The presentations at the IHS Spring Self-Governance Conference held in Las Vegas, NV on April 15-16, 1997, took on a different look than from those of past conferences. Although there was much discussion of topics such as budgets, Tribal shares and other financial matters, as IHS Director Michael Trujillo stated, “we are beginning to focus in these meetings more on the health care initiatives and concerns of improving the programs within the communities. We are looking at other issues which will strengthen the focus of health care initiatives and how we can collaborate.”

Keynote speaker Wanda Stone, Chairperson, Kaw Nation, summed it up by saying, “I am glad to see more implementation issues on the agenda this year such as Women’s Health and Elder Care. It is time that we get on with the business of providing state of the art medical care for our people and work jointly to attain the long standing IHS goal of raising the health status of the Indian people to the highest possible level.”

Chairperson Stone further stated that “Self-Governance has been the impetus that has made the successes of the Kaw Nation a reality.” But she cautioned the crowd when she added, “Self-Governance brings with it a great responsibility. It is true we are no longer constantly bombarded with developing and submitting reports to a federal agency, only to be checked off on somebody’s list. We must now be accountable to our people.”

The Conference focused on the general subjects of Establishment of Recurring Self-Governance Base Budgets, Assessments Formulation, and Permanent IHS Self-Governance Legislation. In addition, there were several break-out sessions which focused on program implementations and health initiatives.
IHS Spring Conference  (continued from front page)

Update of Self-Governance Base Budgets and Revised IHS Financial Tables

Cyndi Holmes, Self-Governance Coordinator, Jamestown S’Klallam Tribe and Cliff Wiggins, IHS Finance, presented a template of worksheets involving revised IHS financial tables. These tables were developed as result of the objectives established by the Self-Governance Base Budget Workgroup and the IHS Business Plan Sub-Workgroup relative to identification of IHS and Tribal resources.

Ms. Holmes pointed out several advantages and the purpose of the revised tables, including:

- Reconcile annual appropriations so that the status of all funds is clear;
- Show that any general appropriation increases are shared proportionately with all Tribes;
- Reduce the number of separate line-items in the new Headquarters tables;
- Accurately identify resources that are not allocable directly to Tribes through current allocation formulas due to Congressional or court limitations;
- Help establish the Business Plan Workgroup recommendation for an annual report to all Tribes identifying Tribal-tagged resources (potential shares) at all three levels of the agency (Headquarters, Area, and Local); and
- Provide a more direct and simplified basis for annual fiscal reconciliation.

Additionally, these revised tables are consistent with the establishment of Self-Governance recurring base budgets which provides for the transfer of IHS programs, services, functions and activities to Tribal control. At the option of each Tribe, the resources which have been assumed by the Tribe and transferred under an Annual Funding Agreement would not be re-calculated annually.

Cliff Wiggins informed Conference participants that these tables would be updated to include current financial information from each of the respective IHS Area Offices. It is anticipated that this work will be completed by early fall 1997.

IHS Assessments

An issue which remains unresolved since the implementation of the Self-Governance Project within IHS has been the development (or the lack of) a distribution formula for the Assessment category at IHS Headquarters. Although a complex issue, Assessments are the funds which are charged to IHS by its parent agency, the Department of Health and Human Services (DHHS) for items such as telephone costs, preparation of W-2’s, and the (supposed) cost of IHS’s share of the Surgeon General’s salary. Assessments are intended to be the overhead costs assumed by DHHS and then charged to the IHS budget.

While some of these costs are legitimate; others include past charges assessed to IHS, for items such as program funds for health studies of African-American males, seem to have little to do with IHS and appears more of a way for DHHS to fund their own programs.

Much of the frustration stems from DHHS’s failure to legitimately discuss this budget. Many Tribal leaders feel that the costs assessed to IHS are higher than market or private-sector companies would charge. In fact, at times the financial personnel of DHHS maintain that the Assessments budget has risen every year.

Governor Larry Nuckolls, of the Absentee Shawnee Tribe and Robert McSwain, IHS Headquarters staff both agreed that there is much work ahead before the Tribe’s will see any of these funds distributed through a Tribal share. An Assessment Workgroup comprised of Federal and Tribal representatives has been proposed to address these issues. For more information, please contact Governor Nuckolls or Mr. McSwain.

Permanent IHS Self-Governance Legislation

A panel of Tribal Leaders and technical staff provided an overview of the latest draft on IHS Permanent Self-Governance legislation - created as Title V of the Indian Self-Determination and Education Assistance Act, as amended. A Tribal Legislative Task Force was formed to prepare the proposed legislation. A draft bill was presented and the Conference participants discussed the pros and cons of the various sections.

Several Tribal caucuses ensued, primarily to address what should be included in the bill and the scope of Self-Governance within the Department of Health and Human Services. Some Tribal leaders felt a strategy should be pursued that keeps the draft legislation simple yet passable; permanent IHS Self-Governance legislation with controlled expansion in other non-IHS agencies within DHHS – “one step at a time”.

Joe DeLa Cruz, Quinault Nation, makes a point during the conference.
However, others felt the Tribes should aggressively pursue and advance Self-Governance within all DHHS agencies.

Based on Tribal input received at the Conference, a revised draft incorporating these concerns and comments will be prepared for further review. A National Tribal Consultation meeting has been scheduled for June 3-4, 1997, to solicit additional comments and concerns and to discuss strategies for passage of the bill. All Tribes, including those non-Self-Governance Tribes, are encouraged to attend and participate in this meeting.

**Putting Baseline Measures to Work**

Mickey Peercy, Special Assistant to the Governor, Chickasaw Nation, presented the Baseline Measures Workgroup Final Report to the Conference. He was very adamant that the report was not a list of mandatory requirements, but rather should be used as a guide for Tribes in establishing program outcomes and measures under Self-Governance.

There have been many questions surrounding what is required by the Tribes in the collection of baseline measures. While the collection of reporting data by the Tribes is required, each individual Tribe is authorized to select and establish those measures that best meet their needs. Mr. Peercy was quick to point out that the collection of any data should serve the needs of each Tribe. Some Tribes expressed concern that baseline measures data collection could be used as another way for the IHS to monitor or regulate the Tribes under Self-Governance.

Mr. Peercy concluded his presentation by encouraging Tribal participants to read the report and utilize that which is most beneficial. He also reminded the audience that “tools that gather dust, don’t do you any good.” The Final Baseline Measures Report is a well researched document and includes many samples of data a Tribe may collect, case studies and an excellent reference section.

**Women’s Health and Elder Care**

Dr. Craig Vanderwagen, Office of Health Program, IHS Headquarter, spoke of the “needs of special populations” and outlined three grant programs available for FY1998. These grants will fund innovative intervention programs which are community-based. Grants will be awarded for programs which address elders, women’s or child abuse issues.

There was much discussion from the audience over whether IHS should still be in the grant business given the number of Tribes in Self-Governance. Some also noted that past grants have been awarded to the best grant writing Tribes and then used to supplant existing programs.

Dr. Vanderwagen assured the group that these grants would be awarded to new and innovative programs. He did say it was important to consider the future of these grants and whether the elimination of them was good or bad for special populations. He added that, “we [IHS] exist for you, so we need the input and ideas.”

Many of those in attendance felt that there was truly a sense of commitment and partnership from Dr. Trujillo and his staff. Dr. Trujillo reflected on the past three years since his confirmation as IHS Director. He acknowledged that, “there have been bumps in the road”; but that the IHS is “smoothing them out”; and, that the “past two years have been the foundation for many things that have now gone forth.” He summed up his experience as Director by saying, “I come before you as an individual, who wishes to understand more, who wishes to learn more and who wishes to do a better job in all respects. Unless we work together, we won’t improve the lives of Indian patients nationwide.”

Robert Joe, Sr. eloquently provided the closing remarks at the IHS Spring Self-Governance Conference and marveled at the number of people in attendance. “A lot of us use to sit at home and complain because we weren’t getting what the treaties promised,” he said. “Now we’re uniting. We’re laying aside our differences, coming together, to get what rightfully belongs to us. We’re one mind, one heart, one soul.”

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Dr. Craig Vanderwagen gives an enthusiastic presentation on women’s Health and Elder Care.
Department of Interior (DOI) Spring Conference
Focuses on New Partnership Between Tribes and Agency

For those in attendance at the DOI Spring Self-Governance Conference held in Portland, OR on March 25-26, 1997, it became clear that the Tribes have made further steps in advancing the Self-Governance initiative within the Department. The BIA committed to a new partnership between themselves and the Tribes; and, Agency representatives stated that a Tribal shares process will eventually be implemented for all Tribes. However, a new battle, which involves all Tribes, Self-Governance and otherwise, is beginning over the BIA budget and the effects of budget cuts and inflation on Tribal programs.

BIA Deputy Assistant Secretary Michael Anderson addressed the conference and provided an overview of the BIA budget over the last three years. The proposed BIA FY 1998 budget proposes restoration of funding to FY 1995 levels. However, as he pointed out, when inflation is calculated, the Tribes still have less funds than three years ago.

Other topics at the Spring Conference included: Tribal Shares Allocation, Government Performance and Results Act (GPRA), Office of Special Trustee-Proposed Strategic Plan, and Compacting of non-BIA Programs.

Tribal Shares Process

Deborah Maddox, Director, Office of Tribal Services, along with Anna Sorrel, Program Analyst, Confederated Salish and Kootenai Tribes and Karen Meyer, Self-Governance Specialist for Johnson, Hamilton & Quigley, presented an update on the Tribal Shares and Funding Process of Non-Recurring Funds. Ms. Maddox said the identification of Tribal Shares is proceeding in two phases: 1.) the identification of inherent federal functions; and 2.) the identification of the funds and FTEs that go with the Tribal shares.

The panel emphasized that the Tribal Share Process is important for all Tribes because it provides the necessary information to make decisions regarding whether to contract, compact or leave a particular program with the BIA. Once the Tribal Shares Process is complete, the residual for each BIA program and specific Tribal shares available for those programs will be identified.

The Tribal Shares Process has been implemented in some Areas, such as the Portland Area, which has an identified share for each Tribe for every program in the area and agency offices. However, the process for identifying Central Office shares has traveled a somewhat bumpier road over the past few years. In the beginning, each new Self-Governance Tribe was given a flat $45,000 for their share of the Central Office funds. However, according to the panel, as more and more Tribes enter Self-Governance, it is imperative a more careful analysis is conducted to ensure that a Tribe receives their fair amount and is not impacted by other Tribes who elect not to take a Self-Governance share.

There was much discussion by the panel and by BIA Deputy Commissioner Hilda Manuel of the fear they have that members of Congress and others may use the Tribal Shares Process as a method to dismantle the BIA. Ms. Manuel felt there may be a danger in going forward with the Tribal Shares notification in the Federal Register. “Some may think the BIA no longer wants to carry-out these functions and thus the savings will be used elsewhere,” she said. “They may see this as an opportunity to dismantle the organization.”

Many Conference attendees agreed the Tribes should beware of those type of people, but many expressed the concern that the BIA could be using words like “fear” and “dismantle” to create uneasiness among non-Self-Governance Tribes. Ms. Manuel countered that she is fully committed to the Tribal Shares Process and will push for its implementation. “This is not a way for the BIA to abandon its responsibilities. It is the most efficient means to force the BIA to reorganize into something more beneficial to Tribal needs. We need to think of ways to make this work.”

Reporting Requirements

A panel of Tribal leaders and BIA staff presented an update on the many reporting requirements currently in place. Some, such as the General Assistance and Housing Improvement Program reports, require data from the Tribes to ensure continued funding, at the same time, the Government Performance Results Act (GPRA) mandates and requires compliance by all federal agencies.

Greg Pyle, Assistant Chief, Choctaw Nation of Oklahoma and Ken Reinfield, of the Office of Self-Governance, both stressed the importance of reporting to Congress or “educating” Washington DC.

Deborah Maddox, Office of Tribal Services, said that the “GPRA is a powerful tool in DC.” Joe DeLaCruz, representing the Quinault Nation, said that all federal agencies must have a strategic plan in place by September 30, 1997 and that GPRA will be the “tool used to get to a balanced budget.” All stressed the importance of using GPRA as a means to help the BIA and Tribes, but as Joe DeLaCruz said, “we must work together to accomplish these goals.”

W. Ron Allen, Chairman, Jamestown S’Klallam Tribe, summarized this session by emphasizing that reporting “does not encroach on our sovereignty, but is a communication tool to protect our budget. We need to get sophisticated and report items like inflation and population growth impacts.”

(continued back page)
Government Performance and Results Act (GPRA): Another Federal Acronym or a Useful Tool for Tribes?

GPRA was enacted in 1993 and requires all Federal agencies to develop five-year strategic plans which will encompass missions, goals and measurable accomplishments. These strategic plans will be supplemented by annual plans which link budgets and program performance to the long-term strategic goals. As required under GPRA, strategic plans are due from every Federal agency by September 30, 1997.

While mission statements and strategic plans may sound like familiar from other administrations, there are several important distinctions between GPRA and past efforts to make the federal government more efficient and accountable.

1. **Every Federal agency must comply**: Part of the problem with agency mission, goals, etc., is that different agencies have their own idea of how to accomplish this. GPRA forces all agencies to follow specific guidelines so that everyone is on the same playing field.

2. **GPRA focuses on measurable accomplishments.** The failure of many strategic plans is that they are very good at outlining goals and objectives, but very poor at determining whether they were accomplished and whether they had a measurable impact. Developing goals and objectives which include measurable components is a new management tool which Fortune 500 companies have already been utilizing.

The idea is to focus on measurable accomplishments (e.g. employment) instead of inputs (e.g. amount of dollars to fund a program) or outcomes (e.g. number of clients in program). The theory is that measurable outcomes produce more meaningful results. In other words, they make a difference for those who are served by Federal programs. It is felt that program dollars are spent differently if those who spend the dollars concentrate on accomplishments.

3. **Is incredibly useful for Tribal budget justifications** - GPRA can be a very useful tool for the Tribes to show unmet needs and Congressional approved budgets which are too low. If the Tribes and the BIA and IHS work in partnership on GPRA plans, it could be helpful in budget formulation and requests to Congress.

4. **GPRA is an opportunity to demonstrate that Self-Governance dollars are more efficiently utilized by Tribes** - Because GPRA is accomplishment-oriented, it can be beneficial to the Tribes by demonstrating the success of the Self-Governance initiative. It will show what all Self-Governance Tribes already know—that Federal dollars distributed to Self-Governance Tribes are better leveraged and used for programs which have higher measurable accomplishments and impact than when those same Federal dollars were expended in the agencies. In addition, GPRA is extremely important, given the atmosphere in Congress, that the Federal budget must finally be balanced. The BIA and IHS GPRA plans must show what Federal funding buys in terms of tangible, measurable accomplishments. It will be used by Congress to decide which agencies may receive additional funding and which agencies receive cuts. Joe DeLaCruz, Quinault Nation, told the attendees of the BIA Spring Conference, that “GPRA will be the tool used to get to a balanced budget and that we must work together with the BIA to accomplish tool useful to the Tribes.” Chairman W. Ron Allen, Jamestown S'Klallam, added, “We need to report to Congress that we (Self-Governance Tribes) are more efficient. GPRA does not encroach on sovereignty, but is a communication tool to protect our budgets.”

Many of the BIA Area Offices have been working on their GPRA plans. It is very important for the Tribes to participate in the development of these plans so they will be beneficial to the Tribes and not just another government attempt at efficiency; or worse, a tool used to justify cuts in the BIA and IHS budgets.

Updates

IHS Self-Governance Tribes Surfing the Net

In an effort to increase communication and the timely disbursement of information and financial data, the IHS Office of Tribal Self-Governance (OTSG) has provided funds to the Tribes within the 48 Self-Governance Annual Funding Agreements to establish e-mail links between OTSG and the Tribes participating in the Self-Governance Demonstration Project.

Start-up funds of $3,500 have been distributed and may be used for the purchase of hardware, software, and subscription to an Internet provider. The Tribes are responsible for additional or future operational costs. Contact Chuck Tercero, IHS Office of Tribal Self-Governance, for additional information.

DOI Secretary Bruce Babbitt Releases opinion on Office of Special Trustee Strategic Plan

Plan Secretary Babbitt issued a news release in April 1997, discounting the final Strategic Plan developed by Special Trustee Paul Homan to reform trust fund management for Tribal and individual trust funds and resources. The news release clearly stated that the views of Mr. Homan were independent from the Department of Interior and that he, Secretary Babbitt, could “not support the separation and dissipation of the government-to-government trust relationship that extends well beyond funding to upholding the social, economic and cultural best interests of Tribes and individual tribal members.”
Self-governance is economic, social, political, and cultural freedom to Indian tribes and nations in North America. Public Law 93-638, the Indian Self-Determination and Education Assistant Act of 1975 and its 14 subsequent amendments strengthens tribal sovereignty by utilizing self-governance compacts and annual funding agreements to give back authority and control to the tribes.

In Oklahoma, one such tribe is making great strides in its use of self-governance compacts. The Chickasaw Nation, a non-reservation tribe headquartered in Ada Oklahoma, has successfully secured compacts of self-governance with three separate agencies of the federal government including, the Bureau of Indian Affairs, Indian Health Service and a prototype compact with the Department of Agriculture.

These three compacts help serve not only Chickasaws but a total Indian population of 30,000 living inside the Chickasaw Nation’s territorial boundaries.

The Chickasaw Nation signed its first self-governance compact and annual funding agreement worth $5 million with the Bureau of Indian Affairs (BIA) for ten FY 93 programs. The tribe, in its fourth funding year, administers the following programs: Community Service, Housing Improvement program (HIP), General Assistance, Indian Child Welfare, Scholarships, Adult Education, Johnson O’Malley (JOM), Direct Employment, Adult Vocational Training, and Roads program.

A good example of how tribally-driven programs work more efficiently and effectively through self-governance is evidenced by the Chickasaw Nation’s new program delivery system. The tribe’s jurisdictional territory covers 7,648 square miles with most program participants being elderly, youth, families with small children and pregnant women. It was not uncommon to see a Chickasaw individual or family spend half-of-a-day making the trip to the headquarters complex in Ada for services. This trip created a financial burden and prevented some, particularly the elderly from making the trip at all.

Under the leadership of Governor Bill Anoatubby and the tribe’s 13 member legislative body, the issue of mobility became a priority.

Governor Anoatubby, addressing a group of seniors said, “It’s always our goal to reach out to our Chickasaw communities, to bring services to you and help make your lives better in every way possible.”

This new way Gov. Anoatubby mentioned included the creation of two new regional offices, a southern region and northern region. Each region is staffed with a regional administrator and outreach/resource consultants. The regional consultants performed close to 10,000 transactions that assisted participants financially, provided jobs and education, gave direct or indirect aid and included referrals to other more specialized intertribal and outside agencies for further assistance.

The success of both regional offices led to the creation of a third, the northwest regional office to be located in Purcell Oklahoma. The new office is expected to be operational by June 1, 1997. Constructing and operating these new satellite offices shows the flexibility of utilizing operating dollars under compacts that has proven to be highly successful for the Chickasaw Nation.

The Chickasaw Nation signed its second compact and annual funding agreement worth approximately $26 million with Indian Health Service (IHS) for administrative control of the Carl Albert Indian Health Facility in FY 94. This compact represented a giant leap forward for tribal governments across the United States. No time before had a tribe assumed control over an entire health system which included a 53-bed hospital, specialty clinics, labs, pharmacy, 24-hour emergency room, and office of environmental health. At the moment of compacting, the Carl Albert Indian Health Facility linked up with the tribe’s two outlying health clinics in Ardmore and Tishomingo that were being operated by the tribe under self-determination contracts since 1985.

Prior to signing the compact, the tribe had little or no voice in how health care was being delivered to the Chickasaw people. Chickasaws and other Indian patients had no place to go with problems and concerns and often would turn to the tribe help.

“We really felt compassion for our citizens when problems concerning health care arose, but the tribe was powerless to make any changes,” said Governor Anoatubby. The success of
The tribe’s BIA compact led the Governor and tribal officials to look closely at compacting with IHS for control of the Carl Albert Indian Health Facility in Ada. The tribe appointed an eight-member task force that traveled thousands of miles and conducted hundreds of community meetings and utilized surveys and questionnaires to receive as many ideas and opinions as possible from the Indian people about their health care needs, wants and desires. Within the year, a compact agreement was signed with IHS.

In a midnight ceremony, October 1, 1994, Chickasaw Nation Governor Bill Anotubby, tribal officials and employees proudly received the key to the Carl Albert Indian Health Facility thereby creating the new Chickasaw Nation Health System.

As the Chickasaw Nation Health System began functioning in its new capacity, an overwhelming response from the people led to many new changes in the health system during its first year of operation: Twelve permanent full-time doctors were hired, waiting times reduced in various clinics, extended and weekend hours established for working families, and new staff positions created.

Further advances continue.

A new health clinic in Durant opened in 1996, in partnership with the Choctaw Nation, that serves both Chickasaws and Choctaws in the lower southern portion of both nations. Recently, a new wing opened to the Chickasaw Nation Health Clinic in Ardmore adding radiology and ultra-sound capabilities. And, in August of this year, a family practice clinic is scheduled to open with 20 exam rooms, pharmacy, full-service lab, treatment room, and radiology. The family practice clinic will be located in an annex building next to the Carl Albert Indian Health Facility in Ada. Additionally, the tribe has on the drawing boards plans for a fourth satellite clinic that will serve the lower southwest portion of the tribes 13 counties.

The Chickasaw Nation is one of only four tribes in the United States to have secured a prototype compact with the Department of Agriculture. This prototype compact provides direct management of food distribution programs with the ability to collaborate other programs and offer more specialized services based on tribal needs. The program is still in early development and is in its third year of operation.

"Signing self-governance compacts with federal governmental agencies means tribal sovereignty rights are being restored and government control reduced. With compact agreements in place, no longer will federal agencies define programs and services exclusive of tribal input, but will be inclusive and tribally driven," said Governor Anotubby.

"By October 1, 1997, the Chickasaw Nation will assume administrative responsibility for the local Indian Housing Authority and we are looking forward to building a strong housing program for all our citizens at all levels of income.

"This new agreement is being made possible through the Native American Housing Assistance and Self-Determination Act of 1996 and the Chickasaw Nation has great expectations for its success.

"Our mission is to enhance the overall quality of life for all our Chickasaw citizens and self-governance compacts and self-determination contracts are tools we’ve used to make our mission become a reality," Anotubby said.
Compacting Non-BIA Programs

Danny Jordan, Self-Governance Coordinator, Hoopa Valley Tribe and Rob Hunter, Tribal Attorney, Confederated Salish & Kootenai Tribe, provided an excellent overview on their respective Tribe’s attempts to compact non-BIA programs. Both have found the experience to be frustrating. They stated the Tribes are miles ahead at the negotiation table and that the non-BIA program personnel need to be better educated on Self-Governance.

Danny Jordan stated, “We’re dealing more with prejudices and preconceived notions of what Tribes can or should do as opposed to using scientific standards. They do not understand inherent federal functions and, whatever you do, don’t use words that put them in a defensive stance like ‘take-over’ of programs.” Both agreed the frustration is worth the Tribal assumption of non-BIA programs, but felt if the Office of Self-Governance were elevated to a higher level in the Department of Interior, Tribes would experience less frustration.

Overall, the Tribal attendees at the BIA Spring Conference were encouraged about the future of Self-Governance. More concern focused on the attacks by those in Congress and outside of the BIA. The threats of more budget cuts, “means-testing” and “termination” are real and dangerous. But as Deputy Commissioner Manuel said, “we have come a long way since the 1970’s. We’re committed to Self-Governance, but there will still be trying times ahead, particularly in the budget and legislative arenas. We need a true partnership relationship. You have our commitment that we’ll fight these battles together.”

Chairman W. Ron Allen sums up the new budget battle by saying, “without adequate resources, we can’t make it happen. We’ve advanced Self-Governance and we just need to keep moving forward, keep moving… keep moving… always doing something to advance forward. We need to keep pounding on the door, until the door opens.”