ALBUQUERQUE AREA INDIAN HEALTH SERVICE
ENVIRONMENTAL HEALTH SERVICES PROGRAM
Fan Robinson, Director
Division of Environmental Health Services

Our Mission… to raise the health status and quality of life of all American Indians and Alaska Natives to the highest possible level through respect, shared decision making, cultural sensitivity, and sound public health measures.

Our Goal… to assure that comprehensive, culturally acceptable personal and public health services are available and accessible to American Indian and Alaska Native people.

Our Foundation… to uphold the Federal Government’s obligation to promote healthy American Indian and Alaska Native people, communities, and cultures, and to honor and protect the inherent sovereign rights of Tribes.
INDIAN HEALTH SERVICE

- Serves approximately:
  - 1.5 million American Indians and Alaska Natives
  - 562 Federally-recognized Tribes in 35 states

The Albuquerque Area serves 27 Tribes and Chapters with a total population of approximately 89,000

Geographic Organization

- IHS Area Offices
  - Aberdeen Area
  - Alaska Area
  - Albuquerque Area
  - Bemidji Area
  - Billings Area
  - California Area
  - Nashville Area
  - Navajo Area
  - Oklahoma Area
  - Phoenix Area
  - Portland Area
  - Tucson Area

12 Area Offices
151 Service Units

Organizational Chart

Area Director

Office of EnvironmentaHealth & Engineering

Division of Environmental Health Services

Northern District
Southern District

Southern Colorado Unit
Service Unit - Field Office
Division of Environmental Health Services

Environmental Health Services
- Authorized under P.L. 86-121
- Environmental Health Staff
- Community Services-based program
- Environmental Health Advisor to Tribal Governments
- Broad range of Environmental Health Services for governments, communities, and individuals
- 3 Programs
  - General Environmental Health
  - Injury Prevention
  - Institutional Environmental Health

EHS Program of Activities
- Food safety
- Facility surveys
- Water, wastewater, and solid waste
- Utility O&M
- SARA Title III – Emergency Response
- Hazardous Materials
- Vector control
- Hazard Investigation
- Disease & Injury Surveillance
- Communicable Disease Investigation
- Emergency Response
- Code Development
- Schools
- Head Starts/Day Care
- Detention Centers
Basis For Federal Health Benefits to Indians

- Treaties exchanged aboriginal lands for federal trust responsibilities and benefits
- Snyder Act authorized health services for Indians (1921)
- Transfer Act placed Indian health programs in the PHS (1955)
- Indian Self-Determination and Education Assistance Act (1975)
- Indian Health Care Improvement Act and amendments (1976)

P.L. 93-638 Indian Self-Determination Act

Implementation Regulations
25 CFR Indians Part 900

TRIBAL SELF-DETERMINATION

The Indian Self-Determination and Education Assistance Act (Public Law 93-638, as amended) provides Tribes the option of assuming the administration and operation of health services and programs in their communities, or remaining within the IHS direct health care system.
Partnership with Tribal Governments

- The Indian Self-Determination Act of 1975 does not lessen any Federal treaty obligation, but provides an opportunity for Tribes to assume the responsibility of providing health care for their members.

900.3 Policy statements.
- (b)(3) afford Indian tribes flexibility, information and discretion necessary to design programs to meet the needs of their communities consistent with their diverse demographic, geographic, economic, cultural, health, social, religious and institutional needs.

Subpart K-Waiver Procedures
- 900.147 What appeal rights are available? Tribe has the right to appeal decision and request a hearing on the record. Tribe may sue in Federal district court to challenge the Secretary’s action.
Program Standards

1. Monitor health status
2. Diagnose & Investigate health problems
3. Inform Educate and empower people
4. Mobilize community partnerships
5. Develop policies and plans
6. Support laws and regulations
7. Link to provide care
8. Assure competent workforce
9. Evaluate quality
10. Research for new insights

Program Activities

- Surveys ("Inspections")
- Training
- Technical Assistance
- Policy Development
- Disease Investigations

Food Service Surveys

- 266 Food Service Establishments
  - Food Warehouses
  - Markets / Stores
  - Restaurants
  - Bars
  - Institutional Kitchens
- Frequency: every 6 months
Food Service Surveys
- Consultative, Risk-Based Inspections
- Use FDA Food Code
- CFP Form
- E-Surveys and web-based data system

Food Service Surveys: Other
- Tribal Celebrations
  - 50 Events – Food Vendors

Food Handlers’ Training
- Most Popular Service
- Key to Preventing Outbreaks
- Some Tribes Require of Vendors and Food Safety Personnel
Food Handlers’ Training
- Presentation
- Test
- “Certification”

Technical Assistance
- Plan Reviews
- Consultation
- Health Education

Policy Development
- Local, Tribal Regulations
- Area Program Standards and Operating Guidelines
- National IHS Policies and Guidelines
Disease Investigations

- Disease Investigations
  - Outbreaks
  - Individual Case Investigations
  - Complaint Log and Response

Successes

- Surveys and Data
  - Electronic System Reports
- Food Handlers’ Training
  - Public Relations for IHS
- NO Outbreaks!

Challenges

- Lack of Enforcement
- "Burrito Ladies"
- Vulnerable Population
- Dynamic and Increasing Food Safety Workload
Initiatives

- FDA Standardization
- Model Tribal Food Code
- HACCP Programs in Restaurants
- Development of Best Management Practices and Evaluation Tool
- Advisory Committee

Conclusion

- Good Program Model
  - Evaluations to Improve
- Tribal Capacity Building
- More Resources Required as Need Grows
- Partnerships Key to Future Success

Additional Information About Indian Health and Environmental Health Services

- www.ihs.gov
- www.dehs.ihs.gov