Navajo Area Indian Health Service
Navajo Nation Council Report
Summer Session

July 2026

Our Mission: to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level

Our Vision: a health system that embraces traditional knowledge and practices to foster thriving communities for seven generations.

Strategic goals:

1. Be a Leading Health Care Organization;
2. Ensure Comprehensive, Culturally Respectful Health Care Services;
3. Optimize Operations Through Effective Stewardship; and
4. Promote Proactive Intergovernmental and External Relationships.

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AREA DIRECTOR MESSAGE

Yá'át'ééh Honorable Navajo Nation President, Honorable Speaker, and Honorable Delegates of the 25th Navajo Nation Council,

On behalf of the Navajo Area Indian Health Service (NAIHS), it is my honor to provide this report highlighting our continued commitment to improving the health and well-being of the Diné people through strong partnerships, responsible stewardship, and excellence in healthcare delivery. We sincerely appreciate your leadership, collaboration, and unwavering advocacy on behalf of the Navajo Nation.

The strength of our government-to-government relationship continues to guide our shared efforts to improve access to quality healthcare, modernize health infrastructure, and address the health priorities of our communities. Together, we are making meaningful progress toward ensuring future generations of Navajo families have access to safe, culturally respectful, and high-quality healthcare services.

During this reporting period, the Navajo Area has advanced several significant initiatives that will have lasting impacts across the Navajo Nation. The Navajo Area Health Services Master Plan is progressing through extensive collaboration with Tribal leaders, communities, and federal partners to develop a long-term framework for healthcare delivery, workforce planning, facility modernization, and community health priorities. This planning effort will help guide future investments, including those supporting the GIMC Replacement Project.

Construction and modernization projects continue to move forward throughout the Navajo Area. The Echo Cliffs Health Center has reached substantial completion and is preparing for its grand opening, while construction of the new Pueblo Pintado Health Center remains on schedule. Improvements are also underway at GIMC, including expansion of the Emergency Department, as well as infrastructure improvements at Chinle, Crownpoint, Tsaile, and other federal service units. These projects represent our ongoing commitment to strengthening healthcare access while supporting workforce recruitment through new staff housing and facility improvements.

The Office of Environmental Health and Engineering continues to improve public health through investments in sanitation facilities, safe drinking water infrastructure, wastewater systems, biomedical engineering, and healthcare facility safety. This year, more than $69 million has been allocated to sanitation facilities construction projects throughout the Navajo Area, with additional funding anticipated through the U.S. Environmental Protection Agency. These investments reflect our shared commitment to ensuring safe water and healthy communities for the Navajo people.

Across all five federal service units—Chinle, Crownpoint, Gallup, Kayenta, and Shiprock—our dedicated healthcare professionals continue to expand services, improve patient access, strengthen emergency preparedness, advance chronic disease prevention, and enhance the overall patient experience. Innovative programs, such as mobile health services, expanded diabetes care, public health outreach, vaccination initiatives, telehealth, rehabilitation services, and the Just Move It campaign continue to demonstrate the dedication of our employees and the strength of our partnerships with Navajo communities.

The Navajo Area also continues to strengthen partnerships beyond our federal healthcare system. This quarter, we entered into a new Interagency Agreement with the New Mexico Department of Health to enhance collaboration in public health surveillance, emergency preparedness, and health promotion while simultaneously respecting Tribal sovereignty and priorities. We remain committed to expanding partnerships that improve the health of our communities through coordinated action and shared responsibility.

Financial stewardship remains one of our highest priorities. Through responsible management of federal resources, third-party collections, Special Diabetes Program for Indians funding, and support for Tribal programs operating under Indian Self-Determination authorities, we continue working to maximize every available resource in support of patient care and Tribal partnerships.

Our greatest strength continues to be our people. I extend my sincere appreciation to the physicians, nurses, pharmacists, engineers, environmental health professionals, public health staff, administrative employees, and every member of the NAIHS team whose dedication makes these accomplishments possible. Their commitment to serving our patients and communities reflects the highest ideals of public service.

As we move forward together, we remain committed to strengthening our partnership with the Navajo Nation through open communication, transparency, and mutual respect. We look forward to continuing our work alongside the Navajo Nation President, the Office of the Speaker, and the Delegates of the 25th Navajo Nation Council as we address healthcare challenges, pursue innovative solutions, and build healthier communities for generations to come.

Ahéhee' for your continued leadership, partnership, and support.

Respectfully,

DuWayne Begay, Ph.D.
Area Director
Navajo Area Indian Health Service

DETAIL APPOINTMENTS

Acting Director – Division of Sanitation Facilities Construction

NAIHS is pleased to announce the appointment of CDR Helena Shannon as Acting Director, Division of Sanitation Facilities Construction (SFC), Office of Environmental Health & Engineering (OEHE), effective July 1, 2026.

In this role, CDR Shannon will lead the Navajo Area SFC Program, overseeing engineering operations and collaborating with Tribal, Federal, State, and local partners to advance critical water, wastewater, and solid waste infrastructure projects that improve public health and quality of life throughout the Navajo Area.

An enrolled member of the Navajo Nation, CDR Shannon is Tábąąhá (Water's Edge Clan), born for Tó' Díchʼíiʼnii (Bitter Water Clan). She has more than 24 years of engineering and leadership experience and is a registered Professional Engineer in the State of Arizona.

CDR Shannon earned a Bachelor of Science in Civil Engineering from Northern Arizona University and a Master of Engineering in Engineering Management from the University of Idaho. Most recently, she served as Deputy Director of the Office of Environmental Health & Engineering for the Navajo Area Indian Health Service. Her previous leadership roles include Deputy Director of the Division of Sanitation Facilities Construction, District Engineer and Deputy District Engineer for the Gallup Service Unit, Senior Field Engineer for the Kayenta Service Unit, and Field Engineer for the San Carlos Service Unit in the Phoenix Area. She began her engineering career with the Alaska Native Tribal Health Consortium, serving as an Associate Engineer from 2003 to 2008.

Acting Navajo Area Nurse Consultant

We are pleased to announce the appointment of Ms. Jolene A. Tom, RN, BSN, as the Acting Navajo Area Nurse Consultant**.**

Ms. Tom is a member of the Navajo Nation and is from Ganado, Arizona. She brings 24 years of dedicated service with the Indian Health Service (IHS) and a strong commitment to advancing nursing practice and public health throughout the Navajo Area.

Prior to this appointment, Ms. Tom served as the Public Health Nursing Supervisor at the Chinle Service Unit, where she provided leadership and oversight of daily program operations.

Throughout her IHS career, Ms. Tom has served in a variety of clinical and leadership roles across the Navajo Area, including medical-surgical nursing, public health nursing, and Public Health Nursing Manager at the Chinle Service Unit. She also contributed at the national level through the IHS Office of Clinical and Preventive Services, Division of Nursing Services, where she served as a Grant Nurse Consultant**,** supporting Indian IHS, Tribal, and Urban Indian health programs.

Acting Chief Executive Officer – Chinle Service Unit

Dr. Johanna Gorman Bahe, DNP, RN, is an enrolled member of the Navajo Nation. She is Dziłt'aadi Kinyaa'áánii (Near the Mountain Towering Clan), born for Áshįįhí (Salt People clan), Ma'ii Deeshgiizhnii (Coyote Pass People Clan) dabi cheii (maternal grandfather), Naadáá' Diné'é (Corn People clan) dabi nálí (paternal grandfather). She serves as the Director of the IHS Headquarters Division of Nursing Services (DNS) and is currently detailed to the Chinle Service Unit as the Acting Chief Executive Officer.

Dr. Bahe began her IHS career in September 1996 as an Obstetrics clinical nurse. Throughout her career, she has provided care across the lifespan, from newborns to older adults, and has served in multiple leadership roles, including House Supervisor, Supervisory Clinical Nurse for Pediatrics, Assistant Chief Nurse Executive, and Chief Nurse Executive. She also served as a Sexual Assault Nurse Examiner at the Chinle Service Unit.

Dr. Bahe has dedicated her entire nursing career to serving Native American communities, primarily on the Navajo Nation. She earned her BSN from the University of New Mexico, her MSN in Clinical Systems Leadership from the University of Arizona, and her DNP in Nurse Executive Organizational Leadership from the University of New Mexico.

RETIREMENTS

Darlene Chee, Chief Executive Office – Chinle Service Unit

On May 27, 2026**,** Ms. Chee officially concluded an extraordinary career, marking the end of a remarkable era and the beginning of an exciting new chapter in retirement.

Ms. Chee began her journey with the IHS as a Health Technician at the Pinon Health Center. Driven by a passion for serving her community, she earned her nursing degree and went on to serve as a Public Health Nurse (PHN). Throughout her career, she embraced increasing leadership responsibilities, serving as a PHN Supervisor, Health System Administrator, Administrative Officer, and ultimately as the Chief Executive Officer of the Chinle Service Unit.

Over the course of her 20-year career, Ms. Chee demonstrated exceptional leadership, compassion, and an unwavering commitment to improving the health and well-being of the communities she served. Her dedication, professionalism, and service have left a lasting impact on the IHS and have inspired colleagues, staff, and community members alike.

NAIHS sincerely thanks Ms. Chee for her countless contributions and wishes her continued health, happiness, and fulfillment as she begins this well-deserved retirement. Her legacy of service, leadership, and commitment to excellence will be remembered for years to come.

CAPT Lyle Setwyn, Director – Sanitation Facilities and Construction

At the end of June 2026, CAPT David Lyle Setwyn retired from the NAIHS after serving as Director of the Division of Sanitation Facilities Construction (SFC) within the Office of Environmental Health & Engineering (OEH&E).

CAPT Setwyn dedicated 20 years of service as a U.S. Public Health Service (USPHS) Engineer Officer, serving in multiple assignments with the IHS and the U.S. Environmental Protection Agency (EPA). He began his career as a Field Engineer with the IHS Sanitation Facilities Construction Program in Yuma, Arizona. He later served as a Regulatory Engineer with the EPA in American Samoa before taking on leadership roles as a Supervisory Engineer, District Utility Consultant, and Operations and Maintenance Coordinator in the Oklahoma and Phoenix Areas.

As Director of the Navajo Area SFC Program, CAPT Setwyn was responsible for the oversight and management of program operations, engineering activities, and collaboration with Tribal, Federal, State, and local partners to advance critical water, wastewater, and solid waste infrastructure projects throughout the Navajo Area. His leadership helped strengthen essential public health infrastructure and improve access to safe and reliable sanitation services for communities across the Navajo Nation.

In addition to his responsibilities within the SFC Program, CAPT Setwyn served as the Acting Director of OEH&E beginning in August 2024, providing steady leadership during a period of organizational transition until the return of the permanent OEH&E Director. He was also an active member of the Navajo Area Governing Body and regularly represented the Area through Chapter Official updates and presentations to the Navajo Nation Council and other Tribal entities.

Throughout his career, CAPT Setwyn demonstrated an unwavering commitment to public service, engineering excellence, and collaboration with Tribal partners. His leadership, professionalism, and dedication have left a lasting impact on the Navajo Area, the IHS, and the communities he served.

We are grateful for CAPT Setwyn's years of dedicated service to the Navajo people and the IHS. We extend our sincere congratulations on his retirement and wish he and his family continued health, happiness, and success in all their future endeavors.

NAVAJO AREA PROJECTS AND INITIATIVES

Navajo Area Health Services Master Plan

The Navajo Area Health Services Master Plan (HSMP) project launched earlier this year and has made significant progress in establishing the foundation for this planning effort. We appreciate the time, input, and collaboration provided by our Tribal and Federal partners.



The HSMP will assess current and future healthcare delivery needs across the Navajo Area and develop a comprehensive planning framework to guide future decisions regarding healthcare services, workforce needs, facilities, staff quarters, and community health priorities. The project will produce Community Health Profiles (CHPs) for participating sites and an area-wide assessment to support future healthcare planning, including activities related to the GIMC Replacement Project.

The HSMP is a NAIHS planning initiative supported by Bodwé Professional Services Group and Forvis Mazars under contract with NAIHS. The contractors provide technical and planning support, but do not have authority to make policy, funding, operational, or programmatic decisions on behalf of IHS.

The planning team is nearing completion of on-site visits to Tribal and Federal service units across the Navajo Area. These visits provide valuable information on local healthcare delivery systems, facility conditions, workforce challenges, and community priorities.

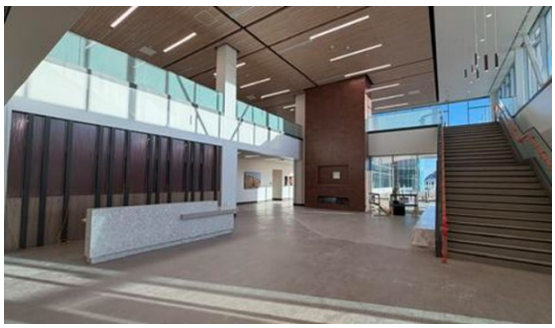
<u>Progress to Date</u>

- Conducted project kickoff meetings and stakeholder outreach.
- Established points of contact with participating sites.
- Held a virtual Town Hall and regional planning meeting to introduce the project and planning objectives.
- Initiated data collection and coordination with participating sites.
- Began development of Community Health Profiles and baseline healthcare assessments.
- Engaged Tribal, Federal, and community stakeholders to identify healthcare priorities and future planning considerations.

The HSMP findings and recommendations are intended to inform long-term planning and do not constitute final agency decisions. Any future projects, funding decisions, or programmatic changes will be subject to applicable statutory, regulatory, policy, budgetary, and approval requirements.

Echo Cliffs Healthcare Facility

As of June 23, 2026, the Echo Cliffs Health Center (formerly titled Bodaway/Gap Health Center) achieved Substantial Completion on May 28, 2026. A final Certificate of Occupancy (Beneficial Occupancy) was issued on June 30, 2026, following completion of the remaining commissioning activities.



Installation of furniture, medical equipment, and information technology systems remains on schedule for completion in July 2026. Artwork installation is complete, while facility signage and final interior finishes are nearing completion.

The Division of Engineering Services (DES) and the Navajo Area coordinated with Tuba City Regional Health Care Corporation (TCRHCC) in preparation for the June 30, 2026, site visit. The site visit agenda focused on the Title V Construction Project Agreement (TVCPA) and Modification No. 1 closeout review, including final inspection requirements for the Echo Cliffs Health Center.

The Staff Quarters Project also remains on schedule. Utility infrastructure improvements are underway, and the Navajo Tribal Utility Authority (NTUA) has mobilized to complete substation upgrades supporting the housing development. TCRHCC remains on track to complete the first 70 housing units by the end of August 2026, with the remaining units scheduled for completion later in the year. Recruitment of healthcare providers and operational staff is also progressing in preparation for activation of the new facility.

Pueblo Pintado Health Center

The Pueblo Pintado Health Center and Staff Quarters Project will provide a comprehensive ambulatory care health facility and 82 staff housing units to serve the Navajo Nation communities in the Pueblo Pintado, NM region. The facility is designed to serve a projected user population of 5,991 through 2028 and support approximately 255 IHS employees, in addition to Navajo Nation staff assigned to tribally operated programs. The planned facility will encompass approximately 125,884 gross square feet.

Construction began on January 1, 2026, and remains on schedule for completion in July 2028. Current work includes earthwork and foundation construction for the healthcare facility. IHS continues to coordinate with the designer of record and the local electric utility provider to redesign the facility's primary electrical distribution system. This effort has not affected the overall project schedule. Funding for the Staff Quarters Project has been identified, and preparation of the solicitation package is underway.

GIMC Replacement Facility

Following a March 12, 2026 Gallup site visit by representatives with the U.S. Department of Health and Human Services, the Navajo Nation, and the IHS, Navajo Area Office leaders started holding weekly meetings with Navajo Nation representatives from the Navajo Department of Health and the Division of Natural Resources to advance the Site Selection Evaluation Report - Phase II (SSER Phase II) for the proposed Gamerco site.

Completion of the Gamerco site SSER Phase II has been delayed beyond the original June 30, 2026, target date for completion. The revised completion date is October 2026, contingent upon receiving a variety of site-specific technical studies, including an Environmental Assessment, from the NDOH. The initial draft technical studies are expected the week of July 27, 2026.

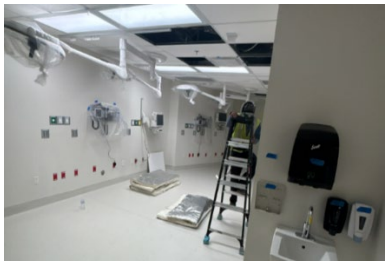
The IHS Navajo Area Office, in collaboration with the Office of the General Counsel, has also begun preliminary planning to assess National Environmental Policy Act (NEPA) requirements for the proposed Gamerco site**.**

GIMC Emergency Department

The GIMC Emergency Department (ED) continues to address space deficiencies by renovating and expanding the ED and Observation Unit. The project renovation includes approximately 3,434 gross building square feet (BGSF) of existing space, including the former Urgent Care area, and adds approximately 2,283 square feet through a new expansion. Upon completion, the ED will encompass approximately 10,600 BGSF.

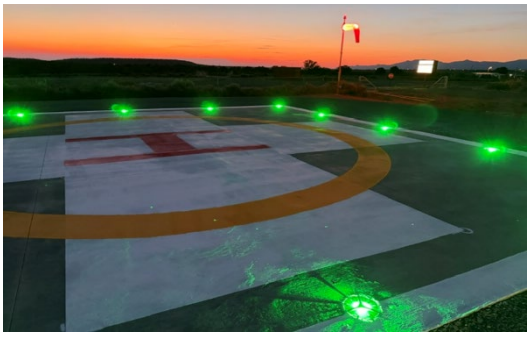
The expanded department will increase patient capacity and improve the delivery of emergency care services. It will include two trauma rooms, 13 patient treatment rooms, two triage rooms, a dedicated waiting area, and a total of 16 patient care spaces.

LAM Corporation, of Gallup, New Mexico, is the project's general contractor and is expected to complete Phase 2 by July 24, 2026. GIMC plans to begin providing patient services in the new Emergency Department on August 1, 2026.



Tsaile Projects – Helipad Construction Project

The Helipad Construction Project is one of three active construction projects within the Chinle Service Unit. Construction of a new helipad, storage Connex pad, and basketball court at the Tsaile Health Center began on February 9, 2026, and is expected to be completed between July 7 and September 30, 2026.




Chinle Service Unit Expansion Project

The current expansion project includes the design of an expanded Pharmacy Department with drive-up pharmacy services. The addition will be located on the northwest side of the main hospital building, with design completion scheduled for September 2026.

The latest contract modification also adds a generator to provide the electrical capacity required to support the replacement of six boilers, ensuring reliable backup power for the upgraded mechanical systems.

Crownpoint Service Unit - South Quarters Repair-by-Replacement

The Crownpoint Service Unit is replacing 33 existing staff housing units on the south campus in Crownpoint, New Mexico. The project includes demolition and abatement of 25 existing units and construction of 33 new residential units, consisting of three single-family homes (one- and two-bedroom, including one ADA-accessible unit), six quadplex buildings (one- and two-bedroom units), and three duplex buildings (two-bedroom units).

The project also includes replacement of sidewalks, ramps, curbs, gutters, and pavement sections, along with utility infrastructure upgrades to improve service reliability and ensure compliance with current building codes.



New Mexico Interagency Agreement
On June 23, 2026, Navajo Area Director Dr. DuWayne Begay and New Mexico Department of Health Secretary Gina DeBlassie signed an Interagency Agreement to strengthen collaboration on public health initiatives between NAIHS and the New Mexico Department of Health (NMDOH).

This agreement reinforces a shared commitment to advancing public health through meaningful partnership, coordinated action, and the exchange of information while honoring Tribal priorities and values. By working together, NAIHS and NMDOH will enhance public health surveillance, expand access to resources, strengthen emergency preparedness, and improve health outcomes for Tribal and surrounding communities.

FEDERAL SERVICE UNITS

Chinle Service Unit

- In May 2026, the Mobile Health Unit partnered with the Chinle Unified School District to provide pre-participation sports physicals at the Chinle Wildcat Den. During the first three deployments, the team completed more than 70 physical exams and continues to expand access to care for students throughout the service unit.

- The Pinon Health Center (PHC) Information Management Department maintained its coding inventory within the established threshold of 300 records per month (April–June 2026), supporting timely claims processing, third-party reimbursement, revenue cycle performance, and regulatory compliance despite periodic staffing fluctuations.
- The Obstetric Care Unit (OCU) trained Chinle Service Unit (CSU) Emergency Department staff on rapid obstetric response for postpartum hemorrhage. OCU also conducted simulation drills on April 30, 2026, focused on neonatal resuscitation using the Neonatal Resuscitation Program (NRP) algorithm.
- On May 28, 2026, a neonatologist from Flagstaff Medical Center provided education on the management of preterm neonatal respiratory distress.
- Staff completed training in Awareness, Vigilance, Avoidance, Defense, and Escape (AVADE) for nursing personnel, Certified Healthcare Environmental Services Technician (CHEST) for motor vehicle operators, and Central Sterile Reprocessing (CSR) instrument processing and competency following the department's reopening on May 18, 2026.
- The PHC continued recruitment efforts to strengthen outpatient rehabilitation services. Of six authorized positions, three were filled and three were vacant during the April–June 2026 reporting period. One physical therapist position has since been filled, and a second selected candidate is completing the Human Resources onboarding process.
- The Chinle Service Unit Outpatient Rehabilitation Department continued providing inpatient and school-based services, including speech therapy, audiology, occupational therapy, and physical therapy.
- Effective June 29, 2026, Chinle Comprehensive Health Care Facility's Main Pharmacy extended its hours of operation to improve patient access to prescription pickups and medication refills.
- The PHC Nursing and Medical Departments are collaborating to establish a centralized outpatient patient service area to improve access to medication refills, referral renewals, and patient inquiries. The initiative is expected to improve patient flow, reduce wait times, enhance the patient experience, and increase primary care appointment availability for acute care visits.
- The Diabetes Group class and shared medical visits provide an effective approach to improving patient outcomes while addressing the growing demand for diabetes care. The Tsaile Health Center has offered the class in the community to improve glycemic control, increase adherence to treatment plans, reduce diabetes-related complications, and enhance overall quality of life.

- The Tsaile Health Center continues to partner with the Joslin Vision Network (JVN) Eye Program to provide comprehensive diabetic retinal screening for patients at risk of vision loss due to diabetes.

Crownpoint Service Unit

- The Crownpoint Just Move It (JMI) Program has developed and sustained one of the most comprehensive wellness programs across Navajo Area. The school-Based JMI Series has facilitated program activities at the following schools:
  - Crownpoint Community School - 279 students and 18 staff members.
  - Lake Valley Navajo School – 20 students and 7 staff members
  - Baca Community School – 280 students and 12 staff members
  - Dibe' Yazhi' Habitiin Ji' Olta' (Borrego Pass) – 93 students and 9 staff members
- On May 11th, 45 participants attended the Health Literacy Training held at Diné College – Crownpoint Campus. The training focused on evidence-based communication strategies designed to enhance patient understanding and outcomes.

- During the quarter, the Crownpoint Service Unit gardening initiative continued to strengthen community and employee garden programming in support of food sovereignty, nutrition education, cultural wellness, and sustainable food systems. Ongoing work included creating watering schedules, planning follow-up site visits, coordinating employee garden planting and drip irrigation.

- The Crownpoint Service Unit has seen a steady increase in patient admissions, which reflects the growing trust patients and families have in our health care facility.

Month	Admission	Observation
APRIL 2026	16 admissions	8 observations
MAY 2026	21 admissions	7 observations
JUNE 2026 – As of 06/15/2026	6 admissions	2 observations

- The Crownpoint Service Unit closely monitored patient wait times in coordination with the Ambulatory Care Clinic Supervisor Nurse (SN) and the data abstracter. The Patient Centered Medical Home (PCMH) Committee meets every month to discuss and review the total amount of time a patient spends in the outpatient department from arrival to departure. Below is the cycle time from January – May 2026.

MONTH	Jan	Feb	Mar	April	May
2025 CYCLE Time in Minutes	52	49	55	71	58
2026 CYCLE Time in Minutes	60	59	65	62	64

- The Thoreau Satellite Dental Clinic successfully completed a comprehensive modernization of its sterilization area, bringing the facility to full compliance with current sterilization and infection prevention standards. This six-month initiative required close collaboration among multiple disciplines, including Biomedical Engineering, Facilities Management (plumbing and electrical), and Infection Prevention subject matter experts from both the Service Unit and the Area Office. The successful completion of this project enhances patient safety, supports regulatory compliance, and strengthens the clinic's capacity to provide high-quality dental care.

Gallup Service Unit

- The Gallup Service Unit Division of Nursing demonstrated exceptional teamwork, adaptability, and commitment during the recent vertical transportation limitations. The Nursing staff assumed additional responsibilities, including supporting Emergency Department operations, patient transport, patient navigation and call center functions, to ensure continuity of care and minimize service disruptions.
- In April 2026, the Emergency Department was recognized for achieving zero patient falls, demonstrating its strong commitment to patient safety and fall prevention. Staff maintained heightened awareness and consistently implemented evidence-based fall prevention interventions to provide a safe environment for patients. In recognition of this achievement and its contribution to quality patient care, the Emergency Department received a Certificate of Recognition.

- In May 2026, the Public Health Nursing team focused on the Pneumococcal Conjugate Vaccine (PCV) Performance Improvement Project. Pneumococcal vaccines help protect against serious pneumococcal infections, and the project emphasizes routine PCV vaccination for adults aged 19 years and older. The team also collaborated with the New Mexico Department of Health (NMDOH)to ensure accurate vaccination counts and reporting through the electronic health record (EHR) system. Public Health Nursing staff supported this effort by conducting patient outreach, scheduling vaccination appointments, and providing home visits to increase vaccine access and improve vaccination uptake. As a result of these coordinated efforts, a total of 373 Pneumococcal Conjugate Vaccines were administered during April and May 2026.

- The Division of Nursing continues to actively recruit and hire qualified healthcare professionals to address critical staffing needs. Since February 2026, following the launch of the largest hiring initiative in agency history, the Division has selected 21 Registered Nurses, 12 Nursing Assistants, 5 Medical Support Assistants, and 2 Health Technicians. Onboarding activities for these positions remain ongoing.
- Syphilis rates remain a significant public health concern among American Indian and Alaska Native populations in McKinley County. In collaboration with Infectious Disease providers and nurses, an Internal Medicine provider, the NMDOH, and the Division of Public Health, the Public Health Nursing team conducted a community HIV and syphilis screening event on May 28, 2026, at Walgreens in Gallup, New Mexico.
- During National Nurses Week, observed May 6–12, 2026, the Division of Nursing proudly recognized the dedication, compassion and professionalism of nurses who make a meaningful difference every day. Several outstanding nurses were honored with the prestigious DAISY Award for their exceptional commitment to compassionate, patient-centered care. Many nurses also received recognition directly from patients and families for going above and beyond to provide comfort, dignity, and healing. The Division extends its sincere appreciation to all nurses for their invaluable service and unwavering dedication to the community.

- The Mobile Medical Unit has been deployed to several "Just Move It" community events to promote physical activity and healthy lifestyles. These events encourage participants to improve their overall health, reduce the risk of chronic disease and strengthen social connections within their communities. By creating a fun, inclusive and accessible environment, the "Just Move It" initiative inspires long-term healthy habits and increases awareness of the benefits of regular physical activity.

Kayenta Service Unit

- The Kayenta Service Unit (KSU) celebrated National Nurses Month and Nurses Week with a variety of activities recognizing the dedication and contributions of nursing staff and support personnel. Events included a community walk/run, health fair, employee appreciation activities, and recognition ceremonies honoring outstanding staff through the DAISY and BEE Awards.

- The Dental Department upgraded its dental vacuum pumps replacing outdated equipment that is fully functional to improve quality and safety concerns.
- The Inscription House Health Clinic (IHHC) recently acquired a pre-owned ambulance to support transport of patients requiring transfers to higher levels of care. The ambulance enhances IHHC's ability to provide timely patient transport services, while reducing the operational burden for Kayenta Alternative Rural Hospital (KARH) staff.

- The KSU Diabetes Program distributes Welch Allyn Home Blood Pressure Monitoring devices to patients with diabetes and hypertension who have uncontrolled blood pressure readings. Through regular monitoring, patient education, and ongoing clinical support, the program aims to help patients achieve better blood pressure control and reduce the risk of diabetes- and hypertension-related complications.
- The KSU Diabetes Program provided services to patients at KARH and IHHC by maintaining staff availability for diabetes education and Joslin Vision Network (JVN) services. During the reporting period, Diabetes Education staff engaged with 319 patients. The program continues to support patients achieve better health outcomes through education, screening, and ongoing clinical collaboration.
- KSU continues to advance the Video Security Surveillance System (VSSS) Modernization Project. The project will replace the outdated surveillance system at KARH and implement integrated surveillance capabilities at IHHC and Dennehotso Health Station (DHS), enhancing safety, security, and operational efficiency across all facilities.

Shiprock Service Unit

- The Shiprock Service Unit (SSU) celebrates 34 years of the Just Move It (JMI) program that has become a community tradition across 26 communities on the Navajo Nation to promote physical activity. The JMI is a family-friendly event that supports active lifestyles, healthy living, and strong community. Navajo Nation Chapters are valuable partners to JMI, and provide support for fruit, water, and volunteers. In 2025, approximately 6,947 individuals participated in JMI and, to date in 2026, over 4,973 participated in 14 community events and JMI events continue across the Navajo Nation.
- In April and May 2026, the Four Corners Regional Health Center (FCRHC) held a Skills Fair to measure and verify employee's work skills and knowledge to increase workforce readiness and guide professional development. The clinical and support employees participated in hands-on training in emergency response, infection prevention, hand

hygiene, personal protective equipment use, patient safety practices, and medication-related skills.

- SSU held a training on Awareness, Vigilance, Avoidance, Defense, and Escape (AVADE) as part of the Workplace Violence Prevention (WVP) Program to protect employees, patients and visitors. The AVADE training remains a key component to identify, prevent, and de-escalate aggressive behavior by using de-escalation techniques, situational awareness skills, personal safety strategies, and response options designed to reduce the risk of workplace violence.
- The Health Information Management Department at Northern Navajo Medical Center (NNMC) participated in a two-day Inpatient Diagnostic Related Group Coding Training in Gallup, New Mexico. The training focused on coding, documentation, reimbursement, and compliance related to inpatient billing.

- NNMC celebrated the roles of HIM employees in the SSU healthcare system. The celebration was a time to recognize individuals and groups for their accomplishments and commitments to provide outstanding service to patients, providers, and community. Staff also participated in the National Health Information Professionals Week to strengthen morale and commitment to patient-centered care.

- In April 2026, the Laboratory Department at Dzilth-Na-O-Dith-Hle Health Center (DZHC) added a high-sensitive Troponin I test to conduct blood test for early detection of heart damage. This test helps physicians determine if a patient has had a heart attack or not. Having an early detection test in a rural clinic like DZHC enables physicians make quicker clinical decisions.

- The Four Corners Regional Health Center (FCRHC) expanded the Diabetes Care Clinic to increase support for patients with diabetes and other chronic diseases. The expanded clinic will have a team that consists of doctors, nurses, pharmacists, behavioral health employees, public health nursing employees, and case managers to provide coordinated treatment for patients with elevated blood sugar levels and complex medical needs.
- The Health Information Management (HIM) Department at DZHC is converting the paper-based Master Control Log into an electronic format. The Master Control Log serves as a historical record for each patient chart with key information about patient's last date of service, chart inactivation dates, and transfers to the Federal Records Center.
- The Public Health Nursing at DZHC collaborated with the NNMC's Health Promotion and Disease Prevention (HPDP) Program to organize and complete the "Just Move It" (JMI) community event.
- On March 31, Gary Russell-King, Director of Health Information Management at NNMC presented at the 2nd Annual Navajo Area Purchased/Referred Care Conference in Farmington, New Mexico. The presentation summarized the secure exchange of health information that supports care coordination, timely treatment decisions, and communication between patients and providers.

- The Community Fitness Team with NNMC's HPDP program continues to provide access to care for patients and families at the Partners for Wellness (P4W) Center. Since opening in 2004, P4W has provided coaching and support to promote active lifestyles and prevent diabetes.

NAVAJO AREA DIVISIONS AND DEPARTMENTS

Division of Financial Management

- IHS will transition to a new travel system in April 2027. Navajo Area Office staff is preparing for the transition by updating traveler profiles and will conduct monthly work sessions to address system errors and assist with the transition process.
- During the 3rd quarter, the Navajo Area Certifying Officer approved 8,136 invoices for payment. Total invoices approved for payment as of June 2026 are 24,122. These payments include vendor payments, Travel reimbursements, and Public Law 93-638 payments.

Quarter 1 (October 2025 – December 2025)	7,704
Quarter 2 (January 2026 – March 2026)	8.282
Quarter 3 (April 2026 – June 2026)	8,136
Total	24,122

- Medicare and Medicaid Services launched the Medicare Transaction Facilitator (MTF) program on January 1, 2026, as part of the Inflation Reduction Act's Medicare Drug Price Negotiation Program. Under this program, pharmaceutical companies provide a rebate on certain drugs. As of June 25, 2026, the NAIHS Service units collected $769,160 through

the MTF program. The MTF program continues to evolve and is expected to further increase revenue to support patient care across NAIHS.

- NAIHS federal facilities collected $439,857,699 in third party collection by the end of June 2026. Below is the breakdown by service unit. Navajo Area Office Finance monitors the collections received on a weekly basis to ensure timely posting by all Service Units. In addition, Navajo Area Office successfully enrolled various insurance companies to submit electronic payments. This assists each Service Unit with decreasing their Accounts Receivable Aging.

	1st Quarter	2nd Quarter	3rd Quarter	Total
Chinle	$ 35,829,350	$37,606,590	$38,270,222	$111,706,162
Crownpoint	$10,774,385	$11,589,169	$12,449,468	$34,813,022
Gallup	$47,290,536	$48,863,365	$45,831,727	$141,985,628
Kayenta	$7,983,505	$10,407,157	$10,413,376	$28,804,038
Shiprock	$39,636,953	$43,340,867	$39,571,029	$122,548,849
Total:	**$141,514,729**	**$151,807,148**	**$146,535,822**	**$439,857,699**

- NAIHS entered the fourth year of the five-year grant cycle with the Special Diabetes Program for Indians (SDPI) grant. Within the four years, a total of $25 million in SDPI grant funds has been received and distributed to Navajo Area Office and Navajo Area's five federal service units. Navajo Area awaits the release of the remaining award in the amount of $3,577,756.00 for grant year 2026. The SDPI grant is essential to Navajo Nation communities in furthering the education, prevention and treatment of diabetes.

The Special Diabetes Program for Indians (SDPI) grant - 5-year grant cycle

Year 1 2023	Year 2 2024	Year 3 2025	Year 4 2026	Year 5 2027	TOTAL
7,155,511.00	7,405,511.00	7,155,511.00	3,577,756.00		5,294,289.00

- The table below shows all payments to Navajo Nation-based P.L. 93- 638 and Urban Indian Health Care partners for the first, second, and third quarters. The NAIHS goal is to maintain superior relationships with our Tribal Partners by ensuring funds are distributed and received in a timely manner

Note that most of the payments were made in the first quarter due to the Advance Appropriations.

	1st Quarter	2nd Quarter	3rd Quarter	Total
Title I	73,359,565.00	49,126,893.00	80,308,136.00	202,794,594.00
Title V	120,481,668.00	0.00	1,853,752.00	122,335,420.00
Urban	0.00	2,031,243.00	0.00	2,031,243.00
105(L) Leases	0.00	28,937,787.00	0.00	28,937,787.00
Total	**193,841,233.00**	**80,095,923.00**	**82,161,888.00**	**273,937,156.00**

Office of Environmental Health and Engineering

- The Sanitation Facilities Construction (SFC) Program continued to strengthen relationships with Navajo Nation Chapters through extensive outreach and project coordination efforts. These engagements increased awareness of available sanitation services, supported project planning and prioritization, and facilitated discussions regarding future funding opportunities. Through these efforts, communities received updated information on safe water initiatives, project eligibility requirements, and infrastructure development processes.
- The SFC Program also welcomed seven interns through the Oak Ridge Institute for Science and Education (ORISE) Program, assigned to Shiprock, St. Michaels, and Gallup. Several interns are returning participants, providing valuable continuity and contributing to ongoing engineering and infrastructure projects, while gaining practical experience in sanitation facility construction.
- For Fiscal Year 2026, IHS has received $69,436,420 in funding to support sanitation facilities construction projects across NAIHS. An additional approximate $10 million in funding from the U.S. Environmental Protection Agency (EPA) is anticipated later this year. A summary of funded projects and funding sources is provided below.

Funding Source	Funding Amount
IIJA	$57,915,827
Regular (IHS-SFC)	$8,373,753
EPA*	$1,991,840
Sihasin (NN)	$1,155,000
	$69,436,420

- A key project funded this year is the Tuba City Wastewater Treatment Plant, for which the IHS and EPA will provide more than $56 million in funding. The project MOA is currently in review and awaiting final signature.
- After numerous negotiations, NAIHS and Navajo Engineering and Construction Authority (NECA) has negotiated to increase the number of projects from 19 to 24 based on an existing P.L. 93-638 Title I Contract. Authorized signatures are going through the process with an anticipated amended contractual agreement by the 4th quarter.
- This quarter, the SFC program continued to strengthen government-to-government relationships and enhance collaboration with Navajo Nation Chapters, Council Delegates, Chapter Officials, and community members. The SFC program provided presentations on the Navajo Safe Water Program, homeowner application procedures, and the project development process. These engagements included updates on active Sanitation Deficiencies System (SDS) and Project Data System (PDS) projects, reviews of participant listings, discussions of project priorities and funding needs, and responses to questions and concerns from Chapter leadership and community members.
- The Office of Environmental Health and Engineering (OEHE) continued advancing healthcare safety, infrastructure modernization, and community sanitation improvements throughout NAIHS. Major accomplishments included support for healthcare facility safety assessments, modernization of medical equipment, expansion of community outreach efforts through the Navajo Safe Water Program, and continued collaboration with Navajo Nation leadership to address water and wastewater infrastructure needs.

- The Division of Occupational Health and Safety Management (DOHSM) supported healthcare facility safety, regulatory compliance, environmental investigations, and workforce development activities across NAIHS. Staff provided technical assistance for ventilation assessments, life safety code compliance, security risk assessments, and public health investigations while supporting healthcare accreditation and employee safety initiatives.
- DOHSM assisted GIMC with the review and update of its internal Fire Plan to strengthen emergency preparedness, enhance response capabilities, and ensure continued compliance with applicable regulatory requirements. DOHSM also participated in GIMC Water Management Program discussions with the Centers for Disease Control and Prevention (CDC), providing technical support to promote safe water management practices and help maintain a safe healthcare environment for patients, staff, and visitors.
- DOHSM provided support and technical consultation to the Chinle Service Unit Inpatient Pharmacy indoor air quality investigation to identify and address environmental concerns
- DOHSM assisted the Division of Environmental Health Services (DEHS) with a plague investigation and treatment to support public health efforts and participated in a mock Occupational Safety and Health Administration (OSHA) survey at Four Corners Regional Health Center to assess preparedness and identify opportunities for improvement.
- DOHSM assisted with a security risk assessment at Dilkon Medical Center and Winslow Indian Healthcare Center, identifying vulnerabilities and supporting corrective action planning to strengthen facility security.
- The Biomedical Engineering division safely manages 10,600 medical devices using enterprise software for maintenance, compliance, and cost tracking. To prevent obsolescence and elevate patient care, NAIHS has identified a need for $32 million in equipment upgrades. Additionally, all direct care patient infusion systems were fully upgraded and are up-to-date.

Office of Public Health

- As of June 25, 2026, a total of 57 Just Move It (JMI) events were completed across the NAIHS. The campaign continues to promote physical activity, health education, disease prevention, and community wellness through coordinated efforts among NAIHS Service Units, Tribal partners, and community organizations.
- On June 2, 2026, the Division of Diabetes Treatment and Prevention (DDTP) provided an update to the Tribal Leaders Diabetes Committee (TLDC) on the SDPI Grant. Area Diabetes Consultants completed amending the original FY 2026 SDPI Notices of Awards (NoAs) to distribute the remaining funding for CY 2026 (July 1-December 31, 2026). NoAs were received during the 1st week of June 2026 for NAIHS Grantees.

SDPI Funding Reauthorizations: FY 2026/2027

Fiscal Year (FY)	Dates	Continuous Resolution (CR) Legislation	SDP Funding (Million (M))
FY 2026	10/1/25 to 1/30/26	Continuing Appropriations, Agriculture, Legislative Branch, Military Construction and Veterans Affairs, and Extensions Act, 2026 (P.L. 119-37)	$53 M
	2/1/26 to 9/30/26	Consolidated Appropriations Act, 2026 (P.L. 119-75)*	$147 M
		FY 2026 Annual Total	**$200 M**
FY 2027	10/1/26-12/31/26	Consolidated Appropriations Act, 2026 (P.L. 119-75)*	$50 M

*SDPI Funding has been authorized but is not currently available for use.

- IHS has approved CY 2026 SDPI Administrative Funding Supplements for the 310 SDPI grant recipients nationally. Supplement amounts will equal 25% of each recipient's annual grant award.
  - All Administrative Grant Supplements must include justification that align with program priorities.
  - Area Diabetes Consultants (ADC) will soon be directed, by their Grants Management Specialist, to initiate the 2026 Administrative Supplemental award memos and commitments. The Navajo Area Office SDPI ADC has completed this process.
  - Below (in yellow) is the Navajo Area SDPI Grantees Administrative Supplement allocation for CY 2026.

Fort Defiance Indian Hospital Board, Inc.	Tribal	$762,041	$190,510
Native Americans for Community Action, Inc.	Urban	$313,856	$78,464
Navajo Area Indian Health Service	IHS	$7,155,511	$1,788,878
Navajo Health Foundation - Sage Memorial Hospital Inc.	Tribal	$420,367	$105,092
Navajo Nation	Tribal	$6,483,988	$1,620,997
Tuba City Regional Health Care Corporation	Tribal	$1,361,069	$340,267
Utah Navajo Health System, Inc.	Tribal	$451,999	$113,000
Winslow Indian Health Care Center, Inc.	Tribal	$734,394	$183,599