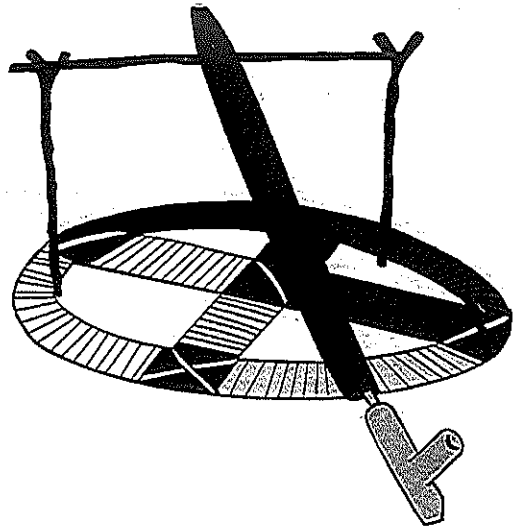


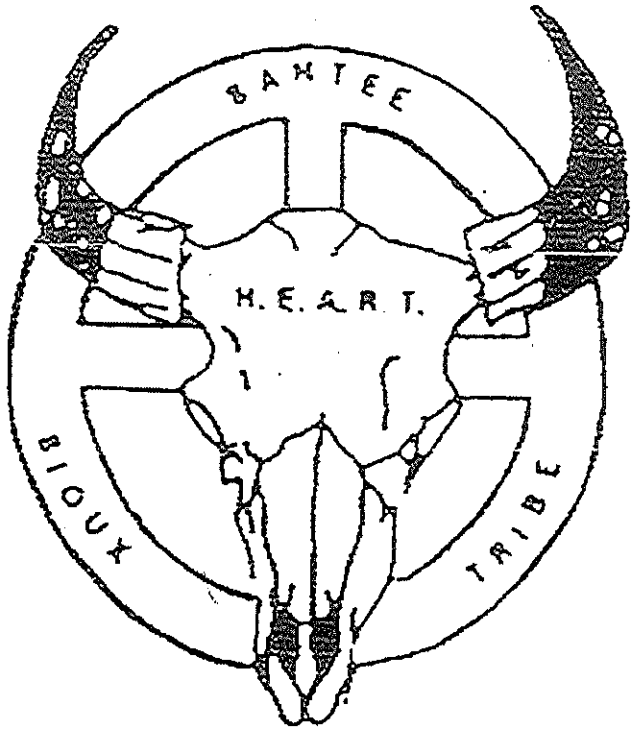
Hours and Days: Monday through Friday
8:00 a.m. – 4:30 p.m.
(and by appointment)

Population Served:
Santee Sioux Nation Tribal Members
Region IV of Nebraska
Aberdeen Area Indian Health Services

110 South Visiting Eagle
Route 2, Box 5087
Niobrara, Nebraska 68760
(402) 857-2508
Fax: (402) 857-2509
Email: rezsez@gpcom.net

Reviewed: 9/2011

H.E.A.R.T.



Program

Health Education and Addictions Recovery Training

Santee, Nebraska

Philosophy, Mission, Goals & Objectives:

Since time Eternal, the Dakota Nations have looked upward to Tunkasida (Grandfather/Creator) and have offered their humble prayers for guidance in the physical world and the one yet to come, the Spiritual. Within those offerings, all elements of the world have been included, the two legged, the winged, the four legged and all other relatives that make up the world.

The Dakota Nations look upon the Sacred Hoop as a universal symbol which represents all of the mankind and provides a network of family relationships; from which is derived a loving sense of being related and being connected to others. This, then may have been that single source of strength which permitted the Dakota Nations to withstand the invasion of different peoples and to survive the onslaught of many foreign evils, except alcohol.

Within the Dakota Nations, the enemy Alcohol has invaded every corner of our communities; the Sacred Hoop has broken; the enemy lies silently, undisturbed in the midst of our communities, waiting to entrap our future, our children.

As Dakota Nations, we inherit the Sacred duty to mend the Hoop – to give healing where we can – this we owe to our ancestors and children. Individually, thousands of Dakota people have been consumed by the enemy; collectively Dakota Nations have experienced a massive cultural and Spiritual disruption which has distorted our identity causing loss of vision while taking on the characteristics of other peoples and nations.

To mend the Sacred Hoop, we will draw upon the wisdom of our Elders – to revisit our traditional, and spiritual beliefs, which once served as our core belief and provided daily guidance. The Sacred Pipe will help to empower our relatives to battle the enemy alcohol. To stand strong in face of the enemy alcohol while working to create harmony in our communities, eventually forming a shield of protection for our future, our children. We will work to strengthen tribal relationships amongst all our people.

To these ends we pledge to forge a new community; a community where sober people are in contact with the Spirit which created us all; a community that will care for the needs of all relatives; a community that gives honor to traditions and works to pass their traditions to future generations.

We realize the needs are great and the challenges are diverse. We believe in the Power of our Tribal history and our traditions – we take heart from that knowledge and work to apply it at every opportunity. We rely on the undying power of the Dakota communities and its tiospayes as represented by the Sacred Hoop. We share in the wisdom of our Elders and the unending hope that springs eternal from each generation. We are solidly convinced that as Indian people, when we all work diligently together we will help to mend the Sacred Hoop. And to drive the enemy Alcohol from within our villages and tiospayes. Our prayers and efforts will form a spearhead in the common cause. Mitakuye Oyasin.

Program Staff Composition, Qualifications and Responsibilities in Providing Care:

Charles LaPlante LADC, ICADC
Administrator/ Program Director

Peg St. Clair MSE, LIMHP, LADC, CPC
Clinical Director Cell (402) 841-0937

Peggi Mc Cue MSE, LMHP, LADC, CPC
Family Therapist

~~**Shirley Kriesch MSE, PLMHP, PLADC**~~
~~Outpatient Therapist~~

~~**Nicole Beardslee MSCC, PLMHP, PLADC**~~
~~Youth Counselor~~

Nathan Houlette MSE, PLMHP, PLADC
Outpatient Therapist

Andrea McBride
Data Coordinator

Ruth LaPlante
Program Office Manager

Twila Rouillard
Community Youth Worker

Byron Tuttle
Youth Worker Tech

Admission Criteria:
A member of a Federally recognized Tribe.
Referred with substance abuse and mental health issues.

Ongoing Assessment & Evaluation Procedure:

Systematically through therapy services review, client participation is assessed and evaluated by clinical staff via weekly staff meetings, chart review, clinical supervision and treatment plan reviews, and pre-discharge planning. Client input is solicited throughout counseling sessions. This procedure ensures the client receives the highest level of care and progresses with the treatment plan goals and objectives.

Discharge Criteria:

Completion of clinical treatment plan.
Discharge upon clinical staff recommendations.
Threats of physical harm.
Lack of attendance and program participation.
Relocate beyond catchment area.
Death.

Reporting, Investigation and Resolutions of Allegations of Abuse, Neglect and Exploitation:

Written service related complaints are submitted to the Health Center Director who initiates the procedure to resolve complaints. If there is suspect that someone in this program is being abused, neglected or personal property is being misused; complaints must be reported directly to the State Reporting Agency at: DHHS Division of Public Health, License Unit, 301 Centennial Mall South, Lincoln, Nebraska 68509, Attn: Health Facility Complaint Intake, Phone: 402-471-0316, Fax: 402-471-1679 or Email: dhhs.healthfacilityinvestigations@nebraska.gov

Emergency Care and Treatment Plan:

Assess the situation to be an emergency and appraise them for their status. Depending on the emergency situation, comfort care will be offered. Dial 911, which will immediately connect in-house to the Santee Health Center medical staff and EMS will respond and initiate a treatment plan.

System of Referral:

Referrals to the HEART Program include: self, extended family members and other legal care givers, Tribal service programs, and off reservation entities.

Clients requiring a service beyond the scope of practice of the HEART Program are referred to appropriate resources to better meet the needs of the client.

Referral forms are completed and reviewed for eligibility and level of appropriateness.

Quality Assurance & Improvement:

In a continuing effort to enhance and upgrade outpatient counseling services for substance abuse and Mental Health, the HEART Program annually conducts a consumer satisfaction survey. Consumers include program clients, other assistant referral service providers i.e. social services, school, probation and affiliate agencies.

Confidential information and data gathered from the survey is utilized to measure counselor effectiveness in areas of response time to referrals, alcohol, tobacco and other drug education imparted to clients, counselor-client relationship, confidentiality, empathy and trust issues, cultural and Tribal issues, required reports to courts and probation, client rights and responsibilities, service costs and scheduling. Consumers are additionally provided opportunity to suggest changes which may improve the overall counselor-client relationship.

The completed surveys will be submitted to the Administrator/ Program Director for review and retention for a period of three years as a quality assurance compliance measure.

Indian AA 23rd **Psalm**

Tunkashida is my sponsor, I shall not want. He leadeth me to sit back, relax, and listen with an open mind.

He restoreth my soul, my mind, my spirit to the ways of Indian health;

He leadeth me in the paths of Indian Sobriety, serenity and tribal fellowship, for mine own sake.

He teacheth me to think, to take it easy, to live and let live and to do first things first.

He maketh me humble, honest and grateful.

He maketh me honor the four values of life, respect, humility, generosity and courage.

He teacheth me to accept the things I cannot change, to change the things I can and giveth me the wisdom to know the difference.

Though I walk through the valley of alcohol temptation, despair, frustration, guilt and remorse, I fear no evil, for Tunkashida walks with me.

The way of sober Indian life, thy program of prayer, the twelve steps and the sweat lodge; they comfort me.

Thou preparest a table before me in the presence of my enemies; rationalization, fear, anxiety, self pity and resentment.

Thou annointest my confused mind and jangled nerves with hope, knowledge and understanding of my tribal spiritual ways; no longer am I alone; neither am I afraid, nor sick, nor helpless or hopeless for I have discovered the sacred strength of other sober Indian relatives.

My cup runneth over!

Surely, Indian sobriety and serenity shall follow me every day of my life, 24 hours a day, as I surrender my will to Tunkashida and carry his message to other Indian relatives.

I will dwell in the house of Tunkashida, my higher power, as I understand him, from this day forward to my setting sun, forever and ever.

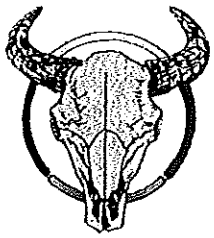
Hau Hechetu
Mitakuye Oyasin

H.E.A.R.T. Program Clients' Rights & System for Ensuring Client Rights

The following "Client Rights" have been established for eligible and active clients of HEART and Dakota Mental Health as means to ensure their well-being and individuality. Extended family members and other legal care givers must have a current client treatment plan to be considered in client rights.

- To be treated with dignity and provided care by competent staff.
- To be an equal partner in the development of the client service agreement while retaining final decision making authority.
- To be informed in advance about care and treatment, and of any changes in care and treatment that may affect the clients well being.
- To be informed in writing of the pricing structure and/or rates of all program services.
- To self direct activities; participate in decisions which incorporate independence, individuality, privacy, and dignity; and make decisions regarding care and treatment.
- To be free from involuntary treatment, unless involuntarily committed by appropriate court order and except in cases of civil protective custody.
- To be free from arbitrary transfer or discharge.
- To voice complaints and grievances without discrimination or reprisal and have those complaints/grievances addressed in a timely fashion.
- To examine the results of the most recent survey for licensure of the facility conducted by a representative of the Department of Public Health.
- To refuse to perform services for the program.
- To privacy in written and phone communications unless otherwise authorized.
- To be free from seclusion, physical punishment, or use of chemical and physical restraints.
- To exercise his or her rights as a client of HEART and as a citizen of the United States and as Tribal member.
- To review and receive a copy of their permanent record, as referred to in 175 NAC 4-006.12.
- To be free from abuse, neglect and misappropriation of their money and personal property.
- To confidentiality of all records, communications and personal information.
- Shall have the right to a physically safe environment, free from hazards, including communicable disease.

Program Clients receiving substance abuse and/or Mental Health services are not levied a fee as the HEART Program is deemed as 'non-fee for services' by the Nebraska DHHS; additionally, the HEART Program receives IHS funding which allows eligible clients to be provided SA/MH services at no cost.



Health, Education & Addiction Recovery Training

Phone: 402-857-2508
Email: rezsez@gpcom.net
FAX: 402-857-2509

RT. 2 BOX 5087 • NIOBRARA, NEBRASKA 68760