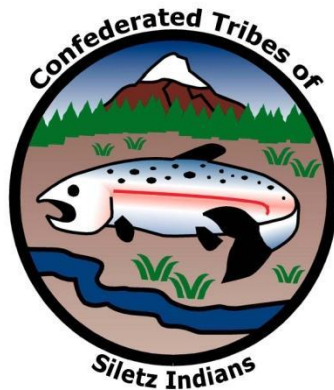


# **SILETZ COMMUNITY HEALTH CLINIC POLICY**



**COMMUNITY HEALTH DEPARTMENT**

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<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	OTC Medication Distribution for Area Office
Date Approved	06/13/02
Date Revised	08/05/06; 11/01/08; 05/05/12; 11/20/15; 12/21/18

**PART 11A**

**Over-the-Counter (OTC) Medication Distribution for Area Office**

**I. POLICY**

It is the policy of the Siletz Community Health Clinic (SCHC) to govern distribution of over-the-counter (OTC) medication from the area offices as follows:

- A. Enrolled members of the Confederated Tribes of Siletz Indians may request OTC medications for themselves and/or their legal dependents only. If a person other than the tribal member making the request is picking up the medication, the tribal member must grant permission to community health staff by telephone or signed note containing his or her Tribal enrollment number. Pediculosis (head lice) is viewed by a nurse and a verbal order is taken for prescription or treatment.
- B. With the exception of special, department-wide OTC and/or medical supply giveaways, Siletz Tribal members are eligible to receive medications to alleviate current symptoms only.
- C. Utilization of the OTC medication program is generally limited to a maximum of twelve (12) items per Tribal member household per calendar year. This limit may be relaxed for larger households, for households with small children who require special formulations of medications or in similar special circumstances.
- D. Except under circumstances of extreme need (ill elders or people with disabilities where relatives are unavailable for assistance, single parents alone with a feverish child and no transportation), community health staff will not provide home delivery of OTC medications.
- E. Community health staff will stock and distribute those items included on the Community Health Department Area Office Over-the-Counter Medication Formulary containing the most commonly requested and cost effective OTC items. Individual Tribal members who wish to obtain specific items not on the formulary should contact SCHC pharmacy staff directly to request and arrange pick up of items.
- F. OTC stock is placed in a secure location accessible to community health staff or, in their absence, an area office staff designee.
- G. Tribal members are assisted in accessing their prescription benefit whenever possible, particularly with OTC medications being used at high doses or to treat chronic conditions

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## **II. OVER-THE-COUNTER MEDICATION**

A. The types of OTC distributed by the area offices are embodied in the Area Office Over-the-Counter Medication Formulary and include:

1. Pain Relievers/Fever Reducers
  - a. Acetaminophen
  - b. Ibuprofen
  - c. Aspirin
2. Antihistamines
  - a. Chlorpheniramine Maleate (Chlor-Trimenton)
  - b. Diphenhydramine
3. Cough Suppressants
  - a. Guaifenesin
  - b. Guaifenesin/Dextromethorphan (Robafen DM)
  - c. Acetaminophen/Chlorpheniramine/Dextromethorphan/Phenylephrine
4. Antacids
  - a. Aluminum/Magnesium Hydroxide
5. Bowel Agents
  - a. Docusate
  - b. Milk of Magnesia
6. Topical Agents
  - a. Triple Antibiotic Ointment
  - b. Hydrocortisone Cream
  - c. A and D Ointment
  - d. Clotrimazole Cream

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- e. Hydrocerin
7. Other
- a. Oral Electrolyte Solution (Pedalyte)
  - b. Orajel
  - c. Gas drops
  - d. Polyvinyl Eye Drops
  - e. NaCl Nasal Spray
  - f. Alcohol pads
  - g. Condoms
  - h. Pill cutters
  - i. Medication pill boxes
  - j. Vitamin and Mineral Supplements
    - i. Adult Multivitamin
    - ii. Children's Chewable Multivitamins

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health
Policy	Medical Transportation
Date Approved	08/25/99
Date Revised	06/13/02; 06/26/06; 03/05/09; 02/02/12; 08/05/2017; 12/21/18

**PART 11B  
Medical Transportation**

**I. PURPOSE**

The purpose of this policy is to ensure Community Health staff assists Siletz Tribal members in meeting their medical, dental and mental health non-emergency transportation needs.

**II. LAST RESORT**

- A. The transport of clients is provided as a means of last resort, and is accessed by clients who are unable to get transportation assistance from family, friends or public transportation. Depending on the situation, this policy may be relaxed for Elders and/or tribal members with debilitating disabilities that prove potentially burdensome to family members. Community Health staff transports minor tribal members on a case by case basis depending on age or if accompanied by a parent or legal guardian.
- B. Community Health staff will assist clients with accessing public transportation, if transportation is not provided by Community Health, and the appointment is not related to an acute and communicable disease.

**III. TRANSPORTS PROVIDED BY COMMUNITY HEALTH STAFF FOR IMMEDIATE FAMILY MEMBERS**

CTSI Community Health staff transporters will provide medical transports to members of their household and immediate family members on their own time and with their own vehicles. Immediate family is defined in the CTSI Personnel Manual and includes father, mother, son daughter, husband, wife, brother, sister, or any other person living in the same household.

**IV. LONG-DISTANCE TRANSPORTS**

- A. A long-distance transport is defined as a transport that is greater than one hour travel time from the service area office.
- B. Long-distance transports are provided to eligible CTSI Tribal Members when healthcare services from a local provider are not allowed by Purchased/Referred Care or are unavailable in the area.

**V. SUPPLEMENTING NON-CLINIC TRANSPORTATION SERVICES**

- A. Transporters may be available to supplement transportation services available to eligible clients of non-medical tribal programs.

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Date Approved	08/25/99
Date Revised	06/13/02; 06/26/06; 03/05/09; 02/02/12; 08/05/2017; 12/21/18

B. Transportation services are prioritized as follows:

1. Priority One

Medical and Dental

2. Priority Two

Behavioral Health

3. Priority Three

Non-Clinic departments for the following reason:

a. Position vacancies;

b. Unplanned staff absences (i.e. illness) when a transport has been scheduled in advance; or

c. Extended periods of staff annual, sick, or other leave.



<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health
Policy	Non-Emergency Medical Transportation No-Show
Date Approved	08/05/17
Date Revised	12/21/18

**PART 11C  
Non-Emergency Medical Transportation No-Show**

**I. INTRODUCTION**

- A. No-show transports have a significant negative impact on non-emergency medical transports for all patients needing transportation services at the Siletz Community Health Clinic (SCHC). When a patient no-shows a scheduled transport it can:
1. Impact the health and all treatment for the no-show patient.
  2. Impact the health and all treatment of another patient whom could have been transported in the slot.
  3. Waste LIMITED time and resources of the providers, staff, and tribal funding preparing for the transport.
  4. Impact waiting times and subsequent treatment for the rest of the patients on the schedule for the day.

**II. DEFINITION OF A NO-SHOW TRANSPORT**

- A. A no-show transport is defined as any scheduled transport in which the patient:
1. Is not at the designated pick-up place when transportation arrives; or
  2. Cancels the transport with less than 24 hours' notice

**III. HOW TO AVOID GETTING A NO-SHOW**

- A. **Confirm** the transport
1. The transporter or a CHA will attempt to contact each patient the business day before the scheduled transport, to confirm the transport.
  2. If the patient does not receive a confirmation call by 4:00 pm the business day before the scheduled transport, the patient should call the transporter line to confirm the transport.
- B. **Give a minimum 24 hours'** notice when cancelling transports
1. When a patient needs to cancel or re-schedule a transport, the patient is expected to contact the Transporter Coordinator at least 24 hours before the scheduled transport. This allows time to reschedule the transport and provide an opportunity to fill the vacant slot with another patient.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health
Policy	Non-Emergency Medical Transportation No-Show
Date Approved	08/05/17
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2. If an unavoidable emergency comes up, and it is less than 24 hours before a transport, the patient must call and inform the Transporter Coordinator. Emergency excuses for cancellations less than 24 hours will be reviewed by the department manager to determine if the transport will be marked no-show or "late cancel."

#### **IV. TRANSPORTER RESCHEDULES**

There are times when a transporter must cancel or reschedule a transport due to illness, weather, or other circumstances beyond the transporter's control. Community Health will make every attempt to contact the patient as soon as possible to reschedule. Patient will not be penalized for the cancellation.

#### **V. COUNTING THE NO-SHOW TRANSPORT**

- A. No-shows are recorded and managed by the Community Health Department.
- B. If a patient schedules multiple transports during the same day, each missed round trip transport counts as a no-show.
- C. If an individual schedules multiple transports for a family member, and the family member fails to show, each missed round trip transport counts as a no-show for the family member.
- D. If a patient misses three or more transports, the patient is required to follow a scheduling protocol.

#### **VI. SCHEDULING PROTOCOL**

- A. First No-Show

After the first no-show the patient will receive a letter and a summary of the policy for review.

- B. Second No-Show

After the second no-show the following schedule restriction ensues:

1. Patient will receive a letter providing notice about the two no-show transports and the requirement to call and confirm future transports by 2:30 pm the business day **prior** to the transport.
2. If the patient does not confirm by 2:30 pm, the transport will be cancelled and offered to another patient.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health
Policy	Non-Emergency Medical Transportation No-Show
Date Approved	08/05/17
Date Revised	12/21/18

**VII. APPEAL**

- A. A patient may appeal a decision regarding the no-show transport, in accordance with the Tribal Administrative Procedures Ordinance.
- B. Community Health will include the appeal process in the letter regarding the no-show transport.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	Tobacco Prevention and Education Program
Date Approved	09/21/18
Date Revised	12/21/18

**Part 11D  
Tobacco Prevention and Education Program**

**I. INTRODUCTION**

The Siletz Community Health Clinic (SCHC) is dedicated to the health and well-being of the members of the Confederated Tribes of Siletz Indians and local community. Tobacco use is the leading cause of preventable disease, disability, and death in the United States. Smoking harms nearly every organ of the body, causing many diseases and affecting the health of smokers in general.

**II. POLICY**

**A. Tobacco Cessation Referral**

1. It is the policy of SCHC to ensure the following:
  - a. Patients and clients who are receiving services through a health care provider (Medical, Dental, Optometry, or Behavioral Health) are screened for the use of commercial tobacco products.
  - b. Patients and clients are referred to community health advocates for cessation resources if they are currently using commercial tobacco products and express a preference to stop using these products.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	Community Activities
Date Approved	08/04/18
Date Revised	12/21/18

**Part 11E  
Community Activities**

**I. INTRODUCTION**

The Community Health Department supports many activities that promote the health and wellness of community members.

**II. POLICY**

**A. Kayaking**

1. It is the policy of SCHC to promote activities such as kayaking that can be done in groups to encourage family bonding or on an individual basis for self-care.
2. The Community Health Department has recreational river equipment available to Siletz tribal members to check out. Equipment consists of youth kayaks, adult kayaks, paddles, life jackets, car racks, and inner tubes.
  - a. Kayaks are day use only and return must be same day as check out.
  - b. If the equipment is not clean when returned a deposit is required next time the borrower requests the equipment.
  - c. If the equipment is not returned in good condition or not returned at all the Siletz Tribe will seek compensation through garnishment of per capita up to full compensation for equipment.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	Siletz Tribal Violence Against Women Program
Date Approved	12/21/18
Date Revised	

**Part 11F  
Siletz Tribal Violence Against Women Program**

**I. POLICY**

It is the policy of the Siletz Community Health Clinic (SCHC) to provide services to individuals who are victims of domestic violence, dating violence, sexual assault, and stalking.

**II. ELIGIBILITY**

- A. Services are provided exclusively to adult victims of domestic violence, dating violence, or stalking. (The term, "adult victim" used throughout this policy shall include an adult victim and all minor dependents, if any.)
- B. Sexual Assault services are available to individual's age 11 years and older through the Tribal Sexual Assault Program.

**III. ASSISTANCE**

- A. Financial Assistance

Financial assistance can be provided to an eligible victim not to exceed \$500 per incidence or \$1,500 within a 12 month period of time if funding is available. The Health Director must approve exceptions to the amount of assistance provided to an eligible victim.

- B. Transitional Housing

Clients may access a year of transitional housing funds through the CARE program. These funds provide the client time to financially stabilize after relocating due to violence. Clients are responsible for finding and obtaining the unit to rent and are required to adhere to all requirements, policies, and stipulations of the rental agreement.

**IV. CONFIDENTIALITY**

- A. The CARE program protects all personally identifying or personal information of victims, including the following information:
  - 1. First and Last Name
  - 2. Home or other physical address
  - 3. All contact information (email, mailing address, internet protocol address, phone, cell phone or fax numbers)

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	Siletz Tribal Violence Against Women Program
Date Approved	12/21/18
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4. Social Security Number
5. Other information that would reveal the identity of the victim (race/ethnic background or religious affiliation).

B. The information referenced above is only disclosed when the CARE Program:

1. Obtained an informed, written, and time-limited consent from the victim to disclose the information.
2. Is compelled to reveal the information in accordance with a court order or statutory mandate, but only after making reasonable attempts to provide notice of the disclosure to the victim, and taking steps to safeguard the privacy and personal safety of the individuals affected by the release.

## **V. ACCOUNTING**

The CARE Program follows accounting practices and procedures that not only protect victim confidentiality, but also enable the CARE Program to comply with its obligation to provide access to complete and accurate financial accounting records to staff from the U.S. Department of Justice including staff from the Office on Violence Against Women, the Office of Chief Financial Officer at the Office of Justice Programs, and the Office of Inspector General.

## **VI. DOCUMENTATION RETENTION**

The CARE Program agrees to retain all financial records, supporting documents, statistical records, and other records for at least three years following notification by the grant authorizing agency that the grant has been programmatically and fiscally closed or at least three years following the closure of the audit report covering the entire award period, whichever is later.

## **VII. ASSISTANCE HEARING RIGHTS**

Individuals may appeal a decision of the CARE Program in accordance with the Tribal Administrative Procedures Ordinance.

## **VIII. EXPENDITURES**

Approval for all expenditures shall follow the Siletz Tribal Code Operations Manual §2.001 specifically referencing §2.027(c) with approval by the SCHC Director and CTSI General Manager before disbursement of funds.

<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	Field Worker Safety Training
Date Approved	12/21/18
Date Revised	

**Part 11G  
Field Worker Safety Training**

**I. PURPOSE**

The purpose of this policy is to support and keep field workers safe. Safety is a priority for all Community Health employees; however, field work has special considerations because it requires staff to work one-on-one in the field with clients. Community Health field workers perform a variety of field work including visiting client homes, contacting patients in homeless camps, and meeting people in the community.

**I. POLICY**

It is the policy of the Siletz Community Health Clinic to ensure that field workers have required safety training and tools prior to commencing field work required by their position.

**II. DEFINITIONS**

- A. Buddy System: Working in the field or virtually with another employee in part or full for additional security.
- B. Field Visit: Work performed away from an office setting.
- C. Field Workers:
  - 1. Harm Reduction Worker
  - 2. Community Health Advocates
  - 3. CARE Advocates
  - 4. Other employee approved by their supervisor to do field work.
- D. Hazardous Area or Activity: An activity or area that has inherent dangers due to the nature and history of the client being contacted or the area being visited. Normal required driving of a passenger vehicle is not considered a hazardous activity for purposes of this policy.



<b>SILETZ COMMUNITY HEALTH CLINIC</b>	
Program	Community Health Department
Policy	HIV Counseling and Testing
Date Approved	12/21/18
Date Revised	

**Part 11H  
HIV Counseling and Testing**

**I. PURPOSE**

The purpose of this policy is to decrease the burden and associated stigma of HIV to the impacted population in the Siletz community by building relationships with clients, providing access to affordable HIV testing services and increasing access to medical care and services with a closed loop referral system. The rationale is to prevent, detect, and treat HIV infection in the Siletz community.

**II. POLICY**

It is the policy of the Siletz Community Health Clinic (SCHC) to offer HIV Rapid Testing to clients in specified field settings where a majority of clients are at high risk (as defined by the Oregon Health Authority) for contracting HIV infection. HIV Rapid Testing is conducted according to HIV Counseling and Testing policies and procedures.

**III. DEFINITIONS**

- A. Field Testing: Professionals working in the community in public or private settings providing a rapid HIV testing.
- B. HIV: Human Immunodeficiency Virus
- C. HIV Risk Population: Low-income, unstably housed, or homeless persons; Lesbian, Gay, Bisexual, Transgender, and Queer/Questioning (LGBTQ) individuals; intravenous drug users; American Indian/Alaska Native and other ethnic and racial minorities; and persons living with mental health challenges or other disabilities.
- D. Rapid HIV Testing: A test that detects HIV antibodies in the blood.
- E. Window Period: The time from exposure to HIV infection and the point when the test will give an accurate result

**III. ROLES OF COMMUNICABLE DISEASE STAFF**

- A. Community Health Director works with the Lincoln County Health and Human Services (LCHHS) Program Manager to provide oversight and supervision of the Siletz community Harm Reduction Worker.
- B. Harm Reduction Worker responsibilities entail providing engagement and support services to clients in need, using a harm reduction model, by meeting individuals “where they are at” providing non-judgmental, non-coercive services and resources, including rapid HIV testing.