youth to be healthy and hopeful.

Create staff efficiencies.

Circulation concepts are important.

Responsibility of resources is part of respecting the community.

Plan for expansion.



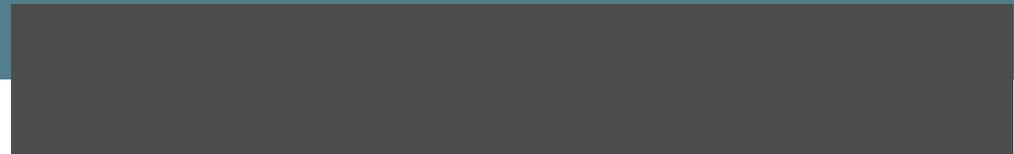
“Life always comes down to moments. We must recognize what is possible and seize the day!” –

Executive Chief Benjamin, STATE of THE BAND ADDRESS



Design

The Mille Lacs Band commissioned Seven Generations Architecture and Engineering to provide full design services for the clinic, which will also house Health and Human Services administration and all HHS departments: Health Services, Family Services, Public Health, Community Support Services, Substance Abuse Treatment and Behavioral Health Services.





Landscape

The Mille Lacs Band of Ojibwe enjoys an interconnectedness with the land and an approach to environmental stewardship that takes into account how today's decisions will impact the next seven generations.

The HHS building was developed on a large parcel of land known as the Sher Property.

A housing development has been started on the parcel and the new District I Community Center is also on the property.



Mille Lacs Lake

View of Neyaashiing “the Point”, and Rainbow Island



Patient-Centered Design

Patient-centered design is at the core of The Mille Lacs Band Health Clinic. With its users often having long travel distances, the facility was designed as a 'one stop shop' for members of the Mille Lacs Band Community.

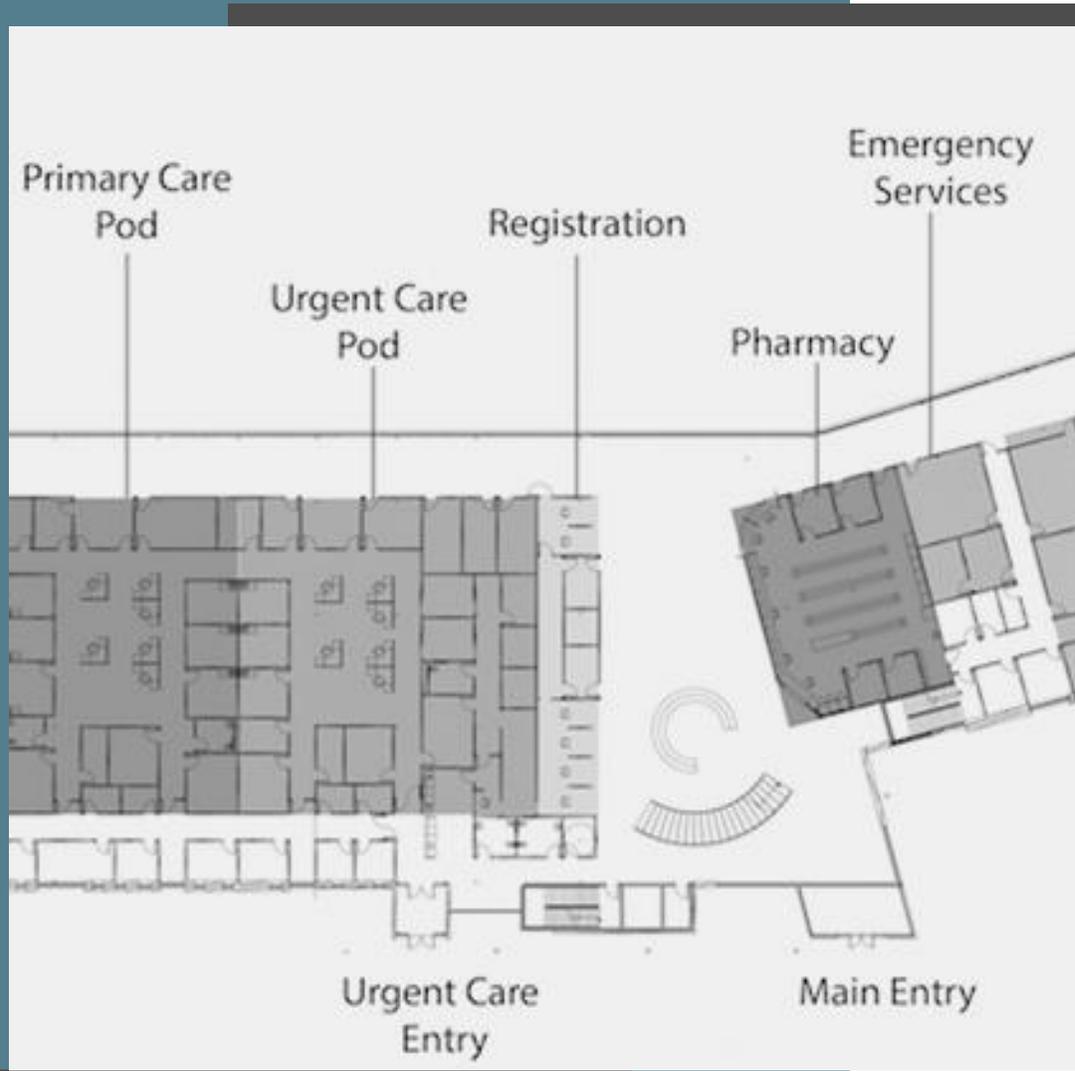
The 78,000 square foot facility provides full health clinic services including general practice health clinic services, dental operator, pharmacy, imaging/radiology, lab, physical therapy, behavioral health, public health and family services.



Accommodating Services and Programs

Understanding how patients access healthcare was critical, resulting in an experience that can integrate multiple clinical appointments.

A focus on providing spaces for social and public health services as well as clinical programs was a primary driver of the two-wing layout – creating a one-stop-shop for Health and Human Services was a top priority.



Layout

The clinical layout, which includes three similar clinic modules, was customized to accommodate primary care, urgent care and behavioral health services.

Each module is accessed on one side by the patient and the other by staff creating the spaces needed for increased provider-team collaboration and patient-oriented care.

With a total complement of 24 exam rooms, this modular approach supported the need to remain open in a reduced capacity to provide urgent care services after hours.

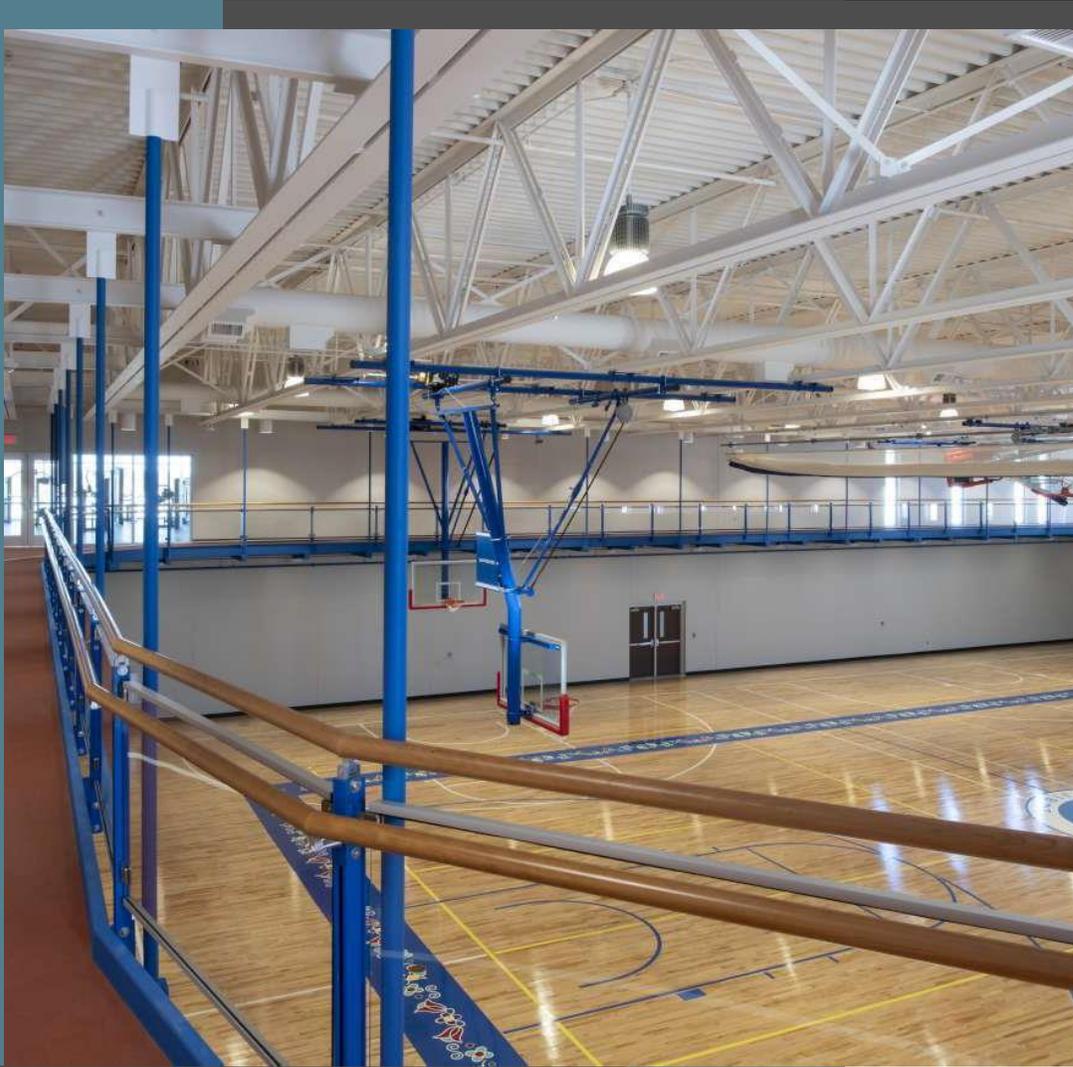


Sustainability

The design took water quality into consideration. The facility was sited so that a large curtain wall provided expansive views over the surrounding wetlands from waiting areas throughout the clinic.

Preserving those wetlands remains critical and played into the planning process, including factors like the choice of the water filtration system and the way the parking lots were designed to prevent any damage to the wetlands.

The building materials, mechanical and electrical systems were also designed to meet the high sustainability standards of the Band.



Focus on Health

Around the outside of the building, a paved walking path will further emphasize health and will connect to the fitness facilities next door at the community center.



Incorporation of Traditional Medicine

The cultural and spiritual health and well-being of community members are of prime importance.

The Band is committed to Spiritual Wellness through scheduled clinics with practitioners and ceremonies.



Culturally Reflective Design

Vertical circulation often holds incredible opportunity for incorporating cultural indicators. In this case, the curved stair is anchored off a two-story “drum,” so patients transitioning between floors experience walking the path of the circle.

The desire to bring these elements into the design resulted in the building hugging the edge of a nearby wetland visible from patient waiting areas and the inclusion of fireplaces in the lobby.

The drum-inspired rotunda in the lobby of the Mille Lacs of Ojibwe District One Clinic features panels that showcase the seven clans of the Ojibwe. The concept sketches, which were drawn by a tribal citizen, hang over the patient reception area.



Future Expansion

The building was planned with future expansion in mind.

Structural elements and sections of the roof were designed such that adding a new floor above would be easily feasible with minimal rework of the structural steel and roof, and utility lines were carefully organized for horizontal expansion.

The clinic has also been built to accommodate urgent care in the future as the need arises.

Key Statistics

The facility is situated on the west side of Timber Trail Road across from the Bugg Hill neighborhood.



- 76,000-square-foot clinic opened in 2020.
- 24 exam rooms.
- Rural setting on tribally held lands.

The facility will provide a central location for Band members to access medical care formerly housed in Ne-la-Shing Clinic: general practice health services, dental, pharmacy, imaging/radiology, lab, and optometry.



Construction



DESTINATION: 2017

Mille Lacs Band of Ojibwe

An aerial photograph showing a large, modern building with a dark roof and a prominent white circular feature on top. The building is surrounded by a large parking lot with many cars. To the left of the building is a multi-lane highway with a median. The area is lush with green trees and grass. A yellow location pin is placed on the roof of the building. The text 'Mille Lacs Band of Ojibwe' is overlaid on the image near the building.



Groundbreaking



Construction began in 2017 after a dish-setting ceremony to start the project off in a good way.

The Mille Lacs Band of Ojibwe broke ground on the new 76,000 square foot Health & Wellness Center.









Completion







Challenges



COVID-19

The coronavirus pandemic started as plans were being finalized to move to the new building.

This caused:

- Reworking of plans and strategies
- High workload
- Supply shortage
- Unexpected staff shortages regarding those that fell ill

Change Orders

Change of Administration

- Furniture order changed

Dentist's Office

- Changes caused a need to redrill floor mounts for all equipment.

X-Ray Room

- Changes were needed to the lead that lined the interior.



Transition to New Building

Completing such a major move during a pandemic was a tremendous challenge.

HHS staff coordinated the transition. The team determined deliverables and established milestones, and although they missed some, they pressed on.

- June 18 Move will begin with the pharmacy, dental services, clinic, administration, Circle of Health, and Family Services.
- June 19 Community Support Services programs moved over.
- June 22 Planned a "soft go-live" for troubleshooting IT, phones, and processes in the new space.

"Through and through, the foundation of great teamwork made this possible," ... "There have been several extraordinary moments, but we stayed focused and delivered." HHS Staff member

Phones



With today's complex technology, it took a few tries to get the phone system working reliably.

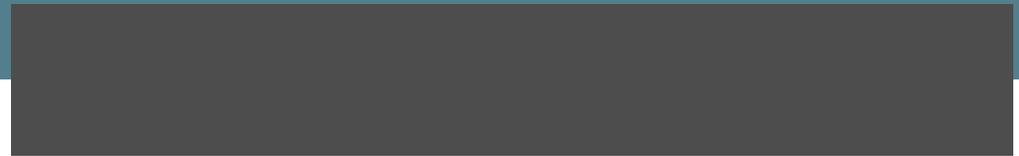
Online maps not recognizing street names or roads in the newly developed area is a continuing source of frustration.

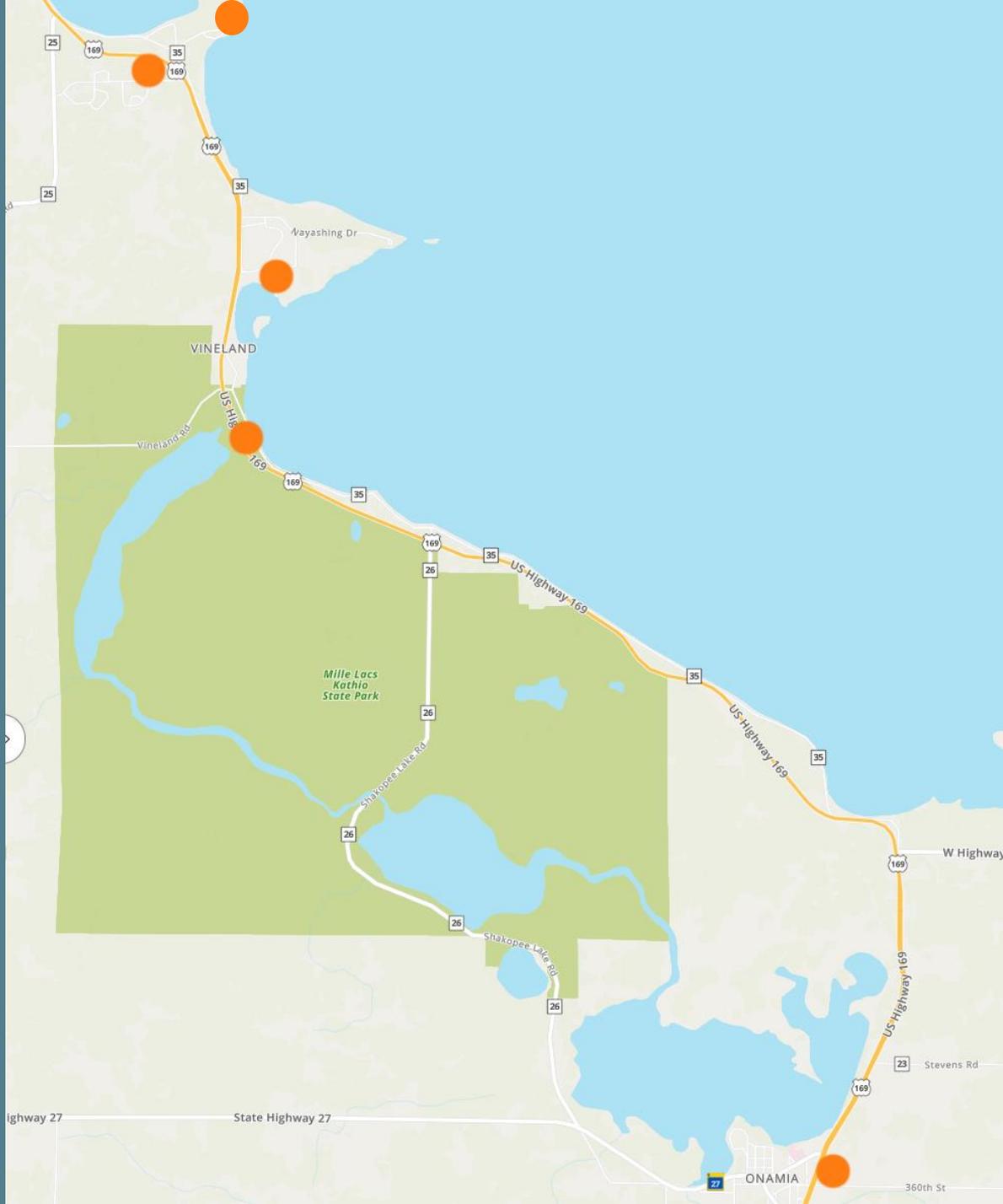


Above: Arc GIS Map of established roads.
Left: Current Google Map view of same area.



Benefits





Consolidated Services

This map shows the locations of former HHS services in DI.

A round trip to visit these locations is approximately 30 miles.

These services are now in one location.

Former Clinic is Being Repurposed

The building currently houses Aanjibimaadizing, our P.L. 102-477 Workforce Development program.

Renovations are underway to develop it into a workforce training center with offices, conference and meeting areas, classroom, skills labs, and commercial kitchen.

Aanjibimaadizing, which translates to "Changing Lives" recently won the Public Law 102-477 Chief's Award.







Blue Stone Strategy Partners' Role





Realized

Moving Forward with a Game Plan





Transformational Assessment



Where are
we now?



Where do
we want to be?



How do
we get there?

Key Guiding Principles



Establish 'Patient-Centered Care' as the guiding principle from which all decisions will be measured regardless of staff, popularity, and/or political and historical circumstances.



Establish an integrated case management system for tracking high-needs patients and maximizing the opportunity to best meet all the needs of patients.



Create a strategy and plan to implement prevention and wellness services that are integrated throughout the HHS system.

COVID Cause and Effect

Social distancing created and exacerbated silos.



Systems Issues

Systems of care and operations were in infancy stage when COVID began.



Get to know your neighbor - New Normal

Staff needed to learn their way around a new facility and return to pre-Covid daily operations with some new staff and many vacancies.



New layout, staff were consolidated under one roof for the first time, creating opportunities for integrated care.

Impact on Operations

Communication at all levels:

REMOTE WORK
VS.
IN-CLINIC WORK

All health care professionals are essential workers: strain on the system

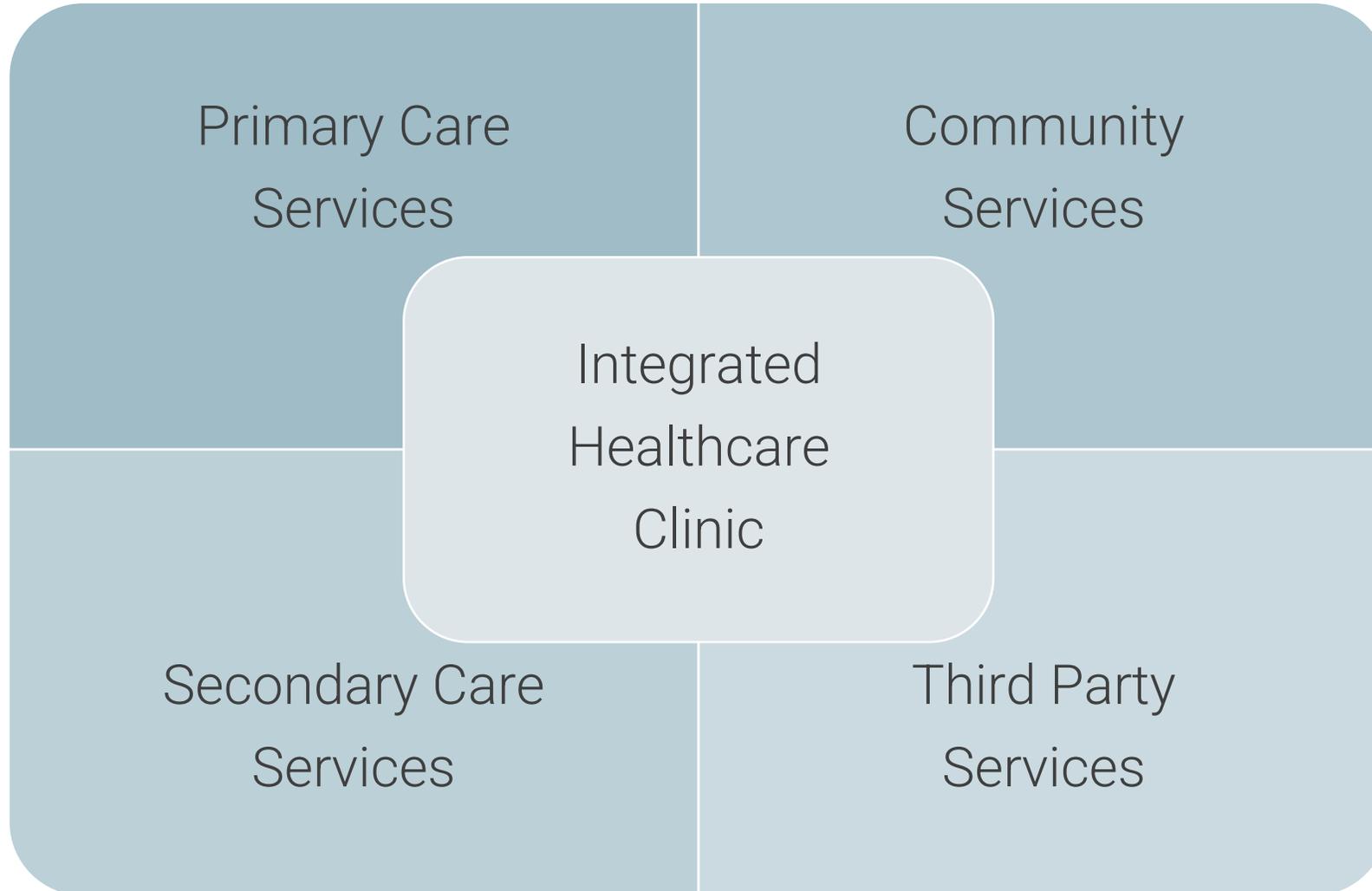


Siloing exacerbated

Reduction in provider availability = increased wait times and reduced revenue, which was partially offset by Cares and ARPA funding



Integrated Health Care



Integration

Inter-
departmental
marketing

Minimize
duplications

Implement
case
management

Centralize
scheduling

Many Services / Little Integration

Recruiting Challenges



Top HR Challenges in Health Care

1. Talent acquisition (particularly in rural locations)
2. Specialty providers are particularly difficult to recruit
3. Employee burnout
4. Constant need for retraining
5. Evolving state laws and payor credentialing requirements

Spirit of collaboration helps carry Mille Lacs Band through pandemic



Moving Forward

Commitment to Collaborate Continues

Implementation

Consolidation continues:

- Public Health Programs relocated into the new clinic
- Community Nursing and WIC integrated into primary care
- Productivity dashboards being created for all services
- Mental Health and SUD services now one department
- Case management position created and implemented

Transformation Continues



The only constant in Health Care is change - the Clinic will continue to evolve and grow



Questions?





Miigwech!

Mille Lacs Band of Ojibwe

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