



Mass General Brigham

Commitment to People and Community

**Mass General Brigham
Outreach Program with
Native American Communities**

Indian Health Service



“Working alongside the dedicated IHS providers has truly inspired and motivated me in my life and work. Contributing much-needed clinical care to the Navajo community has re-energized me with a sense of meaning and purpose as a physician. Volunteering with the Outreach Program has been my antidote to burnout and has revitalized my spirit.”



Dedication

The Mass General Brigham’s Outreach Program is dedicated to the memory of Dr. Phyllis Jen, whose leadership, inspiration, and commitment were central to creating this opportunity for physician volunteerism. The program serves as a legacy to how Dr. Jen lived her life—reaching out to care for others who need support.


Yá’át’ééh

Hello



“Access to specialty care services is particularly challenging in more rural parts of the country, often limiting the treatment options for patients in these areas. We are extremely proud of the work of our Mass General Brigham clinical community – physicians, nurses and other staff working together through the Outreach Program to fill important gaps in care. This work is built on the premise of establishing long-lasting relationships that represent a sustainable approach to delivering advanced and high-quality care in these native communities.”

Tom Sequist, MD, MPH
Chief Medical Officer, Mass General Brigham



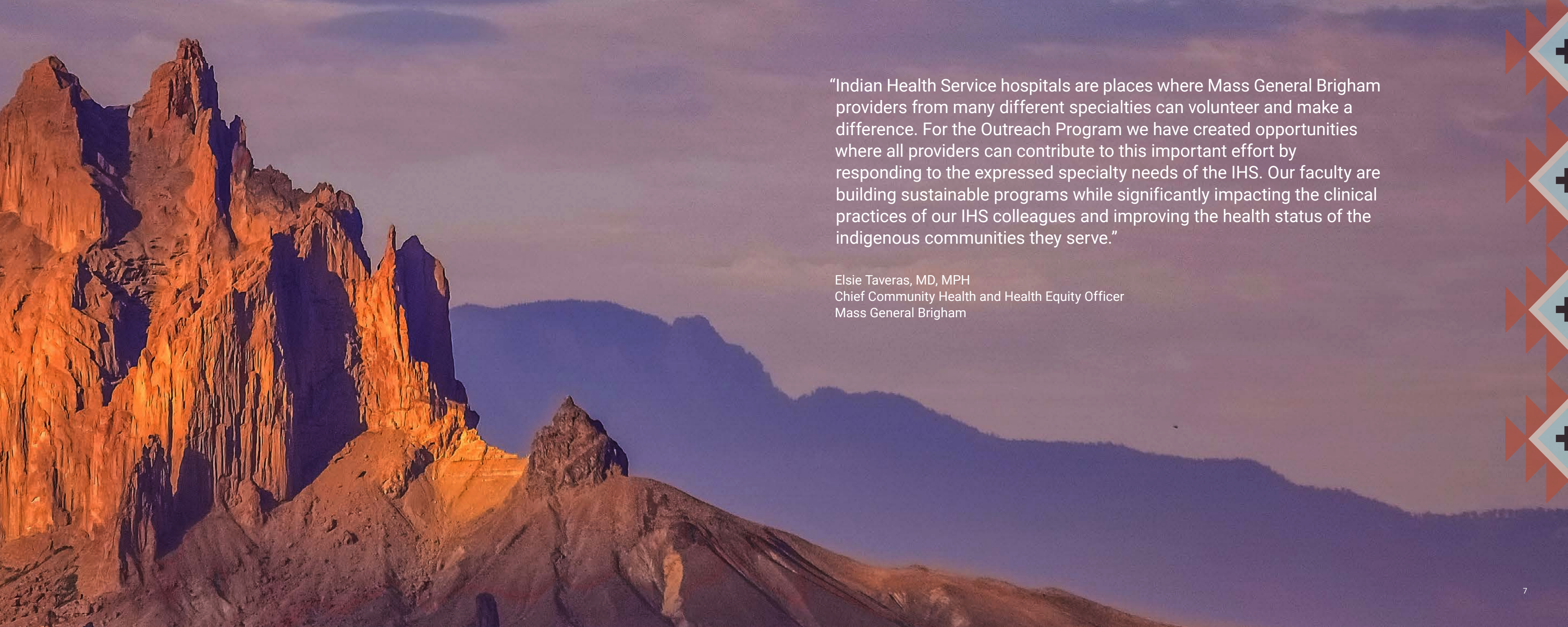
“As an IHS physician, to have world-class clinical expertise from the Mass General Brigham community available to us at virtually any time has changed the way we are able to provide health care and has given staff a support system of academic peers rarely available in rural settings.”

Massachusetts General Hospital, Brigham and Women’s Hospital, and McLean Hospital are among the top academic medical centers and specialty psychiatric hospitals in the world and are teaching affiliates of Harvard Medical School. Community health has been at the heart of Mass General Brigham’s vision for a healthier world.

Through training, education, research and service programs, Mass General Brigham and its affiliate hospitals help address health disparities and improves access to top-quality health care in poor communities in the United States and around the world.

Mass General Brigham’s Outreach Program, formed in 2008 by the Brigham and Women’s Physicians’ Council, selected the Indian Health Service (IHS) as its flagship program. The goal of the outreach effort is to enable Mass General Brigham providers to work alongside IHS colleagues while supporting direct patient care and physician education and training.

The program serves the Navajo Nation and the Navajo Area IHS health care facilities in Gallup and Shiprock, New Mexico, and in Chinle, Arizona.



“Indian Health Service hospitals are places where Mass General Brigham providers from many different specialties can volunteer and make a difference. For the Outreach Program we have created opportunities where all providers can contribute to this important effort by responding to the expressed specialty needs of the IHS. Our faculty are building sustainable programs while significantly impacting the clinical practices of our IHS colleagues and improving the health status of the indigenous communities they serve.”

Elsie Taveras, MD, MPH
Chief Community Health and Health Equity Officer
Mass General Brigham

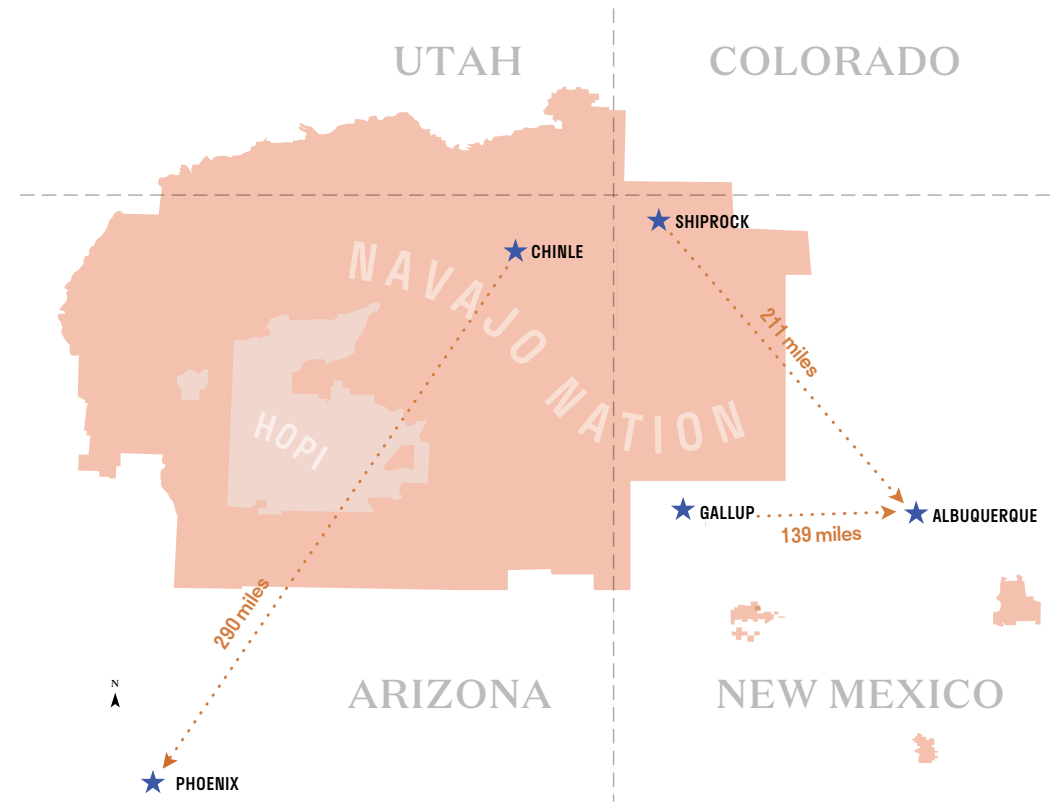


Navajo Nation

- Largest tribe in the United States
- 25,000 sq. miles, roughly 2 1/2 times the size of Massachusetts
- 175,000 people
- Sovereign nation

Limited access to specialty care

Academic medical centers with specialists are great distances from the IHS hospitals, and there can be as much as a six-month wait for appointments due to limited resources. Even when care may be available, many patients have travel constraints.



What is the Indian Health Service?

The Indian Health Service (IHS) is a federal agency within the Department of Health and Human Services that provides comprehensive health care services to nearly 2.2 million American Indian/Alaskan Natives (AI/AN). The IHS is an integrated national health care delivery system consisting of 35 hospitals, more than 300 health centers, and approximately 1,000 physicians across the country. The IHS is the most prominent

provider of health care services to the AI/AN population. While IHS does an impressive job responding to the health care needs of Native Americans, it faces challenges, including:

- **Delivering care in remote areas of the country**
- **Limited availability of specialty services**
- **Historical underfunding compared to other federal health care programs**

- **Difficulty recruiting health professionals, with an average vacancy rate of 25% for physicians, nurses and other care providers**

The Outreach Program supports the efforts of the Navajo Area IHS and hospitals serving the Navajo Nation.

Navajo area IHS hospitals



Onsite healing garden



Gallup Indian Medical Center (GIMC)



Northern Navajo Medical Center (Shiprock)



Onsite hogan for traditional healing



Chinle Comprehensive Health Care Facility (CCHCF)

Northern Navajo Medical Center is commonly referred to as Shiprock. The Shiprock Service Unit is the largest Service Unit within the Navajo Nation. The Shiprock Service Unit is located on the Navajo Reservation in the Four Corners region and serves as a referral center for many smaller health centers within even more remote areas of the reservation. This hospital has a staff of 50 physicians, 59 inpatient beds and a five-bed ICU, and receives approximately 156,000 ambulatory visits per year.

Gallup Indian Medical Center (GIMC) is located in Gallup, New Mexico, on the border of the Navajo Reservation. Like Shiprock, the hospital also serves as a referral center for many of the smaller health centers within more remote areas of the reservation. GIMC has a staff of 72 physicians, 68 inpatient beds and a six-bed ICU, and receives approximately 250,000 ambulatory visits per year.

Chinle Comprehensive Health Care Facility (CCHCF) is based in Chinle, Arizona (Northeast Arizona near Canyon De Chelly National Monument). CCHCF is a 60-bed primary care hospital that serves as the

health care hub for the central area of the Navajo Nation. There are 42 physicians on staff and an ICU with four beds.

At all three hospitals, medicine men and women are on staff to provide traditional diagnostic care for Navajo patients who prefer their services or who wish to complement their medical care with traditional healing. Some of the different diagnostic specialties include crystal gazing, hand trembling, water gazing, charcoal gazing, feather gazing and the listening way. Native healers also educate medical providers about traditional Navajo beliefs and ceremonies.



Photo taken before COVID. Training Specialists celebrating Native American Heritage month at Shiprock with Pediatric Nurse Supervisor (center) in traditional dress. Background sculpture in Shiprock lobby: Hózhó Náhasdíí ~ Renewal Of Spirit

The program

The Outreach Program enables faculty physicians to directly support and enhance patient care in an underserved community. The program extends the reach of Mass General Brigham world-class specialists to the Indian Health Service.

Mass General Brigham volunteer faculty physicians—both individually and in teams with other healthcare providers, including trainees—provide direct patient care and teaching services to IHS clinical colleagues working in the Navajo IHS hospitals. Providers volunteer their time, often using personal vacation time for the week spent on the reservation.

The Outreach Program also supports initiatives in non-clinical services at the request of the IHS, such as trainings in: Customer Service and Quality Management and Process Improvement. Back in Boston, the program offers remote teaching and real-time consultation to the IHS staff via remote conferencing.

The goal of all volunteer work is to work collaboratively with the IHS to develop sustainable clinical programs that can continue to thrive after the volunteers have returned to Boston.

Health disparities

- **Life expectancy, 2021** (Post-COVID): 65.2 years compared to 76.4 years
**11 years less than the general U.S. population¹
- **Life expectancy at end of 2019** (Pre-COVID): 71.8 years compared to 78.8 years. Leading cause of death for both groups, cardiovascular disease and cancer¹
- **Higher rates of death than all other Americans** in chronic liver disease and cirrhosis, diabetes mellitus, chronic lower respiratory disease, unintentional injuries (mva), assault/homicide and intentional self-harm/suicide²
- **One in five adults has diagnosed diabetes**; more than double the prevalence for the general US population with a mortality rate that is fastest growing³
- **Highest drug overdose rates** in 2020 (42.5%) and 2021 (56.6%) deaths per 100,000 and 33% increase for one year. (Race misclassification at death estimated to be as high as 34% for AI/AN – rates could be even higher)⁴
- **Infant mortality rates 2020, 1.75 times higher** than births from mothers who identify as white (7.68 compared to 4.4 deaths per 1,000 live births)⁵
- **Suicide rates 2020, 1.7 times higher** than overall US population and increased 20% between 2015-2022 compared with <1% increase in US population⁶

Sources: CDC^(1, 4, 5, 6), IHS⁽²⁾, NICOA⁽³⁾



Navajo Nation has one of the highest percentage of fully vaccinated populations in the country. The Outreach Program sponsored incentive events such as vaccine clinics at gas stations, with full tanks of gas given with each vaccine.



When medical staff were needed to keep operating rooms functioning at full capacity during COVID, Massachusetts General Hospital faculty provided anesthesia coverage to ensure urgently needed patient care was available.



The Outreach Program created thousands of care bags with educational material and medical supplies to be distributed throughout Navajo Nation.

Response to COVID

The disparities in COVID health outcomes for Indigenous people are staggering: American Indians/Alaskan Natives have higher COVID death rates than any other ethnicity. Navajo Nation has the highest per-capita infection and mortality rates in the country, despite also having one of the highest vaccination rates.

The primary-care facilities on Navajo Nation—already burdened with resource constraints—were challenged with caring for a lot of very sick and ventilated patients; at one hospital, the daily inpatient census increased five-fold. The Outreach Program refocused its mission and was there to support the providers and community during the pandemic in all ways—from helping with supply chain disruptions,

to providing 24/7 access to medical consultations, to staffing COVID units and Operating Rooms.

The Outreach Program sponsored 36 weeks of emergency and intensive care nursing support to meet urgent resource needs at one hospital. The unforgiving pace, patient deaths, loss of family members and esteemed elders took a great toll on entire staffs. In response, the Outreach Program provided mental health support to our Navajo Area IHS colleagues. Mental Health volunteers from McLean Hospital went to IHS sites on a weekly rotation. They offered 1:1 peer support and group sessions to the grieving, overwhelmed and under-resourced provider

and hospital staffs, and led mental health skill and counseling training to all. They spent time training staff on how to better care for patients who also have profound mental health needs due to the pandemic, and worked closely with provider wellness teams to build capacity for future activities.

From the first days of the pandemic, the Outreach Program provided vital protection, medical and patient care items, educational materials and community care bags, and supported vaccination clinics and staff and wellness programs such as yoga in the canyon.

Northern Navajo Medical Center mural by Navajo artists James Joe and Eugene Joe



“While our service unit has a long way to go on the journey healing, the visual presence of the mental health volunteers in our atrium and the great work they have done to help us heal, has greatly helped us to make sure that our staff’s mental health was a top priority. They have done an amazing job to help staff realize the importance of taking care of their own mental health. Our staff feel that although we still have a lot of trauma to process, we now have the beginnings of self-care skills to get started.”

Medical Director of Health Education Center for Wellness,
Northern Navajo Medical Center



Yoga wellness class for staff and providers at the Chinle Comprehensive Health Care Facility, Canyon De Chelly, Chinle, Arizona



Mental health professionals from McLean Hospital provide onsite support to dedicated Navajo Area IHS staff and providers, who work tirelessly to support their community and bear witness to much loss and suffering.



Donations of critical medical and personal protection items such as hand sanitizer, pulse oximeters, and exam gloves were ongoing throughout the crisis.



Donated iPads allowed isolated patients communication with family and health care providers in a safe and compassionate way.



“We are deeply grateful for our participation in the Outreach Program’s work with the Indian Health Service. This important collaboration has given McLean clinicians the opportunity to help address gaps in mental health education and clinical care with our colleagues practicing in the remote primary-care hospitals in Navajo Area IHS. In particular, our role during the peak of the COVID-19 pandemic was humbling and inspiring as we joined this remarkable community in their healing process. These impactful experiences are mutually beneficial, with our staff describing their volunteer work with the Outreach Program as profoundly rewarding and life changing.”

Scott L. Rauch, MD
President and Psychiatrist in Chief, McLean Hospital



Emergency and critical care nurses from Brigham and Women's Hospital provided 36 weeks of clinical coverage at Northern Navajo Medical Center during the peak of the pandemic to meet critical staffing needs.



“It is a privilege to be part of this important outreach work and collaborate closely with a domestic community in such need. Patients and clinicians on the Navajo Reservation face many challenges to access specialty clinical care. Massachusetts General Hospital faculty are volunteering their expertise and support to help build sustainable programs directly impacting the health status and well-being of this community and closing gaps in health care.”

Marcela Del Carmen, MD, MPH
President, Massachusetts General Physician Organization





Photo taken before COVID. Volunteer faculty cardiologist performing an echocardiogram at Northern Navajo Medical Center

Photos taken before COVID. Clockwise from right to left: mentoring IHS providers in Boston in substance use disorder; gynecologic oncology; neurology; and cardiology



Ways to volunteer

On-site visits

Most physicians at IHS hospitals are general care practitioners. Academic medical centers with specialists can be up to four hours' travel from the IHS hospitals, and there can be as much as a six-month wait for appointments due to limited resources. Even when care may be available, many patients have travel constraints.

In the Outreach Program model, patients with specialty needs are scheduled for appointments with their IHS provider in advance, and our volunteer specialists work alongside the IHS clinicians to treat and train during each patient encounter. Since the program began in 2008, Mass General Brigham volunteers have made hundreds of on-site visits and treated thousands of Native Americans.

Hosting and on-site mentoring

Mass General Brigham faculty are eager to host IHS physicians in Boston to allow them to experience cutting-edge medicine and receive intensive training within our own hospital. Each year 2-3 IHS clinicians spend time in Boston in a variety of clinical services including cardiology, radiology, dermatology, emergency medicine and gynecology.

Accomplishments

The goal of all volunteer work is to work collaboratively to develop sustainable clinical programs. IHS is able to offer these new clinical care services and expand treatment capabilities in clinical practices as a direct result of Mass General Brigham volunteer work.



Advanced Training in Cardiology, Neurology, Rheumatology, Endocrinology and Pulmonology

Heart Failure Clinic Established

Trauma-Informed Care Service Model Development

MRI Stroke Screening Training and Contrast Dye Guidelines



Behavioral Health Techniques and Motivational Interview Training

Screening and Intervention Strategy Training for Domestic Violence

Process Improvement and Quality Management Training

Customer Service Training



Minimally Invasive Gynecologic Surgery Training

Cystoscope Donation and Technique Training

Emergency Delivery, Newborn Resuscitation, and Transfer Stabilization Training

Diagnostic Skills Training in Child/Adolescent Psychiatry



Skin and Phototherapy Clinics established


Insulin Protocols established

Emergency Medicine Toxicology Conference

Emergency Medicine Ultrasound Training

Mindfulness Training for Health Care Professionals

Navajo Area Palliative Care Conference



“I am just back from my eighth trip to Gallup. I can truly say that I have never felt as appreciated by a group of physicians as I did by the group there. It is unusual to be able to go somewhere and come back thinking I was able to have a major impact on health care practice in that community.”

“Each year I come back, I feel like I have grown as a doctor and as a person.”

“The Outreach Program opportunities have been one of the greatest rewards of being a Mass General Brigham physician. Meeting the wonderful patients and witnessing firsthand the work of our remarkable IHS colleagues, many of whom are former Mass General Brigham trainees capable of practicing anywhere, reveals the essence of the doctor-patient relationship, and further demonstrates the limited role of physical resources at the end of the day. To me, my ongoing experiences of onsite visits, remote teaching and e-consultations prove to be an antidote to burnout, reminding me of why I chose this path.”





Heather Kovich, MD
Northern Navajo
Medical Center

From *The New England Journal of Medicine*
Audio Interview, April 16, 2017

“In my opinion, telemedicine works really well when you have a real relationship with the people on the other end of the line. At my hospital, we have a resource that has been really wonderful, which is a partnership with the Outreach Program in Boston. And so they do teleconferences with us, and what we are able to do is tell them what our learning needs are. Then they find us the appropriate expert on their staff to either give a lecture, do a Q&A or to review cases with us. But the really nice thing is they send volunteers regularly to work with us, which has been wonderful.”

Remote teaching

Video conferences

The Video Conference program offers Continued Medical Education (CME) gratis through live and interactive video conferences linking Mass General Brigham faculty with the multiple IHS sites simultaneously. Weekly conference topics are selected by the sites and include both didactic and challenging case-presentation opportunities. Sessions are recorded, and downloads are available online for ongoing reference in a medical library

Audio case conferences

Mass General Brigham specialists in Critical Care, Interstitial Lung Disease, Hematology and Endocrinology provide monthly clinical consultation and teaching services via audio conferencing to assist IHS clinicians treating their patients through case review and discussion. Often these patients have been seen by the Mass General Brigham specialist during an on-site visit.

Clinical consultation

IHS can request a consultation from a Mass General Brigham physician for a challenging patient case in any specialty and it will be arranged. There is also an established second-opinion Radiology program.

Outreach program online medical library

There are now hundreds of remote CME talks available to our IHS colleagues at <https://bwhedtech.media.partners.org/programs/ihs/>



Photo taken before COVID.
Joji Suzuki, psychiatrist, led a remote buprenorphine waiver training to 35 IHS providers in New Mexico and Arizona, enabling them to prescribe one of the most effective medications available to treat opioid use disorder.

“The Outreach Program has become a vital program in keeping with the longstanding community service mission of Brigham and Women’s Hospital. The appreciation from our IHS colleagues and their patients on the Navajo Reservation is matched by the gratitude from our physician volunteers for offering this opportunity. Whether through week-long onsite clinical rotations, mentoring IHS providers at the Brigham, or leading remote CME from Boston, our faculty specialists are making a difference in the lives of so many.”

Giles Boland, MD
President, Brigham and Women’s Physician Organization



Ellen Bell, MBA, MPH

Director, Community Health Outreach
and Training Programs
Mass General Brigham

Ellen has led the Outreach Program since its origins at Brigham and Women’s Hospital to its expansion to include Massachusetts General Hospital and McLean Hospital and move to Mass General Brigham Division of Community Health in 2022.

Ellen’s priority is to understand the needs of the Indian Health Service (IHS) and to work with its providers at all levels, including Navajo Area IHS leadership, to foster a true collaboration that is relevant, sustainable and culturally sensitive. She has directed the effort to build programs that optimize the Mass General Brigham network of specialists to fill important gaps in care in indigenous communities while also cultivating long-term relationships and achieving measurable impacts on indigenous health outcomes and physician learning.

Outside of Mass General Brigham, Ellen served as a board member for the Massachusetts 9/11 Fund and chaired its Health Care Committee. In this role, she developed a coalition of national and local government and health insurance agencies to guarantee access to medical and mental health care coverage to the Massachusetts families affected by the events of September 11, 2001.

Ellen graduated with honors from Washington University in St. Louis with a BS in Business Administration. She received her MBA and MPH joint degrees from Tulane University School of Business and School of Public Health and Tropical Medicine.

Contact: ebell1@mgb.org

MassGeneralBrigham.org/ihs

How can I make a donation?

The Outreach Program with Native American Communities is funded through a combination of clinical department and philanthropic support. Our budget supports physician travel expenses and program infrastructure. Physicians volunteer their time. Your financial generosity will help us increase the number of physicians we can support and expand the scope of our mission to include supporting allied health professional volunteers. Donations will also allow us to expand the telemedicine programs to further long-distance care and teaching. We hope you will consider making a gift to support this important program.

To learn more about how to make a gift,
please contact Ellen Bell at ebell1@mgb.org.

Ahéhee'

Thank you

Photography

Pages 1, 2, 4, 6, 11, 19, 21, 22, 25, 26, 28: Courtesy of Wayne Keene RN, BSN, MS, CAPT, US Public Health Service (ret.); Page 16: Robert Handin, MD, Senior Physician, Brigham and Women's Hospital and Professor of Medicine, Harvard Medical School Photo of Dr. Phyllis Jen courtesy of Dr. Robert Schlauch

Data sources

American Diabetes Association, Centers for Disease Control and Prevention, Indian Health Service, US Government Accountability Office



Mass General Brigham

