



Oneida Business Committee

**Regular Meeting and Executive Session
8:30 a.m. Wednesday, January 24, 2018
BC Conference Room, 2nd floor, Norbert Hill Center**

Agenda

To get a copy of the agenda, go to: oneida-nsn.gov/government/business-committee/agendas-packets/

I. CALL TO ORDER AND ROLL CALL

II. OPENING

III. ADOPT THE AGENDA

IV. OATHS OF OFFICE

- A. Anna John Resident Centered Care Community Board – Kristin Jorgenson**
- B. Anna John Resident Centered Care Community Board – Shirley Barber**
- C. Oneida Gaming Commission – Michelle Braaten**

V. MINUTES

- A. Approve January 5, 2018, emergency meeting minutes**
Sponsor: Lisa Summers, Secretary
- B. Approve January 10, 2018, regular meeting minutes**
Sponsor: Lisa Summers, Secretary
- C. Approve January 15, 2018, emergency meeting minutes**
Sponsor: Lisa Summers, Secretary

VI. RESOLUTIONS

- A. Adopt resolution entitled Amending resolution # BC 08-30-17-A Appointment of Liaison Responsibilities for Organization Entities**
Sponsor: Lisa Summers, Secretary
- B. Adopt resolution entitled Modifying the GTC Legal Resource Center Transition Plan**
Sponsor: Wesley Martin, Jr., Advocate/GTC Legal Resource Center and Tsyoslake House, Advocate/GTC Legal Resource Center
- C. Adopt resolution entitled Temporary Amendment to BC Resolution 08-28-13-B; Authorization to Sign-Off on Patient Referred Care – Health Care Payments**
Sponsor: Dr. Ravinder Vir, Division Director/Comprehensive Health Medical

VII. STANDING COMMITTEES

- A. Legislative Operating Committee**
Chair: David P. Jordan, Councilman
 - 1. Adopt rules regarding Community Support Fund law**
- B. Finance Committee**
Chair: Trish King, Treasurer
 - 1. Approve January 15, 2018, Finance Committee meeting minutes**
- C. Community Development Planning Committee**
Chair: Ernie Stevens III, Councilman
 - 1. Accept November 2, 2017, Community Development Planning Committee meeting minutes**

VIII. APPOINTMENTS *(No Requested Action)***IX. TABLED BUSINESS** *(No Requested Action)***X. UNFINISHED BUSINESS**

- A. Delete 2018 amended Oneida Trust Enrollment Committee/Oneida Business Committee Memorandum of Agreement from the agenda**
Sponsor: Lisa Summers, Secretary

EXCERPT FROM JANUARY 10, 2018: Motion by Lisa Summers to defer the 2018 amended Oneida Trust Enrollment Committee/Oneida Business Committee Memorandum of Agreement to the January 24, 2018, regular Business Committee meeting, seconded by Jennifer Webster. Motion carried unanimously.

XI. NEW BUSINESS

- A. Approve request to post one (1) vacancy, for remainder of term ending July 31, 2019 – Oneida Election Board**
Sponsor: Lisa Summers, Secretary
- B. Accept the Tribal Action Plan communication overview and strategy as information**
Sponsor: Ernie Stevens III, Councilman
- C. Accept the recommendation and set the 2018 Special Election date of July 7, 2018**
Liaison: Tehassi Hill, Chairman
Submitted by: Racquel Hill, Chair/Oneida Election Board

XII. TRAVEL

- A. Approve travel request – Vice-Chairman Brandon Stevens – Alliance for Boys and Men of Color Equity Summit – Chicago, IL – April 11-13, 2018**

XIII. OPERATIONAL REPORTS *(Scheduled times: 5 minutes to present and 10 minutes for Question and Answer)*

- A. Accept Comprehensive Health Division FY-2018 1st quarter report (1:30 p.m.)**
Sponsor: Dr. Ravinder Vir, Division Director/Comprehensive Health Medical and Debra Danforth, Division Director/Comprehensive Health Operations
- B. Accept Governmental Services Division FY-2018 1st quarter report (1:45 p.m.)**
Sponsor: George Skenandore, Division Director/Governmental Services
- C. Accept Internal Services Division FY-2018 1st quarter report (2:00 p.m.)**
Sponsor: Joanie Buckley, Division Director/Internal Services
- D. Accept Community and Economic Development Division FY-2018 1st quarter report (2:15 p.m.)**
Sponsor: Troy Parr, Division Director/Community and Economic Development
- E. Accept Public Works Division FY-2018 1st quarter report (2:30 p.m.)**
Sponsor: Jacque Boyle, Interim Asst. Division Director/Public Works

XIV. GENERAL TRIBAL COUNCIL

- A. Petitioner Frank Vandehei – E-polls**
 - 1. Accept legal analysis**
Sponsor: Jo Anne House, Chief Counsel
 - 2. Accept financial analysis status update**
Sponsor: Larry Barton, Chief Financial Officer

XV. EXECUTIVE SESSION *(Scheduled times are subject to change)***A. REPORTS**

1. **Accept Chief Counsel report** – Jo Anne House, Chief Counsel
2. **Accept Intergovernmental Affairs and Communications report** – Nathan King, Director
3. **Accept Gaming General Manager report** – Louise Cornelius, General Manager/Gaming

B. STANDING ITEMS

1. **Land Claims Strategy** *(No Requested Action)*
2. **Oneida Golf Enterprise Corporation – Ladies Professional Golf Association**
 - a) **Accept LPGA January 2018 update**
Liaison: Trish King, Treasurer
Submitted by: Josh Doxtator, Chief Operational Officer/Oneida Golf Enterprise Corporation
 - b) **Review of the options regarding capital sourcing for LPGA Tournament year two**
Sponsor: Larry Barton, Chief Financial Officer

C. AUDIT COMMITTEE

Chair: David P. Jordan, Councilman

1. **Accept November 16, 2017, Audit Committee meeting minutes**
2. **Accept December 14, 2017, Audit Committee meeting minutes**
3. **Accept Bingo compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
4. **Accept Cage/Vault compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
5. **Accept final Employee Advocacy Department performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
6. **Accept final Environmental Health and Safety Division performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
7. **Accept final Grants performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
8. **Accept final Kalihwisaks performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
9. **Accept final Oneida Community Integrated Food Services performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
10. **Accept final Tourism performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**

11. **Accept final Utilities performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
12. **Accept final Veterans Services performance assurance audit and lift confidentiality requirement allowing Oneida Nation members to view**
13. **Accept Gaming Contracts audit and lift confidentiality requirement allowing Oneida Nation members to view**
14. **Accept Information Technology audit and lift confidentiality requirement allowing Oneida Nation members to view**
15. **Accept Let it Ride rules of play audit and lift confidentiality requirement allowing Oneida Nation members to view**
16. **Accept Parimutuel Wagering audit and lift confidentiality requirement allowing Oneida Nation members to view**
17. **Accept Player Tracking compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
18. **Accept Slot Year End compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
19. **Accept Surveillance compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
20. **Accept Table Games compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**
21. **Accept Title 31 compliance audit and lift confidentiality requirement allowing Oneida Nation members to view**

D. TABLED BUSINESS *(No Requested Action)*

E. UNFINISHED BUSINESS *(No Requested Action)*

F. NEW BUSINESS

1. **Review draft OBC SOP entitled Oneida Golf Enterprise (ODE) Equity Transfer**
Sponsor: Larry Barton, Chief Financial Officer
2. **Review applications for two (2) vacancies – Oneida Library Board**
Sponsor: Tehassi Hill, Chairman
3. **Review applications for five (5) vacancies – Southeastern Oneida Tribal Services Advisory Board**
Sponsor: Tehassi Hill, Chairman
4. **Review applications for one (1) vacancy – Oneida Nation Veteran Affairs Committee**
Sponsor: Tehassi Hill, Chairman

5. **Review applications for two (2) vacancies – Oneida Pow-wow Committee**
Sponsor: Tehassi Hill, Chairman
6. **Review applications for two (2) vacancies – Pardon and Forgiveness Screening Committee**
Sponsor: Tehassi Hill, Chairman
7. **Review recommendations for two (2) vacancies and four (4) alternates – Pardon and Forgiveness Screening Committee**
Sponsor: Lisa Summers, Secretary
8. **Accept the community budget input meeting packet and forward to special Work Session on February**
Sponsor: Trish King, Treasurer

XVI. ADJOURN

Posted on the Oneida Nation's official website, www.oneida-nsn.gov, at 4:00 p.m., Friday, January 19, 2018, pursuant to the Open Records and Open Meetings Law, section 107.14.

The meeting packet of the open session materials for this meeting is available by going to the Oneida Nation's official website at: <https://oneida-nsn.gov/government/business-committee/agendas-packets/>

For information about this meeting, please call the Business Committee Support Office at (920) 869-4364 or (800) 236-2214.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Administer Oath of Office to Kristin Jorgenson for the Anna John Resident Centered Care Community Board.

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Brooke Doxtator, BCC Supervisor
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

There were three (3) applicant(s) for two (2) vacancies on the Anna John Resident Centered Care Community Board.

On December 27, 2017 the Business Committee appointed Kristen Jorgenson and Shirley Barber to the Anna John Resident Centered Care Community Board.

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Administer Oath of Office to Shirley Barber for the Anna John Resident Centered Care Community Board.

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Brooke Doxtator, BCC Supervisor
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

There were three (3) applicant(s) for two (2) vacancies on the Anna John Resident Centered Care Community Board.

On December 27, 2017 the Business Committee appointed Kristen Jorgenson and Shirley Barber to the Anna John Resident Centered Care Community Board.

1) Save a copy of this form for your records.

2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Administer Oath of Office to Michelle Braaten for the Oneida Gaming Commission.

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Brooke Doxtator, BCC Supervisor
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

There was six (6) applicant(s) for one (1) vacancy on the Oneida Gaming Commission.

On January 10, 2018 the Business Committee appointed Michelle Braaten to the Oneida Gaming Commission.

1) Save a copy of this form for your records.

2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header: Minutes

Accept as Information only

Action - please describe:

Approve January 5, 2018, emergency meeting minutes

3. Supporting Materials

Report Resolution Contract

Other:

1. 1/5/18 emergency BC meeting minutes DRAFT 3.

2. 4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison: Lisa Summers, Secretary

Primary Requestor/Submitter: Lisa Liggins, Information Management Specialist
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

DRAFT**Oneida Business Committee**

Emergency Meeting
3:00 p.m. Friday, January 5, 2018
BC Conference Room, 2nd floor, Norbert Hill Center

Minutes – DRAFT**EXECUTIVE SESSION**

Present: Chairman Tehassi Hill, Secretary Lisa Summers, Treasurer Trish King, Council members: Daniel Guzman King David P. Jordan, Kirby Metoxen, Ernie Stevens III, Jennifer Webster;

Not Present: ;

Arrived at: Vice-Chairman Brandon Stevens at 3:32 p.m.;

Others present: Jo Anne House, Lisa Liggins, James Martin, Janice Skenandore-Hirth;

I. CALL TO ORDER AND ROLL CALL by Chairman Tehassi Hill at 3:03 p.m.

II. OPENING by Councilman Daniel Guzman King

III. ADOPT THE AGENDA (00:01:09)

Motion by Lisa Summers to adopt the agenda as presented, seconded by Ernie Stevens III. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Brandon Stevens

IV. EXECUTIVE SESSION (00:01:25)

Motion by Lisa Summers to go into executive session at 3:05 p.m., seconded by Jennifer Webster.

Motion carried unanimously:

Ayes: Daniel Guzman King, Trish King, David P. Jordan, Kirby Metoxen, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Brandon Stevens

Vice-Chairman Brandon Stevens arrives at 3:32 p.m.

Motion by Brandon Stevens to come out of executive session at 6:13 p.m., seconded by David Jordan.

Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Roll call conducted at the request of Councilman David Jordan:

Present: Chairman Tehassi Hill, Vice-Chairman Brandon Stevens, Secretary Lisa Summers, Treasurer Trish King, Council members: Daniel Guzman King, David P. Jordan, Kirby Metoxen, Ernie Stevens III, Jennifer Webster;

DRAFT**A. New Business****1. Oneida Golf Enterprise Corporation (00:02:18)**

Sponsor: Tehassi Hill, Chairman

Motion by Lisa Summers to enact Article 7, Section 3 of the Oneida Golf Enterprise Corporate Charter as identified in the memo dated January 5, 2018, noting the Chairman will send the correspondence to Oneida Golf Enterprise management and Agent, seconded by Ernie Stevens III. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Motion by Kirby Metoxen to enact section 6(C) of the Agent contract as identified in the memo dated January 5, 2018, seconded by Lisa Summers. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Motion by Jennifer Webster to enact Article VII, Section C of the Oneida Airport Hotel Corporation Charter as identified in the memo dated January 5, 2018, noting the Chairman will send the correspondence to the affected Board Member and the Board of Directors, seconded by David Jordan. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Motion by Lisa Summers to accept the memorandum dated January 5, 2018, including the identified actions, seconded by David Jordan. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

V. ADJOURN (00:03:55)

Motion by David Jordan to adjourn at 6:16 p.m., seconded by Lisa Summers. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Minutes prepared by Lisa Liggins, Information Management Specialist
Minutes approved as presented on _____.

Lisa Summers, Secretary
ONEIDA BUSINESS COMMITTEE

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve January 10, 2018, regular meeting minutes

3. Supporting Materials

Report Resolution Contract

Other:

1. <input type="text" value="1/5/18 regular BC meeting minutes DRAFT"/>	3. <input type="text"/>
2. <input type="text"/>	4. <input type="text"/>

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Lisa Liggins, Information Management Specialist
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

DRAFT**Oneida Business Committee****Executive Session**

8:30 a.m. Tuesday, January 9, 2018
Executive Conference Room, 2nd floor, Norbert Hill Center

Regular Meeting

8:30 a.m. Wednesday, January 10, 2018
BC Conference Room, 2nd floor, Norbert Hill Center

Minutes – DRAFT**EXECUTIVE SESSION**

Present: Vice-Chairman Brandon Stevens, Secretary Lisa Summers, Treasurer Trish King, Council members: Daniel Guzman King, Kirby Metoxen, Ernie Stevens III, Jennifer Webster;

Not Present: Councilman David P. Jordan;

Arrived at: Chairman Tehassi Hill at 2:30 p.m.;

Others present: Jo Anne House, Lisa Liggins, Larry Barton, Laura Laitinen-Warren, Barb Erickson, Nate King, Barbara Webster, Bob Barton, Josh Doxtator, Justin Fox, Michelle Braaten, Jonas Hill, Geraldine Danforth, Marianne Close;

REGULAR MEETING

Present: Chairman Tehassi Hill, Vice-Chairman Brandon Stevens, Secretary Lisa Summers, Treasurer Trish King, Council members: Daniel Guzman King David P. Jordan, Ernie Stevens III, Jennifer Webster;

Not Present: Councilman Kirby Metoxen;

Arrived at: ;

Others present: Jo Anne House, Larry Barton, Lisa Liggins, Rosa Laster, Rhiannon Metoxen, Chris Johnson, Clorissa Santiago, Jen Falck, Bonnie Pigman, Debbie Danforth, Sherry Mousseau, Tracy Williams, Jolene Hensberger, Nancy Barton, Edward Delgado, Cathy Metoxen,;

I. CALL TO ORDER AND ROLL CALL by Chairman Tehassi Hill at 8:31 a.m.

For the record: Councilman Kirby Metoxen at a Native American Tourism of Wisconsin meeting as part of his liaison appointment.

II. OPENING by Chairman Tehassi Hill**III. ADOPT THE AGENDA (00:03:30)**

Motion by Jennifer Webster to adopt the agenda with three additions [XII.A.3. Approve travel request – Councilman Kirby Metoxen – Native American Tourism of Wisconsin regular meeting and reporting at Great Lakes Inter-tribal Council, Inc. – Lac du Flambeau, WI – January 10-11, 2018; XV.F.3. Determine appropriate next steps regarding the HR Area Manager's recommendation regarding changes to BC resolution 09-27-17-I; and XV.F.4. Accept Oneida Golf Enterprise Corporation and Oneida Airport Hotel Corporation update], seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

DRAFT

OATHS OF OFFICE *(No Requested Action)*

IV. MINUTES (00:05:30)

A. Approve December 15, 2017, special meeting minutes

Sponsor: Lisa Summers, Secretary

Motion by Jennifer Webster to approve the December 15, 2017, special meeting minutes, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

B. Approve December 18, 2017, special meeting minutes

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to approve the December 18, 2017, special meeting minutes, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

C. Approve December 20, 2017, special meeting minutes

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to approve the December 20, 2017, special meeting minutes, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

D. Approve December 27, 2017, regular meeting minutes

Sponsor: Lisa Summers, Secretary

Motion by Ernie Stevens III to approve the December 27, 2017, regular meeting minutes, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

V. RESOLUTIONS (00:07:00)

A. Enter e-poll results into the record in accordance with OBC SOP entitled Conducting Electronic Voting:

Sponsor: Lisa Summers, Secretary

DRAFT**1. Adoption of resolution # 12-21-17-A Oneida Retail Enterprise Oneida Four Paths Selling Alcohol Beverages in Accordance with Oneida Alcohol Beverage Licensing Law**

Requestor: Michele Doxtator, Area Manager/Retail Profits

Motion by David Jordan to enter e-poll results into the record for the approved adoption of resolution # 12-21-17-A Oneida Retail Enterprise Oneida Four Paths Selling Alcohol Beverages in Accordance with Oneida Alcohol Beverage Licensing Law, seconded by Ernie Stevens III. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

VI. STANDING COMMITTEES (00:08:24)**A. Legislative Operating Committee**

Chair: David P. Jordan, Councilman

1. Adopt Membership Ordinance rule #1 – Enrollment (00:08:24)

Motion by David Jordan to adopt Membership Ordinance rule #1 – Enrollment, seconded by Lisa Summers. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

B. Finance Committee

Chair: Trish King, Treasurer

1. Approve January 2, 2018, Finance Committee meeting minutes (00:18:00)

Motion by David Jordan to approve January 2, 2018, Finance Committee meeting minutes, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

VII. APPOINTMENTS**A. Appoint one (1) applicant to Oneida Gaming Commission to complete vacant term ending August 31, 2022 (00:22:03)**

Sponsor: Lisa Summers, Secretary

Motion by Jennifer Webster to appoint Michelle Braaten to Oneida Gaming Commission to complete vacant term ending August 31, 2022, seconded by Daniel Guzman King. Motion carried with three abstentions:

Ayes: Daniel Guzman King, Trish King, Ernie Stevens III, Jennifer Webster

Abstained: David P. Jordan, Brandon Stevens, Lisa Summers

Not Present: Kirby Metoxen

For the record: David P. Jordan stated Mr. Chairman, the reason I'm abstaining is because my sister is actually one of the applicants.

DRAFT**B. Appoint one (1) applicant to the Oneida Airport Hotel Corporation - Board of Directors to complete vacant term ending January 31, 2021 (00:23:12)**

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to appoint Patricia Lassila to the Oneida Airport Hotel Corporation - Board of Directors to complete vacant term ending January 31, 2021, seconded by Daniel Guzman King. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

C. Appoint one (1) applicant to the Oneida Airport Hotel Corporation - Board of Directors

Sponsor: Lisa Summers, Secretary (00:24:39)

Motion by David Jordan to appoint Frank Cornelius to the Oneida Airport Hotel Corporation - Board of Directors, seconded by Lisa Summers. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

Motion by Lisa Summers for the Secretary the contact both new Board members to arrange for their oaths of office to be taken as soon as possible, seconded by David Jordan. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

VIII. TABLED BUSINESS (No Requested Action)**IX. UNFINISHED BUSINESS****A. Accept close-out report as required by BC resolution 08-09-17-D submitted by the Oneida Nation School Board (00:26:20); (00:42:35)**

Sponsor: Debra Danforth, Oneida Nation School Board Chair

Liaison: Brandon Stevens, Vice-Chairman

Motion by Lisa Summers to defer this item to be addressed later of this agenda after item XIV., seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

Motion by David Jordan to accept close-out report as required by BC resolution 08-09-17-D submitted by the Oneida Nation School Board with the noted corrections [under C. Travel of the Revised Budget Justification Narrative Year Two correct "64 nights" to "6 nights"; under X. Adjourn of the draft Oneida Nation School Board minutes of January 8, 2018, correct "RC Danforth" to "RC Metoxen] and to request the Oneida Nation School Board notify the Oneida Business Committee when the transfer required by resolve number five of BC resolution 08-09-17-D is complete, seconded by Lisa Summers. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

DRAFT

EXCERPT FROM DECEMBER 27, 2017: (1) Motion by Lisa Summers to accept the update as information, seconded by Ernie Stevens III. Motion carried unanimously. (2) Motion by Lisa Summers for the Oneida Nation School Board Liaison to work with the Oneida Nation School Board on the identified Human Resources issues, seconded by Jennifer Webster. Motion carried unanimously.

EXCERPT FROM DECEMBER 13, 2017: (1) Motion by David P. Jordan to acknowledge receipt of the status update, seconded by Lisa Summers. Motion carried unanimously. (2) Motion by Lisa Summers to direct the Oneida Nation School Board comply with Resolve number five with resolution 08-09-17-D and provide a final report by January 10, 2018; and for the OBC Liaison to notify the Oneida Nation School Board of this directive in writing, seconded by Jennifer Webster. Motion carried unanimously. (3) Motion by Lisa Summers to direct the Oneida Nation School Board to attend executive session on December 27, 2017, to discuss the implementation of OBC resolution # 08-09-17-D, and for the OBC Liaison to notify the Oneida Nation School Board of this directive in writing, seconded by Jennifer Webster. Motion carried unanimously.

EXCERPT FROM NOVEMBER 22, 2017: Meeting canceled.

EXCERPT FROM NOVEMBER 8, 2017: Motion by Jennifer Webster for the Liaison to follow-up with the Oneida Nation School Board to get the final report to be submitted for the November 22, 2017, regular Business Committee meeting, seconded by Trish King. Motion carried unanimously.

EXCERPT FROM OCTOBER 25, 2017: Motion by David P. Jordan to defer this item to the November 8, 2017, regular Business Committee meeting. Motion carried unanimously.

EXCERPT FROM AUGUST 9, 2017: Motion by Lisa Summers to adopt resolution #08-09-17-D Transfer of Language Department to Oneida Nation School System, seconded by Tehassi Hill. Motion carried unanimously.

X. NEW BUSINESS**A. Approve the 2018 amended Oneida Trust Enrollment Committee/Oneida Business Committee Memorandum of Agreement (00:29:24)**

Sponsor: Barbara Webster, Trust Enrollment Committee Chair

Liaison: Councilman Kirby Metoxen, Trust Enrollment Committee Member

Motion by Lisa Summers to defer the 2018 amended Oneida Trust Enrollment Committee/Oneida Business Committee Memorandum of Agreement to the January 24, 2018, regular Business Committee meeting, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

For the record: Lisa Summers stated I have a question regarding the change to the twelfth Whereas. "Section VIII" regarding the review and approval of the Tribal Revenue Allocation Plan (TRAP) has been struck from the amended draft. I'm asking for a clarification on the reason for this change. Also I'm asking for clarification on the responsibilities and authorities of the Oneida Trust Enrollment Committee and the Oneida Business Committee regarding the review and approval of the TRAP.

DRAFT**XI. TRAVEL****A. Travel Requests**

- 1. Approve travel request – Councilman Daniel Guzman King – 1st Annual Hemp Expo – Milwaukee, WI – March 9-10, 2018 (00:40:20)**

Motion by Lisa Summers to approve the travel request for up to two (2) Oneida Business Committee members to attend the 1st Annual Hemp Expo – Milwaukee, WI – March 9-10, 2018, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

- 2. Approve travel request – Secretary Lisa Summers – U.S. Department of the Interior – Office of the Secretary Consultation – Prior Lake, MN – January 17-18, 2018 (00:41:02)**

Motion by David Jordan to approve the travel request for Secretary Lisa Summers to attend the U.S. Department of the Interior – Office of the Secretary Consultation – Prior Lake, MN – January 17-18, 2018, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

- 3. Approve travel request – Councilman Kirby Metoxen – Native American Tourism of Wisconsin regular meeting and reporting at Great Lakes Inter-tribal Council, Inc. – Lac du Flambeau, WI – January 10-11, 2018 (00:41:30)**

Motion by David Jordan to approve the travel request for Councilman Kirby Metoxen to attend the Native American Tourism of Wisconsin regular meeting and reporting at Great Lakes Inter-tribal Council, Inc. – Lac du Flambeau, WI – January 10-11, 2018, seconded by Jennifer Webster. Motion carried with one abstention:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Jennifer Webster

Abstained: Lisa Summers

Not Present: Kirby Metoxen

XII. OPERATIONAL REPORTS (No Requested Action)**XIII. GENERAL TRIBAL COUNCIL (No Requested Action)**

DRAFT**XIV. EXECUTIVE SESSION (01:19:35)**

Motion by Lisa Summers to go into executive session at 9:50 a.m., seconded by David Jordan. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster
 Not Present: Kirby Metoxen

Motion by David Jordan to come out of executive session at 11:07 a.m., seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster
 Not Present: Kirby Metoxen

A. Reports**1. Accept Chief Counsel report – Jo Anne House, Chief Counsel (01:20:18)**

Motion by Jennifer Webster to accept the Chief Counsel report dated January 9, 2017, seconded by Trish King. Motion carried with one abstention:

Ayes: Daniel Guzman King, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster
 Abstained: David P. Jordan
 Not Present: Kirby Metoxen

2. Accept Intergovernmental Affairs and Communications report – Nathan King, Director (01:20:44)

Motion by Jennifer Webster to accept the Intergovernmental Affairs and Communication report, seconded by Lisa Summers. Motion carried with one abstention:

Ayes: Daniel Guzman King, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster
 Abstained: David P. Jordan
 Not Present: Kirby Metoxen

B. Standing Items**1. Land Claims Strategy (No Requested Action)****2. Oneida Golf Enterprise – Ladies Professional Golf Association (01:21:06)**

Motion by Lisa Summers to approve the requested operational capital contribution, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens, Ernie Stevens III, Lisa Summers, Jennifer Webster
 Not Present: Kirby Metoxen

EXCERPT FROM DECEMBER 27, 2017: (1) Motion by Jennifer Webster to accept the update as information, seconded by Lisa Summers. Motion carried unanimously. (2) Motion by Lisa Summers to defer the requested Ladies Professional Golf Association contribution discussion to the Business Committee regular meeting on January 10, 2018, seconded by Jennifer Webster. Motion carried unanimously.

EXCERPT FROM DECEMBER 13, 2017: Motion by Lisa Summers to defer the requested Ladies Professional Golf Association contribution discussion to the Business Committee

DRAFT

regular meeting on December 27, 2017, seconded by Trish King. Motion carried unanimously.

C. Audit Committee (No Requested Action)**D. Tabled Business (No Requested Action)****E. Unfinished Business****1. Accept the written report regarding complaint # 2017-DR01-01 (01:21:29)**

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to accept the written report regarding complaint # 2017-DR01-01, noting 1) the OBC approves the OBC Officer's actions and 2) the complaint is closed, seconded by Jennifer Webster. Motion carried with one abstention:

Ayes: Daniel Guzman King, Trish King, Brandon Stevens, Ernie Stevens III,
Lisa Summers, Jennifer Webster
Abstained: David P. Jordan
Not Present: Kirby Metoxen

EXCERPT FROM NOVEMBER 8, 2017: Motion by Lisa Summers to accept complaint # 2017-DR01-01 as having merit; and to assign the complaint to OBC Officers for follow-up, seconded by Jennifer Webster. Motion carried unanimously.

2. Approve OBC SOP entitled Employee Incentives (01:22:01)

Sponsor: Trish King, Treasurer

Motion by Lisa Summers to approve OBC SOP entitled Employee Incentives, seconded by Brandon Stevens. Motion carried with one abstention:

Ayes: Daniel Guzman King, Trish King, Brandon Stevens, Ernie Stevens III,
Lisa Summers, Jennifer Webster
Abstained: David P. Jordan
Not Present: Kirby Metoxen

EXCERPT FROM DECEMBER 27, 2017: Motion by Jennifer Webster to defer this item to the January 10, 2018, regular Business Committee meeting, seconded by David P. Jordan. Motion carried unanimously.

EXCERPT FROM DECEMBER 13, 2017: Motion by Lisa Summers to defer this item to the December 27, 2017, regular Business Committee meeting, seconded by Ernie Stevens III. Motion carried unanimously.

3. Determine next steps regarding OBC resolution # 01-27-16-B Agreement with Wisconsin Dept. of Transportation for Corridor Study on Mason St./54 (01:22:58)

Sponsor: Troy Parr, Assistant Division Director/Community Economic & Development

Motion by Lisa Summers to forward this item to the Chairman's Office for appropriate follow up, seconded by David Jordan. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster
Not Present: Kirby Metoxen

EXCERPT FROM DECEMBER 27, 2017: Motion by David P. Jordan to defer this item to the January 10, 2018, regular Business Committee meeting, seconded by Jennifer Webster. Motion carried unanimously.

DRAFT**4. Review recommendation regarding concern # 2017-CC-15 and determine next steps (01:23:29)**

Sponsor: Tehassi Hill, Chairman

Motion by Lisa Summers to accept the recommendation of the Chairman and terminate the appointment under the authority of section 105.6-5, based on the documentation submitted by the Oneida Election Board, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

EXCERPT FROM DECEMBER 27, 2017: Motion by Jennifer Webster to defer this item to Chairman Tehassi Hill's Office to bring back a recommendation to the January 10, 2018, regular Business Committee meeting, seconded by Lisa Summers. Motion carried unanimously.

5. Review applicants to Oneida Gaming Commission for vacant term ending in August 31, 2022 (01:24:31)

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to closeout this item noting it has been completed in open session under item XIII.A., seconded by Jennifer Webster. Motion carried with one abstention:

Ayes: Daniel Guzman King, Trish King, Brandon Stevens, Ernie Stevens III,
Lisa Summers, Jennifer Webster

Abstained: David P. Jordan

Not Present: Kirby Metoxen

EXCERPT FROM DECEMBER 27, 2017: (1) Motion by Lisa Summers to defer the review of the applicants to Oneida Gaming Commission for the vacant term ending in August 31, 2022, to the January 10, 2018, regular Business Committee meeting, seconded by Ernie Stevens III. Motion carried with one abstention. (2) Motion by Lisa Summers to direct the Tribal Secretary to contact the identified applicants to attend that meeting, seconded by Ernie Stevens III. Motion carried with one abstention.

F. New Business**1. Review applications for the vacant term ending January 31, 2021, on the Oneida Airport Hotel Corporation - Board of Directors (01:25:05)**

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to closeout this item noting it has been completed in open session under item XIII.B., seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

2. Review applications for the vacant term ending January 31, 2023, on the Oneida Airport Hotel Corporation - Board of Directors (01:25:32)

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to closeout this item noting it has been completed in open session under item XIII.C., seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

DRAFT**3. Determine appropriate next steps regarding the HR Area Manager's recommendation regarding changes to BC resolution 09-27-17-I (01:26:46)**

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to forward this item to the BC Officers for the appropriate follow up, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

4. Accept Oneida Golf Enterprise Corporation and Oneida Airport Hotel Corporation update (01:27:16)

Sponsor: Lisa Summers, Secretary

Motion by Lisa Summers to accept Oneida Golf Enterprise Corporation and Oneida Airport Hotel Corporation update, seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

II. ADJOURN (01:27:38)

Motion by David Jordan to adjourn at 11:14 a.m., seconded by Ernie Stevens III. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Brandon Stevens,
Ernie Stevens III, Lisa Summers, Jennifer Webster

Not Present: Kirby Metoxen

Minutes prepared by Lisa Liggins, Information Management Specialist
Minutes approved as presented on _____.

Lisa Summers, Secretary
ONEIDA BUSINESS COMMITTEE

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve January 15, 2018, emergency meeting minutes

3. Supporting Materials

Report Resolution Contract

Other:

- 1. 3.
- 2. 4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Lisa Liggins, Information Management Specialist
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

DRAFT**Oneida Business Committee**

Emergency Meeting
8:30 a.m. Monday, January 15, 2018
BC Conference Room, 2nd floor, Norbert Hill Center

Minutes – DRAFT**EXECUTIVE SESSION**

Present: Chairman Tehassi Hill, Vice-Chairman Brandon Stevens, Treasurer Trish King, Council members: Daniel Guzman King David P. Jordan, Kirby Metoxen, Ernie Stevens III, Jennifer Webster;

Not Present: Secretary Lisa Summers;

Arrived at: ;

Others present: Jo Anne House, Kelly McAndrews, Pat Pelky, Larry Barton, Laura Laitinen-Warren;

I. CALL TO ORDER AND ROLL CALL by Chairman Tehassi Hill at 8:34 p.m.

For the record: Secretary Summers is out due to a family emergency.

II. OPENING by Chairman Tehassi Hill**III. ADOPT THE AGENDA (00:01:36)**

Motion by Jennifer Webster to adopt the agenda as presented, seconded by Ernie Stevens III. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

IV. EXECUTIVE SESSION (00:02:03)

Motion by Brandon Stevens to go into executive session at 8:35 a.m., seconded by Trish King. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

Motion by David P. Jordan to come out of executive session at 9:13 a.m., seconded by Brandon Stevens. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen, Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

Roll call for the record:

Present: Chairman Tehassi Hill, Vice-Chairman Brandon Stevens, Treasurer Trish King, Council members: Daniel Guzman King David P. Jordan, Kirby Metoxen, Ernie Stevens III, Jennifer Webster;

DRAFT**A. New Business****1. Determine next steps regarding land acquisition # 01201801V (00:02:33)**

Sponsor: Tehassi Hill, Chairman

Motion by Trish King to accept the update regarding land acquisition # 0120180V as information, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen,
Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

2. Approve limited waiver of sovereign immunity for DJW Investments, LLC file # 2018-0067 (00:03:03)

Sponsor: JoAnne House, Chief Counsel

Motion by Ernie Stevens III to approve the limited waiver of sovereign immunity for DJW Investments, LLC file # 2018-0067, seconded by Jennifer Webster. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen,
Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

II. ADJOURN (00:03:32)

Motion by David P. Jordan to adjourn at 9:14 p.m., seconded by Daniel Guzman King. Motion carried unanimously:

Ayes: Daniel Guzman King, David P. Jordan, Trish King, Kirby Metoxen,
Brandon Stevens, Ernie Stevens III, Jennifer Webster

Not Present: Lisa Summers

Minutes prepared by Lisa Liggins, Information Management Specialist
Minutes approved as presented on _____.

Lisa Summers, Secretary
ONEIDA BUSINESS COMMITTEE

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header: Resolutions

Accept as Information only

Action - please describe:

Adopt resolution entitled Amending resolution # BC 08-30-17-A Appointment of Liaison Responsibilities for Organization Entities

3. Supporting Materials

Report Resolution Contract

Other:

1. Redline to resolution # BC 08-30-17-A

3.

2. DRAFT amending resolution

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison: Lisa Summers, Secretary

Primary Requestor/Submitter: Submitted by: Lisa Liggins, Info. Mgmt. Spec/BC Support Office
Your Name, Title / Dept. or Tribal Member

Additional Requestor: Name, Title / Dept.

Additional Requestor: Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

TO: ONEIDA BUSINESS COMMITTEE

FROM: LISA SUMMERS, SECRETARY

RE: Resolution for amending the 2017-2020 OBC Liaison Appointments for Organization Entities

BACKGROUND

The OBC adopted resolution # BC 08-30-17-A entitled Appointment of Liaison Responsibilities for Organization Entities. At the that time, it was indicated the resolution would be reviewed periodically to ensure it is accurate.

At the January 12, 2018, BC Work Session, the resolution # BC 08-30-17-A was reviewed and the following changes were agreed upon by those present:

1. C1 - replace Patricia King with David P. Jordan
2. C4 - add Lisa Summers and Ernie Stevens III as alternates
3. C5 - add Lisa Summers as alternate
4. R1 - delete, the entity has been dissolved
5. M13 - remove Kirby Metoxen as alternate

In making the agreed upon changes, the following corrects were also noted:

1. Add headers to each page
2. W9 - removed OBC as alternate

Attached you will find a redline of the draft to the original as well as a clean copy of the draft.

This resolution does not require a statement of effect in accordance with the resolution BC 06-01-05-C.

REQUESTED ACTION

Adopt resolution entitled Amending resolution # BC 08-30-17-A Appointment of Liaison Responsibilities for Organization Entities

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf OR print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

Oneida Nation

Post Office Box 365

Phone: (920)869-2214



Oneida, WI 54155

**BC Resolution # _____
Amending resolution # BC 08-30-17-A Appointment of Liaison
Responsibilities for Organization Entities**

WHEREAS, the Oneida Nation is a federally recognized Indian government and a treaty tribe recognized by the laws of the United States of America; and

WHEREAS, the Oneida General Tribal Council is the governing body of the Oneida Nation; and

WHEREAS, the Oneida Business Committee has been delegated the authority of Article IV, Section 1, of the Oneida Tribal Constitution by the Oneida General Tribal Council; and

WHEREAS, the Oneida Business Committee has determined that the appointment of liaisons to various boards, committees, commissions, and organization units fosters communication and understanding between the organization entities and the Oneida Business Committee; and

WHEREAS, the Oneida Business Committee ~~has met~~ [adopted resolution # BC 08-30-17-A, which appointed liaison representatives for organization entities;](#)

WHEREAS, [the Oneida Business Committee has met, determined additional changes are needed,](#) and determined who should be appointed to serve as liaison to the organization entities;

NOW THEREFORE BE IT RESOLVED, that the following liaison appointments are adopted [for the 2017-2020 term of the Oneida Business Committee:](#)

Ref #	Entity	Primary	Alternate
Corporations			
C1	Oneida Airport Hotel Corporation	Kirby Metoxen and Daniel Guzman	Patricia King
C2	Bay Bancorporation, Inc.	Patricia King David P. Jordan	Ernest Stevens III and Daniel Guzman
C3	Oneida ESC Group, LLC	Lisa Summers and Ernest Stevens III	Patricia King and Daniel Guzman
C4	Oneida Golf Enterprise Corporation	Patricia King	Tehassi?tasi Hill, Lisa Summers and Ernest Stevens III
C5	Oneida Seven Generations Corporation	Brandon L. Yellowbird-Stevens	Patricia King and Lisa Summers

Ref #	Entity	Primary	Alternate
Boards, Committees, Commissions			
Regulatory/Hearing Body			
R1	Oneida Child Protective Board	Lisa Summers	Jennifer Webster
R2R1	Oneida Election Board	Tehassi?tasi Hill	Lisa Summers
R3R2	Oneida Environmental Resource Board	Daniel Guzman and Ernest Stevens III	Jennifer Webster
R4R3	Oneida Gaming Commission	Kirby Metoxen	Brandon L. Yellowbird-Stevens
R5R4	Oneida Land Commission	Patricia King	Jennifer Webster and Tehassi?tasi Hill
R6R5	Pardon and Forgiveness Screening Committee	Brandon L. Yellowbird-Stevens	Jennifer Webster
R7R6	Oneida Personnel Commission	Tehassi?tasi Hill	Kirby Metoxen
R8R7	Oneida Police Commission	Lisa Summers and Ernest Stevens III	Daniel Guzman
R9R8	Oneida Nation School Board	Brandon L. Yellowbird-Stevens	Ernest Stevens III and Daniel Guzman
R10R9	Oneida Trust Enrollment Committee	Kirby Metoxen	Not Applicable
Advisory			
A1	Anna John Resident Centered Care Community Board	Jennifer Webster	Daniel Guzman
A2	Oneida Nation Arts Board	Kirby Metoxen	Daniel Guzman and Jennifer Webster
A3	Oneida Nation Commission on Aging	Jennifer Webster and Lisa Summers	Daniel Guzman
A4	Hall Of Fame Selection Committee	Ernest Stevens III	Lisa Summers
A5	Oneida Land Claims Commission	Kirby Metoxen	Lisa Summers and Jennifer Webster
A6	Oneida Library Board	Tehassi?tasi Hill	David P. Jordan
A7	Oneida Pow-wow Committee	Ernest Stevens III	Jennifer Webster
A8	Southeast Wisconsin Oneida Tribal Services Advisory Board	Kirby Metoxen and Daniel Guzman	Ernest Stevens III
A9	Oneida Nation Veterans Affairs Committee	Jennifer Webster	Lisa Summers and Daniel Guzman
Governing Responsibility / Organizational Group			
G1	Head Start Policy Council	Jennifer Webster	Kirby Metoxen
Standing Committees			
S1	Audit Committee	David P. Jordan, Lisa Summers, Ernest Stevens III, and Tehassi?tasi Hill	
S2	Community Development & Planning Committee	Patricia King, Jennifer Webster, Kirby Metoxen, Ernest Stevens III, Daniel Guzman, and Brandon L. Yellowbird -Stevens	
S3	Finance Committee	Patricia King, Jennifer Webster, and Daniel Guzman	
S4	Judiciary Standing Committee	Tehassi?tasi Hill, David P. Jordan, and Lisa Summers	
S5	Legislative Operating Committee	David P. Jordan, Kirby Metoxen, Ernest Stevens III, Jennifer Webster, and Daniel Guzman	
S6	Quality of Life Committee	Daniel Guzman, Kirby Metoxen, Brandon L. Yellowbird-Stevens, Tehassi?tasi Hill, and Ernest Stevens III	

Ref #	Entity	Primary	Alternate
Membership Representation - External Entity			
M1	Great Lakes Inter-Tribal Council, Inc. http://www.glitc.org/	Tehassi?tasi Hill	Brandon L. Yellowbird-Stevens
M2	Haskell Indian Nations University National Board of Regents	Brandon L. Yellowbird-Stevens	Ernest Stevens III and Jennifer Hill Kelley
M3	Hobart, Ashwaubenon, Lawrence, Oneida	Tehassi?tasi Hill	OBC
M4	Midwest Alliance of Sovereign Tribes http://www.m-a-s-t.org/	Tehassi?tasi Hill	OBC
M5	National Congress of American Indians http://www.ncai.org/	Tehassi?tasi Hill	OBC
M6	National Indian Gaming Association http://www.indiangaming.org/	Brandon L. Yellowbird-Stevens	OBC
M7	Native American Finance Officers Association http://www.nafoa.org/	Trish King	Daniel Guzman, Kirby Metoxen, and Lawrence Barton
M8	Native American Tourism of Wisconsin http://natow.org/	Kirby Metoxen	OBC
M9	Natural Resource Damage Assessment https://darrp.noaa.gov/about-darrp/natural-resource-damage-assessment	Tehassi?tasi Hill	Patrick Pelky, Kirby Metoxen, Daniel Guzman, and Ernest Stevens III
M10	Regional Tribal Operations Committee https://www.epa.gov/tribal/region-5-tribal-program	Tehassi?tasi Hill	Ernest Stevens III, Daniel Guzman, and Jeff Mears
M11	Religious Practices Advisory Committee https://doc.wi.gov/	Melinda J. Danforth	Jennifer Webster and Daniel Guzman
M12	Tribal Treasury Advisory Committee https://www.nafoa.org/resources/tribal-treasury-advisory-committee	Trish King	Not Applicable
M13	Tribal Technical Advisory Group https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/Tribal-Technical-Advisory-Group.html	Jennifer Webster	Daniel Guzman, Kirby Metoxen, Melinda J. Danforth, and Debra J. Danforth
Local Government Relations			
L1	Greater Green Bay Chamber of Commerce http://www.greatergbc.org/	Louise Cornelius/ Ernest Stevens III	Daniel Guzman and Jennifer Webster
L2	Greater Green Bay Convention & Visitors Bureau https://www.greenbay.com/	Steve Ninham/Kirby Metoxen	Daniel Guzman
L3	Service and Cooperative Agreements: <i>Ashwaubenon, Village of Brown, County of Green Bay, City of Hobart, Village of Oneida, Town of Outagamie, County of</i>	Tehassi?tasi Hill, Patricia King, Lisa Summers, and Brandon L. Yellowbird-Stevens	

<u>Ref #</u>	<u>Entity</u>	<u>Primary</u>	<u>Alternate</u>
State Government Relations			
W1	Department of Administration	Tehassi?tasi Hill and Brandon L. Yellowbird-Stevens	Lisa Summers and Patricia King
W2	Department of Agriculture, Trade and Consumer Protection	Daniel Guzman, Ernest Stevens III, and Jennifer Webster	OBC
W3	Department of Corrections	Lisa Summers and Brandon L. Yellowbird-Stevens	OBC
W4	Department of Financial Institutions	Patricia King and Ernest Stevens III	OBC
W5	Department of Health Services	Jennifer Webster and Daniel Guzman	OBC
W6	Department of Justice	Lisa Summers	Brandon L. Yellowbird-Stevens
W7	Department of Natural Resources	Ernest Stevens III and Daniel Guzman	OBC
W8	Department of Revenue	Patricia King and Daniel Guzman	OBC
W9	Department of Tourism	Kirby Metoxen	Ernest Stevens III, and Jennifer Webster, and OBC
W10	Department of Transportation	David Jordan	Kirby Metoxen, James Petitjean, and Travis Wallenfang
W11	Department of Workforce Development	Brandon L. Yellowbird-Stevens	OBC
W12	Inter-Tribal Criminal Justice Council	Lisa Summers	OBC
W13	Special Committee on State Tribal Relations	Lisa Summers	Not Applicable
W14	Wisconsin Council on Problem Gambling	Kirby Metoxen	Brandon L. Yellowbird-Stevens
W15	Wisconsin Minority Health Leadership Council	Jennifer Webster	Kirby Metoxen and Daniel Guzman
W16	Wisconsin Tribal Conservation Advisory Council	Ernest Stevens III	Daniel Guzman, Lisa Summers, and Patrick Pelky

Oneida Nation

Post Office Box 365

Phone: (920)869-2214



Oneida, WI 54155

BC Resolution # _____
Amending resolution # BC 08-30-17-A Appointment of Liaison
Responsibilities for Organization Entities

- 1 **WHEREAS,** the Oneida Nation is a federally recognized Indian government and a treaty tribe
 2 recognized by the laws of the United States of America; and
 3
 4 **WHEREAS,** the Oneida General Tribal Council is the governing body of the Oneida Nation; and
 5
 6 **WHEREAS,** the Oneida Business Committee has been delegated the authority of Article IV, Section 1,
 7 of the Oneida Tribal Constitution by the Oneida General Tribal Council; and
 8
 9 **WHEREAS,** the Oneida Business Committee has determined that the appointment of liaisons to
 10 various boards, committees, commissions, and organization units fosters communication
 11 and understanding between the organization entities and the Oneida Business
 12 Committee; and
 13
 14 **WHEREAS,** the Oneida Business Committee adopted resolution # BC 08-30-17-A, which appointed
 15 liaison representatives for organization entities;
 16
 17 **WHEREAS,** the Oneida Business Committee has met, determined additional changes are needed,
 18 and determined who should be appointed to serve as liaison to the organization entities;
 19
 20 **NOW THEREFORE BE IT RESOLVED,** that the following liaison appointments are adopted for the 2017-
 21 2020 term of the Oneida Business Committee:
 22
 23

Ref #	Entity	Primary	Alternate
Corporations			
C1	Oneida Airport Hotel Corporation	Kirby Metoxen and Daniel Guzman	Patricia King
C2	Bay Bancorporation, Inc.	David P. Jordan	Ernest Stevens III and Daniel Guzman
C3	Oneida ESC Group, LLC	Lisa Summers and Ernest Stevens III	Patricia King and Daniel Guzman
C4	Oneida Golf Enterprise Corporation	Patricia King	Tehassi?tasi Hill, Lisa Summers and Ernest Stevens III
C5	Oneida Seven Generations Corporation	Brandon L. Yellowbird-Stevens	Patricia King and Lisa Summers

24

25

Ref #	Entity	Primary	Alternate
Boards, Committees, Commissions			
<i>Regulatory/Hearing Body</i>			
R1	Oneida Election Board	Tehassi?tasi Hill	Lisa Summers
R2	Oneida Environmental Resource Board	Daniel Guzman and Ernest Stevens III	Jennifer Webster
R3	Oneida Gaming Commission	Kirby Metoxen	Brandon L. Yellowbird-Stevens
R4	Oneida Land Commission	Patricia King	Jennifer Webster and Tehassi?tasi Hill
R5	Pardon and Forgiveness Screening Committee	Brandon L. Yellowbird-Stevens	Jennifer Webster
R6	Oneida Personnel Commission	Tehassi?tasi Hill	Kirby Metoxen
R7	Oneida Police Commission	Lisa Summers and Ernest Stevens III	Daniel Guzman
R8	Oneida Nation School Board	Brandon L. Yellowbird-Stevens	Ernest Stevens III and Daniel Guzman
R9	Oneida Trust Enrollment Committee	Kirby Metoxen	Not Applicable
<i>Advisory</i>			
A1	Anna John Resident Centered Care Community Board	Jennifer Webster	Daniel Guzman
A2	Oneida Nation Arts Board	Kirby Metoxen	Daniel Guzman and Jennifer Webster
A3	Oneida Nation Commission on Aging	Jennifer Webster and Lisa Summers	Daniel Guzman
A4	Hall Of Fame Selection Committee	Ernest Stevens III	Lisa Summers
A5	Oneida Land Claims Commission	Kirby Metoxen	Lisa Summers and Jennifer Webster
A6	Oneida Library Board	Tehassi?tasi Hill	David P. Jordan
A7	Oneida Pow-wow Committee	Ernest Stevens III	Jennifer Webster
A8	Southeast Wisconsin Oneida Tribal Services Advisory Board	Kirby Metoxen and Daniel Guzman	Ernest Stevens III
A9	Oneida Nation Veterans Affairs Committee	Jennifer Webster	Lisa Summers and Daniel Guzman
Governing Responsibility / Organizational Group			
G1	Head Start Policy Council	Jennifer Webster	Kirby Metoxen
Standing Committees			
S1	Audit Committee	David P. Jordan, Lisa Summers, Ernest Stevens III, and Tehassi?tasi Hill	
S2	Community Development & Planning Committee	Patricia King, Jennifer Webster, Kirby Metoxen, Ernest Stevens III, Daniel Guzman, and Brandon L. Yellowbird -Stevens	
S3	Finance Committee	Patricia King, Jennifer Webster, and Daniel Guzman	
S4	Judiciary Standing Committee	Tehassi?tasi Hill, David P. Jordan, and Lisa Summers	
S5	Legislative Operating Committee	David P. Jordan, Kirby Metoxen, Ernest Stevens III, Jennifer Webster, and Daniel Guzman	
S6	Quality of Life Committee	Daniel Guzman, Kirby Metoxen, Brandon L. Yellowbird-Stevens, Tehassi?tasi Hill, and Ernest Stevens III	

Ref #	Entity	Primary	Alternate
Membership Representation - External Entity			
M1	Great Lakes Inter-Tribal Council, Inc. http://www.glitc.org/	Tehassi?tasi Hill	Brandon L. Yellowbird-Stevens
M2	Haskell Indian Nations University National Board of Regents	Brandon L. Yellowbird-Stevens	Ernest Stevens III and Jennifer Hill Kelley
M3	Hobart, Ashwaubenon, Lawrence, Oneida	Tehassi?tasi Hill	OBC
M4	Midwest Alliance of Sovereign Tribes http://www.m-a-s-t.org/	Tehassi?tasi Hill	OBC
M5	National Congress of American Indians http://www.ncai.org/	Tehassi?tasi Hill	OBC
M6	National Indian Gaming Association http://www.indiangaming.org/	Brandon L. Yellowbird-Stevens	OBC
M7	Native American Finance Officers Association http://www.nafoa.org/	Trish King	Daniel Guzman, Kirby Metoxen, and Lawrence Barton
M8	Native American Tourism of Wisconsin http://natow.org/	Kirby Metoxen	OBC
M9	Natural Resource Damage Assessment https://darrp.noaa.gov/about-darrp/natural-resource-damage-assessment	Tehassi?tasi Hill	Patrick Pelky, Kirby Metoxen, Daniel Guzman, and Ernest Stevens III
M10	Regional Tribal Operations Committee https://www.epa.gov/tribal/region-5-tribal-program	Tehassi?tasi Hill	Ernest Stevens III, Daniel Guzman, and Jeff Mears
M11	Religious Practices Advisory Committee https://doc.wi.gov/	Melinda J. Danforth	Jennifer Webster and Daniel Guzman
M12	Tribal Treasury Advisory Committee https://www.nafoa.org/resources/tribal-treasury-advisory-committee	Trish King	Not Applicable
M13	Tribal Technical Advisory Group https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/Tribal-Technical-Advisory-Group.html	Jennifer Webster	Daniel Guzman, Melinda J. Danforth, and Debra J. Danforth
Local Government Relations			
L1	Greater Green Bay Chamber of Commerce http://www.greatergbc.org/	Louise Cornelius/ Ernest Stevens III	Daniel Guzman and Jennifer Webster
L2	Greater Green Bay Convention & Visitors Bureau https://www.greenbay.com/	Steve Ninham/Kirby Metoxen	Daniel Guzman
L3	Service and Cooperative Agreements: <i>Ashwaubenon, Village of</i> <i>Brown, County of</i> <i>Green Bay, City of</i> <i>Hobart, Village of</i> <i>Oneida, Town of</i> <i>Outagamie, County of</i>	Tehassi?tasi Hill, Patricia King, Lisa Summers, and Brandon L. Yellowbird-Stevens	

Ref #	Entity	Primary	Alternate
State Government Relations			
W1	Department of Administration	Tehassi?tasi Hill and Brandon L. Yellowbird-Stevens	Lisa Summers and Patricia King
W2	Department of Agriculture, Trade and Consumer Protection	Daniel Guzman, Ernest Stevens III, and Jennifer Webster	OBC
W3	Department of Corrections	Lisa Summers and Brandon L. Yellowbird-Stevens	OBC
W4	Department of Financial Institutions	Patricia King and Ernest Stevens III	OBC
W5	Department of Health Services	Jennifer Webster and Daniel Guzman	OBC
W6	Department of Justice	Lisa Summers	Brandon L. Yellowbird-Stevens
W7	Department of Natural Resources	Ernest Stevens III and Daniel Guzman	OBC
W8	Department of Revenue	Patricia King and Daniel Guzman	OBC
W9	Department of Tourism	Kirby Metoxen	Ernest Stevens III and Jennifer Webster
W10	Department of Transportation	David Jordan	Kirby Metoxen, James Petitjean, and Travis Wallenfang
W11	Department of Workforce Development	Brandon L. Yellowbird-Stevens	OBC
W12	Inter-Tribal Criminal Justice Council	Lisa Summers	OBC
W13	Special Committee on State Tribal Relations	Lisa Summers	Not Applicable
W14	Wisconsin Council on Problem Gambling	Kirby Metoxen	Brandon L. Yellowbird-Stevens
W15	Wisconsin Minority Health Leadership Council	Jennifer Webster	Kirby Metoxen and Daniel Guzman
W16	Wisconsin Tribal Conservation Advisory Council	Ernest Stevens III	Daniel Guzman, Lisa Summers, and Patrick Pelky

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Adopt resolution entitled Amendment to Opening Date of the Legal Resource Center to August 1, 2018

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter:
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

**MEMORANDUM**

TO: Jo Anne House, Chief Counsel

FROM: GTC Legal Resource Center

DATE: January 18, 2018

SUBJECT: GTC Legal Resource Center Extension of Opening Date

The GTC Legal Resource Center (LRC) is requesting an extension of the opening date. The reasons for this are as follows:

1. The area of the GTC LRC law which states that the GTC LRC shall “provide legal advice and representation to . . . employees in cases before the judiciary. . . .”, needs clarification as to what the scope of representation towards employees covers. i.e. what is the extent of representation for non-Oneida employees.
2. The GTC LRC needs to secure additional staff with legal background in order to successfully open and operate the Legal Resource Center. i.e. a paralegal/legal secretary.

If there are any questions, or need for additional information, please contact the Legal Resource Center.

Wes Martin Jr. 920-496-5324
Tsyoslake House 920-496-5322

Oneida Nation

Post Office Box 365

Phone: (920)869-2214



Oneida, WI 54155

BC Resolution # _____

Amendment to Opening Date of the Legal Resource Center to August 1, 2018

- 1 **WHEREAS**, the Oneida Nation is a federally recognized Indian government and a
 2 treaty tribe recognized by the laws of the United States of America; and
 3
- 4 **WHEREAS**, the Oneida General Tribal Council is the governing body of the Oneida
 5 Nation; and
 6
- 7 **WHEREAS**, the Oneida Business Committee has been delegated the authority of
 8 Article IV, Section 1, of the Oneida Tribal Constitution by the Oneida
 9 General Tribal Council; and
 10
- 11 **WHEREAS**, on November 14, 2016, the Oneida General Tribal Council directed the
 12 Oneida Business Committee to establish a legal office consisting of
 13 elected advocates and an elected advising attorney to represent Tribal
 14 members and employees in any type of litigation at the Oneida Judiciary
 15 and to advise the Oneida General Tribal Council during duly called
 16 General Tribal Council meetings; and
 17
- 18 **WHEREAS**, the Oneida General Tribal Council required the advising attorney and
 19 advocate positions to be placed on the ballot for the 2017 General
 20 Election; and
 21
- 22 **WHEREAS**, on May 24, 2017, the Oneida Business Committee enacted emergency
 23 legislation pursuant to resolution # BC-05-24-17-A which established the
 24 Legal Resource Center and set the following transition schedule
- 25 (1) *Elections*. The elections for the Legal Resource Center were held during the 2017
 26 general election. The election process followed the Nation's Election law and during
 27 the first Legal Resource Center election, the Advocates' terms shall be as follows:
 - 28 a. The candidate for Advocate with the highest number of votes shall be elected to
 29 a term of four (4) years.
 - 30 b. The candidate for Advocate with the next highest number of votes shall be
 31 elected to a term of three (3) years.
 - 32 c. In the event of any tie vote, the provisions of the Nation's Election law for
 33 resolving a tie vote shall determine the outcome.
 - 34 (2) *Legal Resource Center Opening*. The Legal Resource Center shall be open to Tribal
 35 members and employees beginning on February 1, 2018; and
 36
- 37 **WHEREAS**, there was no nominations or applications for the advising attorney position
 38 on the ballot of the 2017 General Election held on July 8, 2017; and

39
40 **WHEREAS**, a public meeting was held on July 20, 2017, in accordance with the
41 Legislative Procedures Act for the permanent adoption of the Legal
42 Resource Center Law and no comments were received; and
43

44 **WHEREAS**, on September 09, 2017 the Oneida Business Committee adopted the
45 Legal Resource Center law pursuant to resolution # BC-09-13-17-L; and
46

47 **WHEREAS**, on October 14, 2017 a Tribal Caucus was held with no nominations for the
48 advising attorney position, there were no applications submitted by the
49 October 20, 2017, deadline and as a result there were no candidates for
50 the advising attorney position on the ballot for the December 02, 2017
51 Special Election; and
52

53 **WHEREAS**, the advocates elected during the July 2017 General Elections and have
54 been working to set up the Legal Resource Center offices, drafting
55 procedures for accepting clients, and identifying training for brief writing,
56 representation processes, and hearing processes, as well as on various
57 laws of the Nation; and
58

59 **WHEREAS**, the advocates have identified that additional training is needed to be fully
60 prepared to open the Legal Resource Center without having an advising
61 attorney available to provide mentoring and assistance; and
62

63 **WHEREAS**, the Oneida Business Committee agrees the lack of an attorney mentoring
64 and advising the advocates places a greater burden on the advocates to
65 obtain additional training to meet the needs of clients that may come to the
66 Legal Resource Center and to provide adequate representation;
67

68 **NOW THEREFORE BE IT RESOLVED**, that the Oneida Business Committee amends
69 resolutions # BC-05-24-17-A and BC-09-13-17-L to set the new opening date of the
70 Legal Resource Center as August 1, 2018.
71

72 **BE IT FUTHER RESOLVED**, that the Treasurer shall identify appropriate personnel to
73 assist the Legal Resource Center advocates in developing the FY2019 budget for that
74 office, including the addition of personnel to assist with receptionist and clerical duties.
75

76 **BE IT FINALLY RESOLVED**, the Business Committee Support Office shall assist the
77 Legal Resource Center offices with receptionist and clerical duties beginning July 1,
78 2018 and concluding upon adoption of the FY2019 budget and hiring the
79 receptionist/clerical staff.
80



Oneida Nation
 Oneida Business Committee
 Legislative Operating Committee
 PO Box 365 • Oneida, WI 54155-0365
Oneida-nsn.gov



Statement of Effect

Amendment to Opening Date of the Legal Resource Center to August 1, 2018

Summary

The resolution amends the opening date of the Legal Resource Center from February 1, 2018, to August 1, 2018.

Submitted by: Clorissa N. Santiago, Staff Attorney, Legislative Reference Office

Date: January 18, 2018

Analysis by the Legislative Reference Office

Following direction from the General Tribal Council, on May 24, 2017, the Oneida Business Committee adopted the Legal Resource Center law (“the Law”) on an emergency basis pursuant to resolution BC-05-24-17-A which established the Legal Resource Center. Emergency legislation was necessary to meet the General Tribal Council’s requirement that the Legal Resource Center advising attorney and advocate positions be placed on the ballot for the 2017 General Election. The Oneida Business Committee then adopted the Law on a permanent basis through resolution BC-09-13-17-L.

Both resolution BC-05-24-17-A and BC-09-13-17-L established a Transition Plan for the Legal Resource Center which requires the Legal Resource Center to open to members of the Nation and employees on February 1, 2018. The Transition Plan also allows the Oneida Business Committee to make modifications and additions to the Transition Plan if necessary.

There were no nominations or applications for the advising attorney position on the ballot of the 2017 General Election held on July 8, 2017, or on the Special Election held on December 2, 2017.

This resolution states that although the elected advocates have been working towards creating and implementing the various processes and procedures needed to open the Legal Resource Center, additional training is needed to be fully prepared to open the Legal Resource Center without having an advising attorney available to provide guidance and assistance. The Oneida Business Committee agrees the lack of an attorney mentoring and advising the advocates places a greater burden on the advocates to obtain additional training to meet the needs of clients that may come to the Legal Resource Center and to provide adequate.

This resolution amends resolutions BC-05-24-17-A and BC-09-13-17-L to set the new opening date of the Legal Resource Center as August 1, 2018. Additionally, it establishes that the Oneida Nation Treasurer shall identify appropriate personnel to assist the Legal Resource Center advocates in developing the Fiscal Year 2019 budget for that office, including the addition of personnel to assist with receptionist and clerical duties. The Business Committee Support Office shall assist the Legal Resource Center offices with receptionist and clerical duties beginning July 1, 2018 and concluding upon adoption of the FY2019 budget and hiring the receptionist/clerical staff.

Conclusion

Adoption of this resolution would not conflict with any of the Nation’s laws.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: _____
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

Approval of resolution is needed to provide the Medical Director the ability to sign-off on Purchase Referred Care regarding health care payments subject to CHEF reimbursement during the period the Operations Director will be out of the office on Medical Leave.

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf OR print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

Oneida Nation

Post Office Box 365

Phone: (920)869-2214



Oneida, WI 54155

BC Resolution # _____
Temporary Amendment to BC Resolution 08-28-13-B; Authorization to Sign-Off on Patient Referred Care – Health Care Payments

WHEREAS, the Oneida Nation is a federally recognized Indian government and a treaty tribe recognized by the laws of the United States of America; and

WHEREAS, the Oneida General Tribal Council is the governing body of the Oneida Nation; and

WHEREAS, the Oneida Business Committee has been delegated the authority of Article IV, Section 1, of the Oneida Tribal Constitution by the Oneida General Tribal Council; and

WHEREAS, the Oneida Comprehensive Health Division receives notices from vendors for health care invoices (medical, dental, and Behavioral Health invoices), verifies the payment should be made, and authorizes payment on the health care invoice; and

WHEREAS, in regards to invoices in excess of \$19,000 the Nation receives reimbursement from Catastrophic Health Emergency Funds (CHEF) that is on a first come first served bases such that a delay in submission of the reimbursement request could result in funding being unavailable and the Nation utilizing Tribal contribution or direct billing receipts from health division patients to offset these costs; and

WHEREAS, the Oneida Comprehensive Health Division has identified all processes which could be addressed to reduce the overall time of receipt, review, approval, and payment of health care invoices; and

WHEREAS, BC Resolution 08-28-13-B assigns sign-off authority for Patient Referred Care (formerly Contract Health Services) regarding health care payments subject to CHEF reimbursement; and

WHEREAS, there is a need to temporarily reassign sign-off authority as the Comprehensive Health Division Operations Director will be on medical leave for a period of 8 weeks; and

NOW THEREFORE BE IT RESOLVED, that the Comprehensive Health Division Medical Director shall have sign-off authority for Patient Referred Care regarding health care payments subject to CHEF reimbursement for amounts not exceeding \$100,000 from the date this resolution is adopted until March 29, 2018.

BE IT FUTHER RESOLVED, that all other requirements of BC Resolution 08-28-13-B remain in full force and effect.



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Legislative Operating Committee
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Statement of Effect

Temporary Amendment to BC Resolution 08-28-13-B; Authorization to Sign-Off on Patient Referred Care – Health Care Payments

Summary

The resolution temporarily amends Oneida Business Committee resolution BC-08-28-13-B titled “Authorization to Sign-Off on Contract Health Services – Health Care Payments” to temporarily grant sign-off authority to the Comprehensive Health Division Medical Director.

Submitted by: Clorissa N. Santiago, Staff Attorney, Legislative Reference Office

Date: January 18, 2018

Analysis by the Legislative Reference Office

Oneida Business Committee resolution BC-08-28-13-B titled, “Authorization to Sign-Off on Contract Health Services – Health Care Payments” assigns sign-off authority to the Comprehensive Health Division Operations Director for Patient Referred Care (formerly known as Contract Health Services) regarding health care payments subject to Catastrophic Health Emergency Funds (CHEF) reimbursement.

The Comprehensive Health Division Operations Director will be on medical leave for a period of eight weeks and will not be available to sign-off on time sensitive health care payments subject to CHEF reimbursement., resulting in a need to temporarily reassign sign-off authority.

This resolution temporarily reassigns sign-off authority to the Comprehensive Health Division Medical Director for Patient Referred Care regarding health care payments subject to CHEF reimbursement for amounts not exceeding \$100,000 from the date this resolution is adopted until March 19, 2018.

Conclusion

Adoption of this resolution would not conflict with any of the Nation’s laws.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header: Standing Committees

Accept as Information only

Action - please describe:

Adopt the Community Support Fund law Rule Handbook.

3. Supporting Materials

Report Resolution Contract

Other:

1. Memo

3. Summary Report

2. Rule Handbook

4. Public Meeting Documents

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison: David P. Jordan, LOC Chairman

Primary Requestor: Jennifer Falck, LRO Director
Your Name, Title / Dept. or Tribal Member

Additional Requestor: Clorissa N. Santiago, LRO Staff Attorney
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

See attached.

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org



Oneida Nation
Oneida Business Committee
Legislative Operating Committee
PO Box 365 • Oneida, WI 54155-0365
Oneida-nsn.gov



TO: Oneida Business Committee
FROM: David P. Jordan, Legislative Operating Committee Chairman
DATE: January 24, 2018
RE: Certification of Community Support Fund Law Rule Handbook

A handwritten signature in black ink, appearing to read 'David P. Jordan', is placed to the right of the 'FROM:' line.

The Legislative Operating Committee (LOC) has reviewed and certified the Community Support Fund law Rule Handbook. The Community Support Fund law delegates administrative rulemaking authority to the operators of the Community Support Fund as authorized by the Administrative Rulemaking law. The Social Services Area of the Governmental Services Division has delegated the operation of the Community Support Fund to the Economic Support Department.

The Community Support Fund law Rule Handbook provides guidance on how the Community Support Fund is utilized so that the Nation can assist the greatest number of members of the Nation who apply for assistance to the Community Support Fund in times of a catastrophic event, illness, injury or emergency event when no other resources for assistance exist.

Requested Action

Consider the adoption of the Community Support Fund Law Rule Handbook.

Jo Anne House, PhD | Chief Counsel
James R. Bittorf | Deputy Chief Counsel

Patricia M. Stevens Garvey
Kelly M. McAndrews
Michelle L. Gordon
Krystal L. John
Robert J. Collins, II

Law Office



MEMORANDUM

TO: Legislative Operating Committee

FROM: Michelle L. Gordon, Staff Attorney 

DATE: January 12, 2018

SUBJECT: Community Support Fund Rule Handbook

The Oneida Business Committee Resolution BC-10-25-17 requires that the Community Support Fund Rule Handbook become effective on January 25, 2018.

An initial Public Meeting was held on September 22, 2017. While there were no public comments received, the Economic Support Department, who is responsible for drafting the rules, saw important additional amendments that needed to be made. Therefore, a new effective date of January 25, 2018 was granted.

On November, 27, 2017 an updated CSF Rule Handbook was provided to the Legislative Reference Office and a Statement of Effect was requested.

On November 30, 2017 a Public Meeting Notice was sent to the Kalihwisaks for publication in the December 7, 2017 publication.

On December 6, 2017 the required documents were sent to the LRO for publication in the Oneida Register.

On December 7, 2017 the Public Meeting notice was published in the Kalihwisaks.

On December 21, 2017 a Public Meeting was held. Myself and Economic Support Director, Delia Smith remained there for a half an hour in case anyone came to the meeting late.

No public comments were received by the deadline of January 2, 2018, therefore it was not necessary to review any public comments.

No other agency will be financially affected so there was no request for a financial analysis outside of Economic Support.



**ONEIDA NATION
COMMUNITY SUPPORT FUND
RULEBOOK**



Title 1. Government and Finances – Chapter 125
Community Support Fund
Rule Nos. 1 through 18

I. Purpose, Delegation, Adoption, Amendment and Repeal

1-1. *Purpose.* The purpose of the Community Support Fund rules is to provide guidance on how the Community Support Fund is utilized so that the Nation can assist the greatest number of members of the Nation who apply for assistance to the Fund in times of a catastrophic event, illness, injury or emergency event when no other resources for assistance exist.

1-2. *Authority.* The Community Support Fund Law, Chapter 125, delegates rulemaking authority to the Social Services Area of the Government Services Division pursuant to the Administrative Rulemaking law (Chapter 17 Oneida Code of Laws).

1-3. These rules were adopted by the Economic Support Department of the Social Services Area of the Government Services Division in accordance with the procedures of the Administrative Rulemaking law.

1-4. These rules may be amended or repealed by the Economic Support Department and/or the Oneida Business Committee pursuant to the procedures set out in the Administrative Rulemaking Law. For the purpose of future amendments to these rules, each article is a separate rule and may be amended as such.

1-5. Should a provision of these rules or the application thereof to any person or circumstances be held as invalid, such invalidity shall not affect other provisions of these rules which are considered to have legal force without the invalid portions.

1-6. In the event of a conflict between a provision of these rules and a provision of another rule, internal policy, procedure, or other regulation; the provisions of these rules shall control.

1-7. These rules supersede all prior rules, regulations, internal policies or other requirements relating to the Community Support Fund.

1-8. This Article applies to each subsequent rule listed herein.

II. Definitions

2-1. This section shall govern the definitions of words and phrases used within this rule. All words not defined herein shall be used in their ordinary and everyday sense.

(a) “Applicant” means the subject of the application for assistance.

(b) “Business day” means Monday through Friday 8:00 a.m. to 4:30 p.m., excluding holidays of the Nation.

(c) “Caregiver” means the person who assists an ill or incapacitated immediate family member that is in need of twenty-four (24) hour per day, seven (7) days a week care.

(d) “Case manager” means an employee responsible for administering Community Support Fund benefits.

(e) “Catastrophic event” means a natural or man-made incident, which results in a substantial damage or loss requiring major financial resources to repair or recover. This includes, but is not limited to, a house fire, tornado, flood, or other disaster.

- (f) “Catastrophic illness/injury” means a serious debilitating illness, injury, impairment, or mental or physical condition that involves:
- (1) In-patient care;
 - (2) A period of continuing treatment due to a chronic serious health condition, including, but not limited to, chemotherapy, radiation, dialysis, and daily/weekly therapy resulting from trauma;
 - (3) A period of illness or injury that is long-term due to a condition for which treatment may be ineffective including, but not limited to, stroke or terminal disease;
 - (4) Multiple treatments either for restorative surgery after an accident or other injury, or for a chronic condition, including, but not limited to, cancer or kidney disease.
- (g) “COBRA” means the Consolidated Omnibus Budget Reconciliation Act of 1985 also known as continued group health care coverage costs under an employer’s plan.
- (h) “Cosmetic” means any medical service provided with the intent to enhance a person’s appearance, including, but not limited to, braces, veneers, teeth whitening, implants, or other plastic surgery.
- (i) “Critical Medical” means professionally delivered care or treating a life threatening illness which requires immediate or regularly scheduled monitored medical care, which includes, but is not limited to dialysis, chemotherapy, radiation, daily/weekly therapy resulting from trauma. This does not include routine annual or semi-annual appointments.
- (j) “Emergency event” means a situation that poses an immediate risk to health, life, safety, property or environment. Emergencies require urgent intervention to prevent further illness, injury, death, or other worsening of the situation.
- (k) “Emergency medical travel” means an unexpected serious health situation or occurrence requiring the immediate presence of immediate family. This includes, but is not limited to, end of life situations, and situations in which an immediate family member is placed on life support.
- (l) “Eviction” means the legal notice received from a landlord or mortgage holder that orders the tenant(s) to vacate the property.
- (m) “FMLA” means the Family Medical Leave Act, a Federal law authorizing temporary time off from an employment position to provide direct care to a family member, without losing their employment status.
- (n) “Fund” means the Community Support Fund.
- (o) “Garnishment” means a legal action that directs that money owed be seized to satisfy a debt.
- (p) “Household” means all persons who reside together at the same residence.
- (q) “Immediate family” means an individual’s husband, wife, mother, father, step mother, step father, son, daughter, step son, step daughter, brother, sister, step brother, step sister, grandparent, grandchild, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law or sister-in-law and any of the these relations attained through legal adoption, and/or a person who is legally responsible or otherwise named the legal guardian for the applicant.
- (r) “Incapacitation” means a state in which a person is temporarily or permanently impaired by mental and/or physical deficiency, disability, illness or injury.

- (s) “Income” means a measurement including, but not limited to, a combination of salaries, wages, retirement pension, disability income, government benefits, and unemployment of all people sharing a particular household/residence.
- (t) “Legal guardian” means a person who has the legal authority to care for the personal and property interests of another person granted through a Court order.
- (u) “Legal responsibility” means specific duties imposed upon a person to care or provide for another including liability for personal obligations as granted through a Power of Attorney or Court order.
- (v) “Major medical surgery” means a surgical procedure that carries a degree of risk to the patient’s life, or the potential for severe disability if something goes wrong during surgery. It is a surgical procedure that usually requires a patient to be put under general anesthesia and given respiratory assistance because he or she cannot breathe independently.
- (w) “Nation” means the Oneida Nation.
- (x) “Non-medical” means necessary intervention to support a patient with an on-going medical illness, injury or potential life threatening illness, and requires further testing or consultation with a specialist.
- (y) “Reimbursement” means to make repayment for expense(s) or a loss that incurred.
- (z) “Routine Exam” means an annual or semi-annual health exam provided by a physician, dentist, orthodontist, oral surgeon, or other similar health care specialist.
- (aa) “Security Deposit” means the payment of money held by a landlord in trust to protect him/herself from unpaid rent or damage to the living space.
- (bb) “Wages” means taxable income reported to the Internal Revenue Service for performing work.

III. SHELTER ASSISTANCE

- 3-1. *Purpose.* The purpose of shelter assistance is to assist enrolled members of the Nation with financial support for shelter expenses due to experiencing a catastrophic event, illness, or injury where no other resources exist.
- 3-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 3-3. *Eligibility Criteria.* In order to be eligible for shelter assistance a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Documentation verifying catastrophic event, illness, injury or other emergency event within the last thirty (30) days, including but not limited to:
 - (1) Medical verification specifying dates effected by illness or injury;
 - (2) Verification of short and/or long term disability specifying the dates received and the amount of the benefit;
 - (3) Other documentation listing damage or loss.
 - (c) Landlord Verification Form completed by the landlord of the applicant or a statement from the applicant’s mortgage holder stating the applicant’s monthly mortgage payment and current status;
 - (d) A current utility bill, such as a water, heat, or electricity bill;
 - (e) Verification of all household income for the last thirty (30) days;
 - (f) Verification of any mortgage disability insurance;

- (g) Verification of an applicant's personal and/or vacation time from employment; and
 - (h) Any other documentation requested by the Community Support Fund case manager.
- 3-4. *Receipt of Required Documentation.* Upon receipt of the completed application for shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant within 5 business days in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for shelter assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 3-5. *Rent or Mortgage Assistance.* An applicant may request assistance for rent or mortgage payments.
 - (a) The amount provided for rent or mortgage assistance shall not exceed \$500.00 per month. The amount of rent or mortgage assistance shall not exceed a total of twenty-four (24) months per life-time of the applicant.
 - (b) Only the applicant's portion of the rent or mortgage owed shall be considered when determining the amount of rent or mortgage assistance if the applicant's household consists of other adults.
 - (c) Shelter assistance shall not be used to pay family members or caregivers of the applicant. Only a valid landlord or mortgage holder shall be paid.
- 3-6. *Utility Assistance.* An applicant may request assistance for utilities, such as heat, water, and electricity.
 - (a) The utility bill shall be in the applicant's or current household's member's name.
 - (b) Applicants shall provide verification of application to all other available resources and programs for utility assistance.
 - (1) The Wisconsin Home Energy Assistance Program (WHEAP) serves as an example of an alternate program the applicant should apply for before applying for shelter assistance.
 - (c) Only the applicant's portion of the utility bill shall be considered when determining the amount of utility assistance if the applicant's household consists of other adults.
 - (d) The amount provided for utility assistance shall not exceed \$300.00 and shall only be allowed once every two (2) years. Assistance requested under this Rule and under Rule 18 shall be counted towards the total number of requests for the two (2) year period limit.
- 3-7. *Reporting Changes in the Household.* The applicant shall report any changes in the household to the case manager within ten (10) business days from the change occurring.
 - (a) Changes in the household that shall be reported include, but are not limited to, the following: relocation, addition or subtraction of a household member, income changes,

medical changes, submission of a social security disability application, submission of application or receipt of assistance from other agency or program.

(b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the case manager, not to exceed thirty (30) days.

3-8. *Discontinuation of Assistance.* The Community Support Fund Manager reserves the right to discontinue shelter assistance based on the following:

(a) A lack of funding availability

(b) A discovery that fraud or illegal activity has been determined to have caused homelessness.

(c) The case manager shall provide ten (10) day notification to an applicant whose shelter assistance will be discontinued.

3-9. *Changes in Household Information.* An applicant shall be responsible to report to the Fund Case Manager any change(s) in the household within ten (10) business days from the change. Changes shall include, but are not limited to the following:

(a) Relocation;

(b) Household member changes;

(c) Income;

(d) Medical changes;

(e) Submission of Social Security Disability application; and

(f) Receipt of other agency assistance

(1) Failure of an applicant to report changes in the household may result in suspension of assistance until verification of the change(s) is provided to the Fund Case Manager.

(2) An applicant shall have thirty (30) days to provide the verification once notification is received from the Fund Case Manager that verification is required.

3-10. *Hotel Assistance.* Hotel Assistance may be provided in the event of extreme situations as determined by the Fund Case Manager and the Director of Economic Support.

IV. EMERGENCY/NON-EMERGENCY MEDICAL TRAVEL

4-1. *Purpose.* The purpose is to assist enrolled members of the Nation with emergency and non-emergency medical travel expenses. This assistance is limited to immediate family members to assist with travel expenses.

4-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.

4-3. *Eligibility Criteria.* In order to be eligible for emergency/non-emergency medical travel assistance, a person must provide a completed Community Support Fund application and the following:

(a) Proof of enrollment in the Nation;

(b) Verifications of medical appointments which include the medical condition, date, time and location of the appointment;

(b) Verification of the applicants relationship to the patient;

(c) Verification of a valid driver's license for reimbursement of fuel purchases

(d) Original receipts for hotel, gas, and/or airfare which shall be dated within thirty (30) days of travel and show total cost paid; and

(e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

4-4. *Receipt of Required Documentation.* Upon receipt of the completed application for emergency/non-emergency medical travel assistance, the case manager shall determine if all required documentation was received from the applicant.

(a) The applicant shall provide all documentation requested by the case manager.

(b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.

(c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.

(d) An application for emergency/non-emergency medical travel assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

4-5. *Non-Emergency Travel.* Non-emergency travel is allowed when an immediate family member has scheduled medical appointments as shown through medical documentation.

(a) Documentation of scheduled appointments must be submitted and have prior approval.

(b) The medical appointment must be more than sixty (60) miles one way from the residence of the applicant.

(c) Gas cards will be disbursed the day prior to the appointment and original receipts are due within seven (7) business days. If receipts are not turned in, future requests for assistance will be denied for six (6) consecutive months starting when the first new request is made.

(1) Those who travel from sixty (60) miles up to one hundred fifty (150) miles one-way shall receive a \$30.00 gas card. Travel may also be eligible for reimbursement for up to \$30.00 with original receipts that coincide with an appointment.

(2) Those who travel over one hundred fifty (150) miles one-way shall receive a \$40.00 gas card. Travel may also be eligible for reimbursement for up to \$40.00 with original receipts that coincide with an appointment.

(d) Hotel reimbursement shall be a maximum of \$75.00 per night for up to a maximum of three (3) nights, and shall only be considered for approval by the Fund Case Manager where the appointment is more than one hundred (100) miles one-way from the residence of the applicant.

4-6. *Emergency Travel.* Emergency travel assistance is allowed when an immediate family member has a sudden or worsening life-threatening illness or injury, and is provided only on as a reimbursement of expenses.

(a) Airfare, bus, train, lodging, and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.

(b) Multiple immediate family members are limited to a reimbursement amount of \$500.00 each.

- (c) Reimbursement for emergency travel assistance is limited to those persons who must travel one hundred (100) miles or more one-way.
 - (d) Hotel reimbursement shall be a maximum of \$75.00 per night.
 - (e) All receipts must coincide with the emergency event that required the applicant to travel. Applicant is responsible for providing all proper documentation regarding the illness or injury that required travel and the required receipts in order to be eligible for reimbursement.
- 4-7. *Auto Repairs.* Auto repair assistance is allowed when the vehicle is necessary to obtain/maintain ongoing critical medical care when no other resources exist.
- (a) Auto repair assistance is limited to critical medical patients only and will be denied when an alternate vehicle is owned and available for use;
 - (b) Auto repair assistance will only cover repairs that are necessary to keep the vehicle in standard operating condition. No routine maintenance or auto body repairs shall be eligible for assistance. Routine maintenance or repairs shall include, but is not limited to, oil changes, brakes, tires, batteries/fuses, lights, tune-ups, exhaust systems, flushes, and glass replacement;
 - (c) Auto repair assistance is limited to a maximum amount of \$500.00 once every twelve (12) months;
 - (d) Emergency repairs needed to obtain critical medical care which occurs outside of the program's business hours, may be considered on a case by case basis, in consultation with an independent ASE certified auto technician, and for services that occurred within the previous ten (10) days of the application;
 - (e) Towing assistance may be considered on a case by case basis for reimbursement up to a maximum of \$250.00 once every twelve (12) months when the vehicle is inoperable and towed to an ASE certified mechanic.
- 4-8. *Items not Covered.* The Fund Case Manager is not responsible and will not make any reservations for any form of travel. In addition, the following items, which are not all inclusive, are not a benefit of this assistance program:
- (a) Auto insurance and deductibles;
 - (b) Car Rentals;
 - (c) Personal expenses, including, but not limited to, meals or personal care items;
 - (d) Auto loans and vehicle registration.
- 4-9. This program encourages and requests that multiple family members traveling to the same destination carpool and share hotel rooms whenever possible.
- 4-10. CSF reserves the right to discontinue assistance based on funding availability.

V. MEDICAL BILL ASSISTANCE

- 5-1. *Purpose.* The purpose of this program is to assist enrolled members of the Nation with financial support for the cost of unpaid medical bills where no other resources exist.
- 5-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 5-3. *Eligibility Criteria.* In order to be eligible for Medical Bill assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;

- (b) Medical billing statements for the dates of service which are within the last twelve (12) months;
 - (c) Verification that the applicant's health insurance was utilized within his/her health care network;
 - (d) Explanation of Benefit (EOB) statements received from the health insurance provider showing what portion the health insurance covered;
 - (e) Verification that an Indian Health Service Clinic (IHS) was utilized if applicant is in its service area;
 - (f) Verification that the applicant applied for all of the financial care or assistance programs offered at the medical facility;
 - (g) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - (h) Statements of denial of assistance or caseworker verification of denial based on eligibility criteria, from an Indian Health Service (IHS) facility or (EOB) from any third party insurance carrier.
- 5-4. *Receipt of Required Documentation.* Upon receipt of the completed application for medical bill assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for medical bill assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 5-5. Financial assistance will only be available for services already rendered by a Health Care Provider for up to a maximum of \$5,000.00 within a twelve (12) month period. An extension of this twelve (12) month period can be considered only for chronic medical conditions, but may not exceed an additional \$5,000.00.
- 5-6. Medical and/or hospital bills incurred from illegal activity (i.e. operating while intoxicated, injuries due to alcohol or drug use, etc.), or medical conditions that are a direct result from drug use, including the abuse of prescription drugs, are not eligible for assistance, except for Rule 8 which covers Inpatient or Intensive Outpatient treatment.
- 5-7. Insurance denials resulting from an applicant's failure to submit information pertinent to processing an insurance claim are not eligible for assistance.
- 5-8. Medical bills that have aged beyond twelve (12) months, or which have been referred to a collection agency are not eligible for assistance.
- 5-9. Chiropractic care, holistic treatment, pain clinic treatment/injections, methadone clinic, Saboxin injection and/or nursing home and/or any assisted living facility are not eligible for assistance.
- 5-10. CSF reserves the right to discontinue assistance based on funding availability.

VI. DENTAL RELATED EXPENSES

- 6-1. *Purpose.* The purpose of dental related expenses assistance is to assist enrolled members of the Nation with financial support with the cost of dental-related services where no other resources exist.
- 6-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 6-3. Approval from the Community Support Fund case manager is required prior to receiving treatment from a dental health care provider.
- 6-4. *Eligibility Criteria.* In order to be eligible for dental related expenses assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;
 - (b) Verification by a dentist, orthodontist, or oral surgeon of the dental procedures to be completed, and that they are a medical need, not cosmetic, and the cost or estimated cost of the dental services, which shall include the name, address, and Federal tax ID number of the dental health care provider;
 - (c) Verification of dental insurance and that the dental health care provider is an in-network provider;
 - (d) Verification that the applicant is utilizing the Indian Health Service Clinic in his/her service area if available;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 6-5. *Receipt of Required Documentation.* Upon receipt of the completed application for dental related expenses assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for dental related expenses assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 6-6. Upper and lower dentures are limited to a maximum of \$250.00 each per lifetime.
- 6-7. Financial assistance for dental related services other than dentures is limited to a maximum of \$500.00 within a twelve (12) month period.
- 6-8. Dental services requiring surgery or hospital care will be referred to the Medical Bill Assistance Program (Rule 3).
- 6-9. Braces, implants, veneers, teeth whitening, or any other services considered strictly cosmetic are not eligible for assistance.

6-10. CSF reserves the right to discontinue assistance based on funding availability.

VII. OPTICAL RELATED ASSISTANCE

- 7-1. *Purpose.* The purpose of the Optical related assistance program is to provide enrolled members of the Nation with financial support with the costs associated with optical related services where no other resources exist.
- 7-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 7-3. Approval from CSF is required prior to treatment or purchase.
- 7-4. *Eligibility Criteria.* In order to be eligible for Optical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) Cost estimate of optical services this includes the name, address and Federal Tax ID of the provider;
 - (c) Verification of the severe optical illness/injury from an ophthalmologist, optician, or optometrist;
 - (d) Verification of optical insurance and that the ophthalmologist, optician, or optometrist is an in-network provider.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 7-5. Applicant must utilize an Indian Health Service Clinic if available, or provided verification that such a clinic is not available.
- 7-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Optical Related assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Optical Related assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 7-7. Eye glass frames and lenses are limited to a maximum of \$250.00 once per twelve (12) month period, and only the actual frame and lenses are eligible for assistance. Enhancements, including, but not limited to transitional lenses, tinting, or anti-reflective coatings, are not eligible for assistance.
- 7-8. Optical services requiring surgery or hospital care will be referred to the CSF Critical Medical Bill program.

- 7-9. Transportation costs associated with reporting to a treatment/medical facility will be referred to the CSF Critical Medical Travel Assistance program.
- 7-10. The following are not eligible for assistance: contact lenses, routine eye exams, vision correction surgery (eye laser surgery), or any other services that are considered cosmetic. This list is not exhaustive.
- 7-11. CSF reserves the right to discontinue assistance based on funding availability.

VIII. INPATIENT OR INTENSIVE OUTPATIENT TREATMENT ASSISTANCE

- 8-1. *Purpose.* The purpose of the Inpatient or Intensive Outpatient Treatment assistance is to provide enrolled members of the Nation with financial support for inpatient or Intensive Outpatient treatment who have been referred by a licensed or certified counseling agency or program, or who have voluntarily entered into an inpatient or Intensive Outpatient treatment program where no other resources exist.
- 8-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 8-3. Approval from CSF is required prior to the inpatient stay or intensive outpatient treatment in order to receive assistance.
- 8-4. *Eligibility Criteria.* In order to be eligible for Inpatient or Intensive Outpatient Treatment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Cost estimate of the Treatment Center including the name, address and Federal Tax ID number;
 - (c) A referral from a licensed or certified counseling agency or program verifying the catastrophic illness;
 - (d) Verification of health insurance and that the treatment facility is in network. If not in network, verification is to be provided that attempts were made to find a facility in network;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 8-5. *Receipt of Required Documentation.* Upon receipt of the completed application for Inpatient Treatment assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Inpatient Treatment assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

- 8-6. Inpatient or intensive outpatient treatment assistance is available up to a maximum of \$5,000.00 per lifetime.
- 8-7. Inpatient or intensive outpatient treatment assistance will be paid directly to the treatment facility and the treatment facility must be located within the continental United States.
- 8-8. Transportation costs associated with reporting to a treatment facility will be referred to the CSF Emergency/Non-emergency Medical Travel program (Rule 2).
- 8-9. Inpatient or intensive outpatient treatment stay requests that are court ordered due to a criminal conviction, or as an alternative to a criminal conviction, are not a benefit of this program.
- 8-10. Follow up care expenses in a residential facility, half-way house, or transitional shelter shall be limited to one (1) month, and shall not exceed \$500.00. Follow up care expenses do not apply to intensive outpatient treatment stays.
- 8-11. Shelter Assistance may be considered for intensive outpatient treatment when immediate prior working hours are during the hours of treatment. These hours must be verified through the employer and treatment facility, and shall not exceed \$500.00.
- 8-12. Costs for incidentals such as food, personal care items, clothing, etc. are not eligible for assistance.
- 8-13. CSF reserves the right to discontinue assistance based on funding availability.

IX. MEDICAL RELATED EQUIPMENT, SUPPLIES, OR FURNITURE

- 9-1. *Purpose.* The purpose of the Medical Related Equipment, Supplies, or Furniture assistance program is to provide enrolled members of the Nation with financial assistance with furniture, equipment, or supplies verified by a licensed doctor as being necessary to improve or maintain the quality of life for those applicants who are diagnosed with a life-threatening or chronic medical condition where no other resources exist.
- 9-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 9-3. Prior approval must be received from the CSF before any purchases are made in order to be eligible for assistance.
- 9-4. Medically related equipment, supplies, or furniture must be rented whenever available.
- 9-5. *Eligibility Criteria.* In order to be eligible for Medical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) The cost estimate of supplies or equipment prior to purchasing, which shall include the vendor name, address, and Federal Tax ID number;
 - (c) The prescription from a licensed medical physician which must specify the following:
 - (1) If the need is on a short-term basis (less than six (6) months);
 - (2) The specific life-threatening or chronic medical condition; and
 - (3) That the equipment, supplies or furniture are need to improve or maintain the applicant's quality of life;
 - (d) Statement of denial of assistance from an Indian Health Service (HIS) facility or EOB from any third party insurance carrier;
 - (e) Proof of home ownership or rental lease agreement; and

- (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 9-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Medical Related Equipment, Supplies, or Furniture assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Medical Related Equipment, Supplies, or Furniture assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 9-7. Financial assistance for this program is limited to a maximum of \$1,000.00 within a twelve (12) month period.
- 9-8. An additional \$500.00 may be considered based on medical documentation.
- 9-9. Permanent ramps require the applicant to be the homeowner. Temporary ramps must have the written consent of the property owner.
- 9-10. Home renovations necessary for handicap accessibility are limited to a maximum of \$1,000 once per twelve (12) month period.
- (a) Renters are not eligible for home renovations.
 - (b) Home renovations may include, but is not limited to, accommodations to bathrooms, doorways, hallways for wheelchairs, or a walk-in or roll in shower.
- 9-11. The types of equipment, furniture or supplies to be considered for assistance may include, but is not limited to the following: hospital bed, lift chair, wheelchair, scooter, portable or permanent ramps, air conditioners, room air purification systems, hearing aids, artificial limbs, vision aids, wigs, and specialty made undergarments.
- 9-12. CSF reserves the right to discontinue assistance based on funding availability.

X. PRESCRIPTION REIMBURSEMENT ASSISTANCE.

- 10-1. *Purpose.* The purpose of Prescription Reimbursement assistance is to assist enrolled members of the Nation with reimbursement of emergency prescribed medications that are needed after regular business hours or not available at Indian Health Service Clinic.
- 10-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 10-3. *Eligibility Criteria.* In order to be eligible for Prescription Reimbursement assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification of current group health insurance policy that covers prescriptions;
 - (c) Verification of coverage under a spouse/parent if available;
 - (d) Original receipts of prescription medication;

- (e) Verification that the emergency medical prescription was needed after hours, which shall include the emergency room report or discharge summary;
 - (f) Verification that there is no Indian Health Service Clinic within ninety (90) miles of the applicant;
 - (g) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 10-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Prescription Reimbursement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Prescription Reimbursement assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 10-5. Reimbursement for emergency prescriptions is limited to \$300.00 within a twelve (12) month period.
- 10-6. Prescription reimbursement must be submitted within thirty (30) days of the original receipt date.
- 10-7. Prescribed medications for chemical dependency (i.e. methadone, soapboxing, etc.) are not a covered benefit.
- 10-8. Denials from the IHS clinic resulting from not following preferred purchasing/care team (contract health) will not be covered (i.e. proof of residency not provided, application not updated, no 72 hours notice, etc.)
- 10-9. CSF reserves the right to discontinue assistance based on funding availability.

XI. COBRA INSURANCE PAYMENTS

- 11-1. *Purpose.* The purpose of COBRA insurance payments assistance is to assist enrolled members of the Nation with payment of COBRA insurance premiums when they experience an interruption of employment.
- 11-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 11-3. *Eligibility Criteria.* In order to be eligible for COBRA insurance assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification of current group health insurance policy;
 - (c) Verification of coverage under a spouse/parent if available;
 - (d) Verification of all state and public benefits applied for if eligible;
 - (e) Written estimate of employer's group health care coverage plan premium for COBRA coverage;

- (f) Verification of medical diagnosis, prognosis, and approximate length of employment interruption;
 - (g) Verification of the approved medical leave from employer;
 - (h) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 11-4. *Receipt of Required Documentation.* Upon receipt of the completed application for COBRA insurance payments, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for COBRA insurance payments shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 11-5. COBRA insurance premium payments are limited to a maximum of \$500.00 per month for a total period of three (3) months. An additional three months of COBRA Insurance premiums may be requested with additional supporting documentation from a medical professional which indicates the applicant's return to employment is established and with documentation from the employer approving the extended leave time.
- 11-6. Upon notification of employment termination, a referral to state or public assistance will be made.
- 11-7. CSF reserves the right to discontinue assistance based on funding availability.

XII. FAMILY MEDICAL LEAVE ACT WAGE REPLACEMENT

- 12-1. *Purpose.* The purpose of the Family Medical Leave Act (FMLA) Wage Replacement assistance program is to assist enrolled members of the Nation with wage replacement when wages are interrupted due to the need to care for an immediate family member as approved under the Family Medical Leave Act.
- 12-2. FMLA wage replacement assistance is available only to employed immediate family members utilizing the FMLA or approved medical leave by the caregiver's employer.
- 12-3. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 12-4. *Eligibility Criteria.* In order to be eligible for FMLA Wage Replacement assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification that the caregiver has been employed with their company for at least twelve (12) months, and must have worked for at least 1250 hours in the last twelve (12) months;
 - (c) Verification of approved FMLA or equivalent leave from the caregiver's employer;

- (d) Verification of the medical need requiring full-time care of the immediate family member, which indicates that continuous care is needed twenty four (24) hours per day, for seven (7) days a week. Said verification must also specify the approximate length of time this direct care is needed.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 12-5. *Receipt of Required Documentation.* Upon receipt of the completed application for FMLA Wage Replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for FMLA Wage Replacement assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 12-6. FMLA wage replacement shall be for a maximum of \$350.00 per week for up to twelve (12) weeks. However, wages that are less than \$350 per week will be paid at the actual wage rate appearing on the caregiver's pay stubs.
- 12-7. An extension of an additional twelve (12) weeks of wage replacement may be considered on a case by case basis, and updated verification must be provided showing additional approved FMLA leave from the caregiver's employer.
- 12-8. FMLA wage replacement will not be available to caregivers who are unemployed, receiving social security benefits, retirement benefits, or any other source of income.
- 12-9. A W-2 tax statement will be issued to the caregiver from the Oneida Nation Central Accounting Department. This will be a separate W-2 tax statement from regular earnings if the caregiver is an employee of the Oneida Nation.
- 12-10. The applicant must notify the case manager ten (10) business days prior to the end of the approved FMLA.
- 12-11. The wage replacement will end seven (7) days after the immediate family member being cared for is institutionalized or passes away.
- 12-12. Failure of the applicant to report changes in the household will result in the termination of benefits.
- 12-13. Applicants are not eligible for shelter, utilities, or any other supportive service during the time of receiving wage replacement.
- 12-14. The applicant must be directly caring for an immediate family member, and not oneself.
- 12-15. CSF reserves the right to discontinue assistance based on funding availability.

XIII. FIRE/NATURAL DISASTER ASSISTANCE

- 13-1. *Purpose.* The purpose of the Fire/Natural Disaster Assistance program is to assist enrolled members of the Nation with financial support for fire or natural disaster shelter expenses where no other resources exist.
- 13-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 13-3. *Eligibility Criteria.* In order to be eligible for Fire/Natural Disaster assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) A police and/or fire department report specifying the fire/natural disaster and confirming that the home is uninhabitable;
 - (c) Verification of claim submitted to homeowner's or renter's insurance;
 - (d) Verification of assistance provided or applied for from disaster relief organizations such as Red Cross, FEMA, etc.;
 - (e) Verification of all household members at the time of the fire/natural disaster;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 13-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Fire/Natural Disaster assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Fire/Natural Disaster assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 13-5. Temporary shelter assistance will be given for up to a maximum of fifteen (15) days with the limit of \$60.00 per day for a grand total of \$900.00.
- 13-6. Temporary shelter may be extended for up to an additional five (5) days upon verification from a licensed contractor that repairs are not able to be completed within the original fifteen (15) day time period, and alternate shelter is verified as not being available.
- 13-7. Immediate shelter arrangements may be made by the case manager for a hotel/motel, making an effort to obtain a room with appliances for storing and preparing meals.
- 13-8. Security deposit and first month's rent shall not exceed \$1,000.00 if the current home is uninhabitable and is in need of major repair beyond thirty (30) days. The following additional information must be provided:
- (a) Landlord verification form which shall include the amount of security deposit and monthly rent;
 - (b) Copy of the rental lease agreement;
 - (c) Verification that the household income can support the monthly rent expense.

- 13-9. The security deposit paid pursuant to 9.8 above, shall be repaid at 100% of the funds paid to the Landlord and returned to the Oneida Nation Economic Support Department and shall be in the form of a cashier's check or money order upon vacating the premises and/or eviction from the premises.
- 13-10. Applicant is responsible to report to the Case Manager any changes in the current catastrophic situation, such as assistance from other agencies, or long-term housing arrangements.
- 13-11. Retail gift cards may be given up to \$100.00 per family member for clothing and basic household item needs.
- 13-12. Any claim of items stored in a household by persons other than residents of the household will not be considered for assistance (i.e. stored items in basement, garage, etc.)
- 13-13. Some services are not eligible for assistance, including, but not limited to auto replacement, transportation, food, storage fees, furnishings, smoke or water damage cleaning fees, and rebuilding costs.
- 13-14. The CSF will not pay family members or caregivers, rather payment will be made to a valid landlord or mortgage holder.
- 13-15. The CSF reserves the right to discontinue assistance in cases where fraud or illegal activity has been determined to have caused the catastrophic event, illness, injury or emergency event resulting in the need for shelter.
- 13-16. The CSF reserves the right to discontinue assistance based on funding availability.

XIV. FUNERAL TRAVEL REIMBURSEMENT (OUTSIDE OF STATE ONLY)

- 14-1. *Purpose.* The purpose of the Funeral travel reimbursement program is to provide a consistent process of reimbursing enrolled members of the Nation with expenses associated with funeral travel outside of the state where the applicant resides and when there are no other resources that exist.
- 14-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 14-3. *Eligibility Criteria.* In order to be eligible for Funeral travel reimbursement, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) A copy of the obituary that lists and immediate family member;
 - (c) A copy of the applicant's valid driver's license if requesting fuel reimbursement;
 - (d) Original receipts that show payment for hotel, gas, and/or airfare turned in for reimbursement within thirty (30) days of the date of the funeral;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 14-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Funeral Travel Reimbursement assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.

- (d) An application for Funeral Travel Reimbursement assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 14-5. Airfare, train, bus, lodging and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.
- (a) Multiple immediate family members are limited to reimbursement of \$500.00 each.
- (b) Hotel lodging is limited to a maximum of \$75.00 per night and up to two (2) nights of stay and is only for those who reside in excess of sixty (60) miles one-way from the location of the funeral.
- (c) All receipts must coincide with the initial funeral date.
- 14-6. Purchases not eligible for reimbursement include, but are not limited to, rental car, car repair, food, clothing, flowers, and actual funeral costs.
- 14-7. Vehicle fuel reimbursement is limited to those persons who must travel sixty (60) or more miles one-way to attend a funeral service.
- 14-8. Reimbursement of travel expenses will not be considered when travel was completed more than thirty (30) days after the verified date of the funeral.
- 14-9. CSF will not make any reservations for any form of travel. This assistance is by reimbursement only.
- 14-10. This program encourages multiple family members traveling to the same destination to carpool, and/or share hotel rooms whenever possible.
- 14-11. CSF reserves the right to discontinue assistance based on funding availability.

XV. APPLIANCE REPAIR AND REPLACEMENT: FURNACE AND WATER HEATER

- 15-1. *Purpose.* The purpose of Appliance Repair and Replacement assistance is to assist enrolled members of the Nation with an emergency repair or replacement of a furnace or water heater where no other resources exist.
- 15-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 15-3. This assistance is limited to furnaces and water heaters, and shall not include any other kind of appliances.
- 15-4. *Eligibility Criteria.* In order to be eligible for Appliance Repair and Replacement assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
- (b) Two (2) cost estimates for repair of a water heater or furnace from a licensed/certified repair professional, to include the name, address, phone number, and Federal Tax Identification number of the professional;
- (c) Verification that the applicant applied for Energy Assistance with the county agency in which the applicant resides, along with proof assistance was denied;
- (d) Verification that the applicant is the owner of the home;
- (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

- 15-5. *Receipt of Required Documentation.* Upon receipt of the completed application for appliance repair and/or replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for appliance repair and/or replacement assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 15-6. When a cost estimate indicates that the repair costs will exceed the value of the appliance, replacement will be considered and approved on a case by case basis.
- 15-7. The repair and/or replacement of a water heater shall not exceed \$350.00 once every ten (10) years.
- 15-8. The repair and/or replacement of a furnace shall not exceed \$2,500.00 once per lifetime.
- 15-9. The CSF reserves the right to discontinue assistance based on funding availability.

XVI. SECURITY DEPOSIT ASSISTANCE

- 16-1. *Purpose.* The purpose of the Security Deposit assistance program is to provide enrolled members of the Nation residing in the State of Wisconsin with financial support to ensure quality of life when shelter expenses are threatened with eviction.
- 16-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 16-3. *Eligibility Criteria.* In order to be eligible for Security Deposit assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Proof of residency in the State of Wisconsin, which shall include a landlord verification form completed by the potential landlord or a current rental/lease agreement showing the amount of the security deposit;
 - (c) Verification of a current emergency situation, which shall include, but is not limited to, a pending eviction;
 - (d) Must have repaid any prior security deposit assistance received to the CSF;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - (f) Household members must demonstrate the ability to fulfill the terms of the rental agreement.
- 16-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Security Deposit assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.

(b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.

(c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.

(d) An application for Security Deposit assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

16-5. Security Deposit assistance shall not exceed the amount of \$500.00

16-6. Applicants who receive assistance in paying their security deposit shall repay those funds at 100 percent (100%) of the funds received.

(a) All repayments must be made payable to the Oneida Nation in the form of a cashier's check, or money order.

(b) Payments must be brought to the Economic Support Department.

(c) Requests for security deposit assistance with no repayment of funds for prior assistance received will result in the application being denied.

16-7. Security Deposit assistance is limited to one (1) person per household.

16-8. CSF will not pay family members or caregivers a security deposit; it must be a valid landlord.

16-9. CSF reserves the right to discontinue assistance based on funding availability.

XVII. SOCIAL SECURITY DISABILITY DETERMINATION SHELTER ASSISTANCE

17-1. *Purpose.* The purpose of the Social Security Disability Determination Shelter assistance program is to assist enrolled members of the Nation with financial support for shelter expenses for those waiting an eligibility determination for the Social Security Administration for a disability finding.

17-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.

17-3. *Eligibility Criteria.* In order to be eligible for Social Security Disability Determination Shelter assistance, a person must provide a completed Community Support Fund application and the following:

(a) Proof of enrollment in the Nation;

(b) Verification of a pending Social Security Disability Application;

(c) A Landlord verification form completed by a landlord or other statement from the mortgage holder that show the monthly rent and the applicant's current status;

(d) Verification of the applicant's current utility bills for water, heat, and electricity, however energy assistance must be applied for before any utility bills will be considered for payment;

(e) Verification of mortgage disability insurance, if applicable;

(f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

- 17-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Social Security Disability Determination Shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Social Security Disability Determination Shelter assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 17-5. Rent/mortgage assistance shall not exceed the amount of \$500.00 per month, not to exceed twenty-four (24) months.
- (a) Only the applicant's portion will be considered when the household consists of other adults.
 - (b) Rent/mortgage assistance will be terminated if the household fails to meet their timely portion of the scheduled payments.
 - (c) Retro-payment for back rent/mortgage assistance is not eligible for assistance.
- 17-6. Upon receipt of the verification that all other resources have been applied for, utility assistance will be considered for water, heat, and electricity.
- (a) Only the applicant's portion of the utility bill will be considered when the household consists of other adults.
 - (b) The utility bill must be in the applicant or current household member's name.
 - (c) Payment for past due amounts owed for utilities are not eligible for assistance.
- 17-7. The applicant is responsible to report to the Case Manager any change(s) in the household within ten (10) business day from the change occurring.
- (a) Examples of household change shall include, but is not limited to the following: relocation, household members, income, medical changes, submitted social security disability application, or application for or receipt of other agency assistance such as housing allowance, etc.
 - (b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the Case Manager, but shall not exceed thirty (30) days.
- 17-8. CSF will not pay family members or caregivers; the assistance is paid only to a valid landlord or mortgage holder.
- 17-9. CSF reserves the right to discontinue this assistance based on funding availability.
- 17-10. CSF reserves the right to discontinue this assistance in cases where fraud or illegal activity has been determined to have caused the eviction.
- 17-11. The Case Manager will provide ten (10) day written notification to an applicant whose assistance under this program is being discontinued.

XVIII. UTILITY DISCONNECTION ASSISTANCE

- 18-1. *Purpose.* The purpose of the Utility Disconnection assistance program is to assist enrolled members of the Nation with emergency financial support to ensure quality of life when home heating and electric services are threatened with disconnection.
- 18-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 18-3. *Eligibility Criteria.* In order to be eligible for Utility Disconnection assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) A copy of the current disconnection notice received from the utility company for the household in which the applicant is residing;
 - (c) Verification of address;
 - (d) Verification of application for Energy Assistance and crisis assistance with the county agency in which the applicant resides;
 - (e) Verification of payments made in each of the three (3) previous months of at least \$25.00 per month;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 18-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Utility Disconnection assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Utility Disconnection assistance shall be valid for thirty (30) days. If the applicant has a determination of award and/or coverage pending with another support or assistance resource, the application will be valid for an additional fifteen (15) days upon proof of that such determination is pending. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 18-5. Requests for assistance for the payment of utilities shall only be allowed once every two (2) years by the responsible payee. Assistance requested under this Rule and under Rule 3 shall be counted towards the total number of requests for the two (2) year period limit.
- 18-6. Utility assistance shall not exceed the amount of \$300.00.
- 18-7. CSF reserves the right to discontinue assistance based on funding availability.

End.

Adopted in whole [Insert Date of Adoption] – Effective [Insert Effective Date] – LOC Certified [Insert Date of LOC Certification]

Governmental Services Division
(GSD)



Memo

To: Oneida Nation Legislative Operating Committee
From: George Skenandore, Oneida Nation Governmental Services Division
Date: January 12, 2018
Re: Proposed Community Support Fund Rules

Please accept this memo as my support of the Proposed Community Support Fund Rules.

I want to express my appreciation to all those who have contributed to their development.

Thank you.

Summary Report for Community Support Rule

Original effective date: 10/26/2017

Amendment effective date: 1/25/2018

Name of Rule: Community Support Fund

Name of law being interpreted:

Rule Number: Rules 1-16

Other Laws or Rules that may be affected: None

Brief Summary of the proposed rule: The Community Support Rule will be administered through the Oneida Nation Economic Support Office. The Community Support Rule outlines the services, requirements, timelines and limitations to each of the 16 assistance programs. The program is available to members of the Oneida Nation that meet the specific requirements as explained in each separate category of services. The rule also addresses the appeal process for program denials.

Statement of Effect: Obtained after requesting from the Legislative Reference Office.

Financial Analysis: See Attached.

Note: *In addition- the agency must send a written request to each entity which may be affected by the rule- asking that they provide information about how the rule would financially affect them. The agency must include each entity's response in the financial analysis. If the agency does not receive a response within 10 business days after the request is made, the financial analysis can note which entities did not provide a response.*

Financial Analysis for Community Support Fund

Type of Cost	Description/Comment	Dollar Amount
Start Up Costs	There were no startup costs as the program was already established.	\$0
Personnel	No additional time or staff needed for the project. Created Rule from current program SOP's.	\$0
Office	No additional costs or office changes.	\$0
Documentation Costs	Costs were absorbed within the current budget.	\$0
Estimate of time necessary for an individual or agency to comply with the rule after implementation	The agency can effectively comply with the rule changes immediately	\$0
Other, please explain	N/A	\$0
Total	Annual Net Revenue	\$0

The agency does not foresee that any other entities would be financially directly affected by the Community Support Fund Rule.



Statement of Effect

Community Support Fund Rule Handbook

Summary

The Community Support Fund Rule Handbook provides guidance on how the Community Support Fund is utilized so that the Nation can assist the greatest number of members of the Nation who apply for assistance to the Fund in times of a catastrophic event, illness, injury, or emergency event when no other resources for assistance exist.

Submitted by: Clorissa N. Santiago, Staff Attorney, Legislative Reference Office

Date: December 6, 2017

Analysis by the Legislative Reference Office

The Community Support Fund law (“the Law”) delegates rulemaking authority to the operators of the Community Support Fund (“the Fund”) pursuant to the Administrative Rulemaking law. [see *Community Support law section 125.4-1(a)*]. The Law states that the Social Services Area of the Governmental Services Division shall be responsible for operation of the Fund, but can designate the operation of the Fund to a department within its control. [see *Community Support law section 125.4-1(a)*]. The Fund is currently operated under the control of Community Economic Support.

The Law requires the Fund operator to create rules based on the identified list of categories covered by the Fund, as well as specify the cap that sets the amount of assistance per event/per household, except for funeral expenses which shall be set per event/per person. [see *Community Support law section 125.4-1(a)(1) and 125.6*]. The Law also allows the Fund operator to create rules regarding other matters not specifically included in the list of categories in the Law as long as those rules do not conflict with the Law. [see *Community Support law section 125.4-1(a)(2)*].

The Community Support Fund Rule Handbook (“the Rule Handbook”) contains various rules for the Law. The Rule Handbook further supports the Community Support Fund law, and addresses information related to:

- Shelter Assistance;
- Emergency/Non-Emergency Medical Travel;
- Medical Bill Assistance;
- Dental Related Expenses;
- Optical Related Assistance;
- Inpatient T or Intensive Outpatient Treatment Assistance;
- Medical Related Equipment, Supplies, or Furniture;
- Prescription Reimbursement Assistance
- Cobra Insurance Payments;
- Family Medical Leave Act Wage Replacement;

- Fire/Natural Disaster Assistance;
- Funeral Travel Reimbursement;
- Appliance Repair and Replacement: Furnace and Water Heater;
- Security Deposit Assistance;
- Social Security Disability Determination Shelter Assistance; and
- Utility Disconnection Assistance.

The Law also directs that the rules include timeline for when an initial decision is required following the submission of a complete application, and that such timeline shall include available extensions for circumstances wherein the applicant has a determination of award and/or coverage pending with another support or assistance resource. [*see Community Support law section 125.9-1*].

Although the Rule Handbook provides a timeline for an initial decision for each individual rule, it lacks any reference to available extensions for circumstances wherein the applicant has a determination of award and/or coverage pending with another support or assistance, which is required by the Law. Because the Rule Handbook does not include language which may extend the timeline, the Rule Handbook conflicts with the Law. The Administrative Rulemaking law does not allow a rule which conflicts with a current law of the Nation to be certified by the Legislative Operating Committee or adopted by the Oneida Business Committee. [*see Administrative Rulemaking law section 106.4-1(a) and 106.7-2(c)*].

Conclusion

A conflict exists between the Community Support Fund Law Rule Handbook and the Community Support Fund law through the exclusion of required available extensions for circumstances wherein the applicant has a determination of award and/or coverage pending with another support or assistance resource.

NOTICE OF

PUBLIC MEETING

TO BE HELD

THURSDAY, DECEMBER 21 at 12:15 p.m.

IN THE

OBC CONFERENCE ROOM**(2nd FLOOR—NORBERT HILL CENTER)**

In accordance with the Administrative Rulemaking Law, the Economic Support Department is hosting this Public Meeting to gather feedback from the community regarding a rules handbook proposal.

TOPIC: COMMUNITY SUPPORT FUND RULES

This is a proposal (for a new Rules Handbook) which would:

- ◆ Provide guidance to the community on how the Community Support Fund is utilized
- ◆ Set the requirements for each funded program available through the Community Support Fund..
- ◆ Clarify what assistance is available through the Community Support Fund.

To obtain copies of the Public Meeting documents for this proposal, or to learn about the public meeting process, please visit www.oneida-nsn.gov/Register/PublicMeetings or contact the Legislative Reference Office.

PUBLIC COMMENT PERIOD OPEN UNTIL January 2, 2018

During the Public Comment Period, all interested persons may submit written comments and/or a transcript of any testimony/spoken comments made during the Public Meeting. These may be submitted to the Director of Economic Support, Delia Smith or Attorney Michelle L. Gordon, in person at the Social Services Building or by U.S. mail, interoffice mail, e-mail or fax.

Delia Smith or Attorney Michelle L. Gordon
PO Box 365 Oneida, WI 54155
dsmith1@oneidanation.org
mgordon@oneidanation.org
Phone: (920) 490-3700
Fax: (920) 490-3979

December 21, 2017
Public Meeting Draft



Title 1. Government and Finances – Chapter 125
Community Support Fund
Rule Nos. 1 through 18

I. Purpose, Delegation, Adoption, Amendment and Repeal

1-1. *Purpose.* The purpose of the Community Support Fund rules is to provide guidance on how the Community Support Fund is utilized so that the Nation can assist the greatest number of members of the Nation who apply for assistance to the Fund in times of a catastrophic event, illness, injury or emergency event when no other resources for assistance exist.

1-2. *Authority.* The Community Support Fund Law, Chapter 125, delegates rulemaking authority to the Social Services Area of the Government Services Division pursuant to the Administrative Rulemaking law (Chapter 17 Oneida Code of Laws).

1-3. These rules were adopted by the Economic Support Department of the Social Services Area of the Government Services Division in accordance with the procedures of the Administrative Rulemaking law.

1-4. These rules may be amended or repealed by the Economic Support Department and/or the Oneida Business Committee pursuant to the procedures set out in the Administrative Rulemaking Law. For the purpose of future amendments to these rules, each article is a separate rule and may be amended as such.

1-5. Should a provision of these rules or the application thereof to any person or circumstances be held as invalid, such invalidity shall not affect other provisions of these rules which are considered to have legal force without the invalid portions.

1-6. In the event of a conflict between a provision of these rules and a provision of another rule, internal policy, procedure, or other regulation; the provisions of these rules shall control.

1-7. These rules supersede all prior rules, regulations, internal policies or other requirements relating to the Community Support Fund.

1-8. This Article applies to each subsequent rule listed herein.

II. Definitions

2-1. This section shall govern the definitions of words and phrases used within this rule. All words not defined herein shall be used in their ordinary and everyday sense.

(a) “Applicant” means the subject of the application for assistance.

(b) “Business day” means Monday through Friday 8:00 a.m. to 4:30 p.m., excluding holidays of the Nation.

(c) “Caregiver” means the person who assists an ill or incapacitated immediate family member that is in need of twenty-four (24) hour per day, seven (7) days a week care.

(d) “Case manager” means an employee responsible for administering Community Support Fund benefits.

- (e) “Catastrophic event” means a natural or man-made incident, which results in a substantial damage or loss requiring major financial resources to repair or recover. This includes, but is not limited to, a house fire, tornado, flood, or other disaster.
- (f) “Catastrophic illness/injury” means a serious debilitating illness, injury, impairment, or mental or physical condition that involves:
- (1) In-patient care;
 - (2) A period of continuing treatment due to a chronic serious health condition, including, but not limited to, chemotherapy, radiation, dialysis, and daily/weekly therapy resulting from trauma;
 - (3) A period of illness or injury that is long-term due to a condition for which treatment may be ineffective including, but not limited to, stroke or terminal disease;
 - (4) Multiple treatments either for restorative surgery after an accident or other injury, or for a chronic condition, including, but not limited to, cancer or kidney disease.
- (g) “COBRA” means the Consolidated Omnibus Budget Reconciliation Act of 1985 also known as continued group health care coverage costs under an employer’s plan.
- (h) “Cosmetic” means any medical service provided with the intent to enhance a person’s appearance, including, but not limited to, braces, veneers, teeth whitening, implants, or other plastic surgery.
- (i) “Critical Medical” means professionally delivered care or treating a life threatening illness which requires immediate or regularly scheduled monitored medical care, which includes, but is not limited to dialysis, chemotherapy, radiation, daily/weekly therapy resulting from trauma. This does not include routine annual or semi-annual appointments.
- (j) “Emergency event” means a situation that poses an immediate risk to health, life, safety, property or environment. Emergencies require urgent intervention to prevent further illness, injury, death, or other worsening of the situation.
- (k) “Emergency medical travel” means an unexpected serious health situation or occurrence requiring the immediate presence of immediate family. This includes, but is not limited to, end of life situations, and situations in which an immediate family member is placed on life support.
- (l) “Eviction” means the legal notice received from a landlord or mortgage holder that orders the tenant(s) to vacate the property.
- (m) “FMLA” means the Family Medical Leave Act, a Federal law authorizing temporary time off from an employment position to provide direct care to a family member, without losing their employment status.
- (n) “Fund” means the Community Support Fund.
- (o) “Garnishment” means a legal action that directs that money owed be seized to satisfy a debt.
- (p) “Household” means all persons who reside together at the same residence.
- (q) “Immediate family” means an individual’s husband, wife, mother, father, step mother, step father, son, daughter, step son, step daughter, brother, sister, step brother, step sister, grandparent, grandchild, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law or sister-in-law and any of the these relations attained through

legal adoption, and/or a person who is legally responsible or otherwise named the legal guardian for the applicant.

(r) "Incapacitation" means a state in which a person is temporarily or permanently impaired by mental and/or physical deficiency, disability, illness or injury.

(s) "Income" means a measurement including, but not limited to, a combination of salaries, wages, retirement pension, disability income, government benefits, and unemployment of all people sharing a particular household/residence.

(t) "Legal guardian" means a person who has the legal authority to care for the personal and property interests of another person granted through a Court order.

(u) "Legal responsibility" means specific duties imposed upon a person to care or provide for another including liability for personal obligations as granted through a Power of Attorney or Court order.

(v) "Major medical surgery" means a surgical procedure that carries a degree of risk to the patient's life, or the potential for severe disability if something goes wrong during surgery. It is a surgical procedure that usually requires a patient to be put under general anesthesia and given respiratory assistance because he or she cannot breathe independently.

(w) "Nation" means the Oneida Nation.

(x) "Non-medical" means necessary intervention to support a patient with an on-going medical illness, injury or potential life threatening illness, and requires further testing or consultation with a specialist.

(y) "Reimbursement" means to make repayment for expense(s) or a loss that incurred.

(z) "Routine Exam" means an annual or semi-annual health exam provided by a physician, dentist, orthodontist, oral surgeon, or other similar health care specialist.

(aa) "Security Deposit" means the payment of money held by a landlord in trust to protect him/herself from unpaid rent or damage to the living space.

(bb) "Wages" means taxable income reported to the Internal Revenue Service for performing work.

III. SHELTER ASSISTANCE

3-1. *Purpose.* The purpose of shelter assistance is to assist enrolled members of the Nation with financial support for shelter expenses due to experiencing a catastrophic event, illness, or injury where no other resources exist.

3-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.

3-3. *Eligibility Criteria.* In order to be eligible for shelter assistance a person must provide a completed Community Support Fund application and the following:

(a) Proof of enrollment in the Nation;

(b) Documentation verifying catastrophic event, illness, injury or other emergency event within the last thirty (30) days, including but not limited to:

(1) Medical verification specifying dates effected by illness or injury;

(2) Verification of short and/or long term disability specifying the dates received and the amount of the benefit;

(3) Other documentation listing damage or loss.

- (c) Landlord Verification Form completed by the landlord of the applicant or a statement from the applicant's mortgage holder stating the applicant's monthly mortgage payment and current status;
 - (d) A current utility bill, such as a water, heat, or electricity bill;
 - (e) Verification of all household income for the last thirty (30) days;
 - (f) Verification of any mortgage disability insurance;
 - (g) Verification of an applicant's personal and/or vacation time from employment; and
 - (h) Any other documentation requested by the Community Support Fund case manager.
- 3-4. *Receipt of Required Documentation.* Upon receipt of the completed application for shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant within 5 business days in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for shelter assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 3-5. *Rent or Mortgage Assistance.* An applicant may request assistance for rent or mortgage payments.
- (a) The amount provided for rent or mortgage assistance shall not exceed \$500.00 per month. The amount of rent or mortgage assistance shall not exceed a total of twenty-four (24) months per life-time of the applicant.
 - (b) Only the applicant's portion of the rent or mortgage owed shall be considered when determining the amount of rent or mortgage assistance if the applicant's household consists of other adults.
 - (c) Shelter assistance shall not be used to pay family members or caregivers of the applicant. Only a valid landlord or mortgage holder shall be paid.
- 3-6. *Utility Assistance.* An applicant may request assistance for utilities, such as heat, water, and electricity.
- (a) The utility bill shall be in the applicant's or current household's member's name.
 - (b) Applicants shall provide verification of application to all other available resources and programs for utility assistance.
 - (1) The Wisconsin Home Energy Assistance Program (WHEAP) serves as an example of an alternate program the applicant should apply for before applying for shelter assistance.
 - (c) Only the applicant's portion of the utility bill shall be considered when determining the amount of utility assistance if the applicant's household consists of other adults.
 - (d) The amount provided for utility assistance shall not exceed \$300.00 and shall only be allowed once every two (2) years. Assistance requested under this Rule and under Rule 18 shall be counted towards the total number of requests for the two (2) year period limit.
- 3-7. *Reporting Changes in the Household.* The applicant shall report any changes in the household to the case manager within ten (10) business days from the change occurring.

- (a) Changes in the household that shall be reported include, but are not limited to, the following: relocation, addition or subtraction of a household member, income changes, medical changes, submission of a social security disability application, submission of application or receipt of assistance from other agency or program.
 - (b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the case manager, not to exceed thirty (30) days.
- 3-8. *Discontinuation of Assistance.* The Community Support Fund Manager reserves the right to discontinue shelter assistance based on the following:
- (a) A lack of funding availability
 - (b) A discovery that fraud or illegal activity has been determined to have caused homelessness.
 - (c) The case manager shall provide ten (10) day notification to an applicant whose shelter assistance will be discontinued.
- 3-9. *Changes in Household Information.* An applicant shall be responsible to report to the Fund Case Manager any change(s) in the household within ten (10) business days from the change. Changes shall include, but are not limited to the following:
- (a) Relocation;
 - (b) Household member changes;
 - (c) Income;
 - (d) Medical changes;
 - (e) Submission of Social Security Disability application; and
 - (f) Receipt of other agency assistance
- (1) Failure of an applicant to report changes in the household may result in suspension of assistance until verification of the change(s) is provided to the Fund Case Manager.
 - (2) An applicant shall have thirty (30) days to provide the verification once notification is received from the Fund Case Manager that verification is required.
- 3-10. *Hotel Assistance.* Hotel Assistance may be provided in the event of extreme situations as determined by the Fund Case Manager and the Director of Economic Support.

IV. EMERGENCY/NON-EMERGENCY MEDICAL TRAVEL

- 4-1. *Purpose.* The purpose is to assist enrolled members of the Nation with emergency and non-emergency medical travel expenses. This assistance is limited to immediate family members to assist with travel expenses.
- 4-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 4-3. *Eligibility Criteria.* In order to be eligible for emergency/non-emergency medical travel assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verifications of medical appointments which include the medical condition, date, time and location of the appointment;
 - (b) Verification of the applicants relationship to the patient;
 - (c) Verification of a valid driver's license for reimbursement of fuel purchases

(d) Original receipts for hotel, gas, and/or airfare which shall be dated within thirty (30) days of travel and show total cost paid; and

(e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

4-4. *Receipt of Required Documentation.* Upon receipt of the completed application for emergency/non-emergency medical travel assistance, the case manager shall determine if all required documentation was received from the applicant.

(a) The applicant shall provide all documentation requested by the case manager.

(b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.

(c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.

(d) An application for emergency/non-emergency medical travel assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

4-5. *Non-Emergency Travel.* Non-emergency travel is allowed when an immediate family member has scheduled medical appointments as shown through medical documentation.

(a) Documentation of scheduled appointments must be submitted and have prior approval.

(b) The medical appointment must be more than sixty (60) miles one way from the residence of the applicant.

(c) Gas cards will be disbursed the day prior to the appointment and original receipts are due within seven (7) business days. If receipts are not turned in, future requests for assistance will be denied for six (6) consecutive months starting when the first new request is made.

(1) Those who travel from sixty (60) miles up to one hundred fifty (150) miles one-way shall receive a \$30.00 gas card. Travel may also be eligible for reimbursement for up to \$30.00 with original receipts that coincide with an appointment.

(2) Those who travel over one hundred fifty (150) miles one-way shall receive a \$40.00 gas card. Travel may also be eligible for reimbursement for up to \$40.00 with original receipts that coincide with an appointment.

(d) Hotel reimbursement shall be a maximum of \$75.00 per night for up to a maximum of three (3) nights, and shall only be considered for approval by the Fund Case Manager where the appointment is more than one hundred (100) miles one-way from the residence of the applicant.

4-6. *Emergency Travel.* Emergency travel assistance is allowed when an immediate family member has a sudden or worsening life-threatening illness or injury, and is provided only on as a reimbursement of expenses.

(a) Airfare, bus, train, lodging, and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.

(b) Multiple immediate family members are limited to a reimbursement amount of \$500.00 each.

(c) Reimbursement for emergency travel assistance is limited to those persons who must travel one hundred (100) miles or more one-way.

- (d) Hotel reimbursement shall be a maximum of \$75.00 per night.
 - (e) All receipts must coincide with the emergency event that required the applicant to travel. Applicant is responsible for providing all proper documentation regarding the illness or injury that required travel and the required receipts in order to be eligible for reimbursement.
- 4-7. *Auto Repairs.* Auto repair assistance is allowed when the vehicle is necessary to obtain/maintain ongoing critical medical care when no other resources exist.
- (a) Auto repair assistance is limited to critical medical patients only and will be denied when an alternate vehicle is owned and available for use;
 - (b) Auto repair assistance will only cover repairs that are necessary to keep the vehicle in standard operating condition. No routine maintenance or auto body repairs shall be eligible for assistance. Routine maintenance or repairs shall include, but is not limited to, oil changes, brakes, tires, batteries/fuses, lights, tune-ups, exhaust systems, flushes, and glass replacement;
 - (c) Auto repair assistance is limited to a maximum amount of \$500.00 once every twelve (12) months;
 - (d) Emergency repairs needed to obtain critical medical care which occurs outside of the program's business hours, may be considered on a case by case basis, in consultation with an independent ASE certified auto technician, and for services that occurred within the previous ten (10) days of the application;
 - (e) Towing assistance may be considered on a case by case basis for reimbursement up to a maximum of \$250.00 once every twelve (12) months when the vehicle is inoperable and towed to an ASE certified mechanic.
- 4-8. *Items not Covered.* The Fund Case Manager is not responsible and will not make any reservations for any form of travel. In addition, the following items, which are not all inclusive, are not a benefit of this assistance program:
- (a) Auto insurance and deductibles;
 - (b) Car Rentals;
 - (c) Personal expenses, including, but not limited to, meals or personal care items;
 - (d) Auto loans and vehicle registration.
- 4-9. This program encourages and requests that multiple family members traveling to the same destination carpool and share hotel rooms whenever possible.
- 4-10. CSF reserves the right to discontinue assistance based on funding availability.

V. MEDICAL BILL ASSISTANCE

- 5-1. *Purpose.* The purpose of this program is to assist enrolled members of the Nation with financial support for the cost of unpaid medical bills where no other resources exist.
- 5-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 5-3. *Eligibility Criteria.* In order to be eligible for Medical Bill assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;
 - (b) Medical billing statements for the dates of service which are within the last twelve (12) months;

- (c) Verification that the applicant's health insurance was utilized within his/her health care network;
 - (d) Explanation of Benefit (EOB) statements received from the health insurance provider showing what portion the health insurance covered;
 - (e) Verification that an Indian Health Service Clinic (IHS) was utilized if applicant is in its service area;
 - (f) Verification that the applicant applied for all of the financial care or assistance programs offered at the medical facility;
 - (g) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - (h) Statements of denial of assistance or caseworker verification of denial based on eligibility criteria, from an Indian Health Service (IHS) facility or (EOB) from any third party insurance carrier.
- 5-4. *Receipt of Required Documentation.* Upon receipt of the completed application for medical bill assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for medical bill assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 5-5. Financial assistance will only be available for services already rendered by a Health Care Provider for up to a maximum of \$5,000.00 within a twelve (12) month period. An extension of this twelve (12) month period can be considered only for chronic medical conditions, but may not exceed an additional \$5,000.00.
- 5-6. Medical and/or hospital bills incurred from illegal activity (i.e. operating while intoxicated, injuries due to alcohol or drug use, etc.), or medical conditions that are a direct result from drug use, including the abuse of prescription drugs, are not eligible for assistance, except for Rule 8 which covers Inpatient or Intensive Outpatient treatment.
- 5-7. Insurance denials resulting from an applicant's failure to submit information pertinent to processing an insurance claim are not eligible for assistance.
- 5-8. Medical bills that have aged beyond twelve (12) months, or which have been referred to a collection agency are not eligible for assistance.
- 5-9. Chiropractic care, holistic treatment, pain clinic treatment/injections, methadone clinic, Saboxin injection and/or nursing home and/or any assisted living facility are not eligible for assistance.
- 5-10. CSF reserves the right to discontinue assistance based on funding availability.

VI. DENTAL RELATED EXPENSES

- 6-1. *Purpose.* The purpose of dental related expenses assistance is to assist enrolled members of the Nation with financial support with the cost of dental-related services where no other resources exist.

- 6-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 6-3. Approval from the Community Support Fund case manager is required prior to receiving treatment from a dental health care provider.
- 6-4. *Eligibility Criteria.* In order to be eligible for dental related expenses assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;
 - (b) Verification by a dentist, orthodontist, or oral surgeon of the dental procedures to be completed, and that they are a medical need, not cosmetic, and the cost or estimated cost of the dental services, which shall include the name, address, and Federal tax ID number of the dental health care provider;
 - (c) Verification of dental insurance and that the dental health care provider is an in-network provider;
 - (d) Verification that the applicant is utilizing the Indian Health Service Clinic in his/her service area if available;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 6-5. *Receipt of Required Documentation.* Upon receipt of the completed application for dental related expenses assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for dental related expenses assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 6-6. Upper and lower dentures are limited to a maximum of \$250.00 each per lifetime.
- 6-7. Financial assistance for dental related services other than dentures is limited to a maximum of \$500.00 within a twelve (12) month period.
- 6-8. Dental services requiring surgery or hospital care will be referred to the Medical Bill Assistance Program (Rule 3).
- 6-9. Braces, implants, veneers, teeth whitening, or any other services considered strictly cosmetic are not eligible for assistance.
- 6-10. CSF reserves the right to discontinue assistance based on funding availability.

VII. OPTICAL RELATED ASSISTANCE

- 7-1. *Purpose.* The purpose of the Optical related assistance program is to provide enrolled members of the Nation with financial support with the costs associated with optical related services where no other resources exist.
- 7-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.

- 7-3. Approval from CSF is required prior to treatment or purchase.
- 7-4. *Eligibility Criteria.* In order to be eligible for Optical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) Cost estimate of optical services this includes the name, address and Federal Tax ID of the provider;
 - (c) Verification of the severe optical illness/injury from an ophthalmologist, optician, or optometrist;
 - (d) Verification of optical insurance and that the ophthalmologist, optician, or optometrist is an in-network provider.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 7-5. Applicant must utilize an Indian Health Service Clinic if available, or provided verification that such a clinic is not available.
- 7-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Optical Related assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Optical Related assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 7-7. Eye glass frames and lenses are limited to a maximum of \$250.00 once per twelve (12) month period, and only the actual frame and lenses are eligible for assistance. Enhancements, including, but not limited to transitional lenses, tinting, or anti-reflective coatings, are not eligible for assistance.
- 7-8. Optical services requiring surgery or hospital care will be referred to the CSF Critical Medical Bill program.
- 7-9. Transportation costs associated with reporting to a treatment/medical facility will be referred to the CSF Critical Medical Travel Assistance program.
- 7-10. The following are not eligible for assistance: contact lenses, routine eye exams, vision correction surgery (eye laser surgery), or any other services that are considered cosmetic. This list is not exhaustive.
- 7-11. CSF reserves the right to discontinue assistance based on funding availability.

VIII. INPATIENT OR INTENSIVE OUTPATIENT TREATMENT ASSISTANCE

- 8-1. *Purpose.* The purpose of the Inpatient or Intensive Outpatient Treatment assistance is to provide enrolled members of the Nation with financial support for inpatient or Intensive Outpatient treatment who have been referred by a licensed or certified counseling agency or

- program, or who have voluntarily entered into an inpatient or Intensive Outpatient treatment program where no other resources exist.
- 8-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
 - 8-3. Approval from CSF is required prior to the inpatient stay or intensive outpatient treatment in order to receive assistance.
 - 8-4. *Eligibility Criteria.* In order to be eligible for Inpatient or Intensive Outpatient Treatment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Cost estimate of the Treatment Center including the name, address and Federal Tax ID number;
 - (c) A referral from a licensed or certified counseling agency or program verifying the catastrophic illness;
 - (d) Verification of health insurance and that the treatment facility is in network. If not in network, verification is to be provided that attempts were made to find a facility in network;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - 8-5. *Receipt of Required Documentation.* Upon receipt of the completed application for Inpatient Treatment assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Inpatient Treatment assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
 - 8-6. Inpatient or intensive outpatient treatment assistance is available up to a maximum of \$5,000.00 per lifetime.
 - 8-7. Inpatient or intensive outpatient treatment assistance will be paid directly to the treatment facility and the treatment facility must be located within the continental United States.
 - 8-8. Transportation costs associated with reporting to a treatment facility will be referred to the CSF Emergency/Non-emergency Medical Travel program (Rule 2).
 - 8-9. Inpatient or intensive outpatient treatment stay requests that are court ordered due to a criminal conviction, or as an alternative to a criminal conviction, are not a benefit of this program.
 - 8-10. Follow up care expenses in a residential facility, half-way house, or transitional shelter shall be limited to one (1) month, and shall not exceed \$500.00. Follow up care expenses do not apply to intensive outpatient treatment stays.
 - 8-11. Shelter Assistance may be considered for intensive outpatient treatment when immediate prior working hours are during the hours of treatment. These hours must be verified through the employer and treatment facility, and shall not exceed \$500.00.

- 8-12. Costs for incidentals such as food, personal care items, clothing, etc. are not eligible for assistance.
- 8-13. CSF reserves the right to discontinue assistance based on funding availability.

IX. MEDICAL RELATED EQUIPMENT, SUPPLIES, OR FURNITURE

- 9-1. *Purpose.* The purpose of the Medical Related Equipment, Supplies, or Furniture assistance program is to provide enrolled members of the Nation with financial assistance with furniture, equipment, or supplies verified by a licensed doctor as being necessary to improve or maintain the quality of life for those applicants who are diagnosed with a life-threatening or chronic medical condition where no other resources exist.
- 9-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 9-3. Prior approval must be received from the CSF before any purchases are made in order to be eligible for assistance.
- 9-4. Medically related equipment, supplies, or furniture must be rented whenever available.
- 9-5. *Eligibility Criteria.* In order to be eligible for Medical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) The cost estimate of supplies or equipment prior to purchasing, which shall include the vendor name, address, and Federal Tax ID number;
 - (c) The prescription from a licensed medical physician which must specify the following:
 - (1) If the need is on a short-term basis (less than six (6) months);
 - (2) The specific life-threatening or chronic medical condition; and
 - (3) That the equipment, supplies or furniture are need to improve or maintain the applicant's quality of life;
 - (d) Statement of denial of assistance from an Indian Health Service (HIS) facility or EOB from any third party insurance carrier;
 - (e) Proof of home ownership or rental lease agreement; and
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 9-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Medical Related Equipment, Supplies, or Furniture assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Medial Related Equipment, Supplies, or Furniture assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

- 9-7. Financial assistance for this program is limited to a maximum of \$1,000.00 within a twelve (12) month period.
- 9-8. An additional \$500.00 may be considered based on medical documentation.
- 9-9. Permanent ramps require the applicant to be the homeowner. Temporary ramps must have the written consent of the property owner.
- 9-10. Home renovations necessary for handicap accessibility are limited to a maximum of \$1,000 once per twelve (12) month period.
 - (a) Renters are not eligible for home renovations.
 - (b) Home renovations may include, but is not limited to, accommodations to bathrooms, doorways, hallways for wheelchairs, or a walk-in or roll in shower.
- 9-11. The types of equipment, furniture or supplies to be considered for assistance may include, but is not limited to the following: hospital bed, lift chair, wheelchair, scooter, portable or permanent ramps, air conditioners, room air purification systems, hearing aids, artificial limbs, vision aids, wigs, and specialty made undergarments.
- 9-12. CSF reserves the right to discontinue assistance based on funding availability.

X. PRESCRIPTION REIMBURSEMENT ASSISTANCE.

- 10-1. *Purpose.* The purpose of Prescription Reimbursement assistance is to assist enrolled members of the Nation with reimbursement of emergency prescribed medications that are needed after regular business hours or not available at Indian Health Service Clinic.
- 10-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 10-3. *Eligibility Criteria.* In order to be eligible for Prescription Reimbursement assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Verification of current group health insurance policy that covers prescriptions;
 - (c) Verification of coverage under a spouse/parent if available;
 - (d) Original receipts of prescription medication;
 - (e) Verification that the emergency medical prescription was needed after hours, which shall include the emergency room report or discharge summary;
 - (f) Verification that there is no Indian Health Service Clinic within ninety (90) miles of the applicant;
 - (g) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 10-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Prescription Reimbursement assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Prescription Reimbursement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

- 10-5. Reimbursement for emergency prescriptions is limited to \$300.00 within a twelve (12) month period.
- 10-6. Prescription reimbursement must be submitted within thirty (30) days of the original receipt date.
- 10-7. Prescribed medications for chemical dependency (i.e. methadone, soapboxing, etc.) are not a covered benefit.
- 10-8. Denials from the IHS clinic resulting from not following preferred purchasing/care team (contract health) will not be covered (i.e. proof of residency not provided, application not updated, no 72 hours notice, etc.)
- 10-9. CSF reserves the right to discontinue assistance based on funding availability.

XI. COBRA INSURANCE PAYMENTS

- 11-1. *Purpose.* The purpose of COBRA insurance payments assistance is to assist enrolled members of the Nation with payment of COBRA insurance premiums when they experience an interruption of employment.
- 11-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 11-3. *Eligibility Criteria.* In order to be eligible for COBRA insurance assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Verification of current group health insurance policy;
 - (c) Verification of coverage under a spouse/parent if available;
 - (d) Verification of all state and public benefits applied for if eligible;
 - (e) Written estimate of employer's group health care coverage plan premium for COBRA coverage;
 - (f) Verification of medical diagnosis, prognosis, and approximate length of employment interruption;
 - (g) Verification of the approved medical leave from employer;
 - (h) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 11-4. *Receipt of Required Documentation.* Upon receipt of the completed application for COBRA insurance payments, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for COBRA insurance payments shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 11-5. COBRA insurance premium payments are limited to a maximum of \$500.00 per month for a total period of three (3) months. An additional three months of COBRA Insurance premiums may be requested with additional supporting documentation from a medical professional

which indicates the applicant's return to employment is established and with documentation from the employer approving the extended leave time.

- 11-6. Upon notification of employment termination, a referral to state or public assistance will be made.
- 11-7. CSF reserves the right to discontinue assistance based on funding availability.

XII. FAMILY MEDICAL LEAVE ACT WAGE REPLACEMENT

- 12-1. *Purpose.* The purpose of the Family Medical Leave Act (FMLA) Wage Replacement assistance program is to assist enrolled members of the Nation with wage replacement when wages are interrupted due to the need to care for an immediate family member as approved under the Family Medical Leave Act.
- 12-2. FMLA wage replacement assistance is available only to employed immediate family members utilizing the FMLA or approved medical leave by the caregiver's employer.
- 12-3. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 12-4. *Eligibility Criteria.* In order to be eligible for FMLA Wage Replacement assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Verification that the caregiver has been employed with their company for at least twelve (12) months, and must have worked for at least 1250 hours in the last twelve (12) months;
 - (c) Verification of approved FMLA or equivalent leave from the caregiver's employer;
 - (d) Verification of the medical need requiring full-time care of the immediate family member, which indicates that continuous care is needed twenty four (24) hours per day, for seven (7) days a week. Said verification must also specify the approximate length of time this direct care is needed.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 12-5. *Receipt of Required Documentation.* Upon receipt of the completed application for FMLA Wage Replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for FMLA Wage Replacement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 12-6. FMLA wage replacement shall be for a maximum of \$350.00 per week for up to twelve (12) weeks. However, wages that are less than \$350 per week will be paid at the actual wage rate appearing on the caregiver's pay stubs.
- 12-7. An extension of an additional twelve (12) weeks of wage replacement may be considered on a case by case basis, and updated verification must be provided showing additional approved FMLA leave from the caregiver's employer.

- 12-8. FMLA wage replacement will not be available to caregivers who are unemployed, receiving social security benefits, retirement benefits, or any other source of income.
- 12-9. A W-2 tax statement will be issued to the caregiver from the Oneida Nation Central Accounting Department. This will be a separate W-2 tax statement from regular earnings if the caregiver is an employee of the Oneida Nation.
- 12-10. The applicant must notify the case manager ten (10) business days prior to the end of the approved FMLA.
- 12-11. The wage replacement will end seven (7) days after the immediate family member being cared for is institutionalized or passes away.
- 12-12. Failure of the applicant to report changes in the household will result in the termination of benefits.
- 12-13. Applicants are not eligible for shelter, utilities, or any other supportive service during the time of receiving wage replacement.
- 12-14. The applicant must be directly caring for an immediate family member, and not oneself.
- 12-15. CSF reserves the right to discontinue assistance based on funding availability.

XIII. FIRE/NATURAL DISASTER ASSISTANCE

- 13-1. *Purpose.* The purpose of the Fire/Natural Disaster Assistance program is to assist enrolled members of the Nation with financial support for fire or natural disaster shelter expenses where no other resources exist.
- 13-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 13-3. *Eligibility Criteria.* In order to be eligible for Fire/Natural Disaster assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) A police and/or fire department report specifying the fire/natural disaster and confirming that the home is uninhabitable;
 - (c) Verification of claim submitted to homeowner's or renter's insurance;
 - (d) Verification of assistance provided or applied for from disaster relief organizations such as Red Cross, FEMA, etc.;
 - (e) Verification of all household members at the time of the fire/natural disaster;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 13-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Fire/Natural Disaster assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Fire/Natural Disaster assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.

- 13-5. Temporary shelter assistance will be given for up to a maximum of fifteen (15) days with the limit of \$60.00 per day for a grand total of \$900.00.
- 13-6. Temporary shelter may be extended for up to an additional five (5) days upon verification from a licensed contractor that repairs are not able to be completed within the original fifteen (15) day time period, and alternate shelter is verified as not being available.
- 13-7. Immediate shelter arrangements may be made by the case manager for a hotel/motel, making an effort to obtain a room with appliances for storing and preparing meals.
- 13-8. Security deposit and first month's rent shall not exceed \$1,000.00 if the current home is uninhabitable and is in need of major repair beyond thirty (30) days. The following additional information must be provided:
 - (a) Landlord verification form which shall include the amount of security deposit and monthly rent;
 - (b) Copy of the rental lease agreement;
 - (c) Verification that the household income can support the monthly rent expense.
- 13-9. The security deposit paid pursuant to 9.8 above, shall be repaid at 100% of the funds paid to the Landlord and returned to the Oneida Nation Economic Support Department and shall be in the form of a cashier's check or money order upon vacating the premises and/or eviction from the premises.
- 13-10. Applicant is responsible to report to the Case Manager any changes in the current catastrophic situation, such as assistance from other agencies, or long-term housing arrangements.
- 13-11. Retail gift cards may be given up to \$100.00 per family member for clothing and basic household item needs.
- 13-12. Any claim of items stored in a household by persons other than residents of the household will not be considered for assistance (i.e. stored items in basement, garage, etc.)
- 13-13. Some services are not eligible for assistance, including, but not limited to auto replacement, transportation, food, storage fees, furnishings, smoke or water damage cleaning fees, and rebuilding costs.
- 13-14. The CSF will not pay family members or caregivers, rather payment will be made to a valid landlord or mortgage holder.
- 13-15. The CSF reserves the right to discontinue assistance in cases where fraud or illegal activity has been determined to have caused the catastrophic event, illness, injury or emergency event resulting in the need for shelter.
- 13-16. The CSF reserves the right to discontinue assistance based on funding availability.

XIV. FUNERAL TRAVEL REIMBURSEMENT (OUTSIDE OF STATE ONLY)

- 14-1. *Purpose.* The purpose of the Funeral travel reimbursement program is to provide a consistent process of reimbursing enrolled members of the Nation with expenses associated with funeral travel outside of the state where the applicant resides and when there are no other resources that exist.
- 14-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 14-3. *Eligibility Criteria.* In order to be eligible for Funeral travel reimbursement, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) A copy of the obituary that lists and immediate family member;

- (c) A copy of the applicant's valid driver's license if requesting fuel reimbursement;
 - (d) Original receipts that show payment for hotel, gas, and/or airfare turned in for reimbursement within thirty (30) days of the date of the funeral;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 14-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Funeral Travel Reimbursement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Funeral Travel Reimbursement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 14-5. Airfare, train, bus, lodging and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.
- (a) Multiple immediate family members are limited to reimbursement of \$500.00 each.
 - (b) Hotel lodging is limited to a maximum of \$75.00 per night and up to two (2) nights of stay and is only for those who reside in excess of sixty (60) miles one-way from the location of the funeral.
 - (c) All receipts must coincide with the initial funeral date.
- 14-6. Purchases not eligible for reimbursement include, but are not limited to, rental car, car repair, food, clothing, flowers, and actual funeral costs.
- 14-7. Vehicle fuel reimbursement is limited to those persons who must travel sixty (60) or more miles one-way to attend a funeral service.
- 14-8. Reimbursement of travel expenses will not be considered when travel was completed more than thirty (30) days after the verified date of the funeral.
- 14-9. CSF will not make any reservations for any form of travel. This assistance is by reimbursement only.
- 14-10. This program encourages multiple family members traveling to the same destination to carpool, and/or share hotel rooms whenever possible.
- 14-11. CSF reserves the right to discontinue assistance based on funding availability.

XV. APPLIANCE REPAIR AND REPLACEMENT: FURNACE AND WATER HEATER

- 15-1. *Purpose.* The purpose of Appliance Repair and Replacement assistance is to assist enrolled members of the Nation with an emergency repair or replacement of a furnace or water heater where no other resources exist.
- 15-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 15-3. This assistance is limited to furnaces and water heaters, and shall not include any other kind of appliances.
- 15-4. *Eligibility Criteria.* In order to be eligible for Appliance Repair and Replacement assistance, a person must provide a completed Community Support Fund application and the following:

- (a) Proof of enrollment in the Nation;
 - (b) Two (2) cost estimates for repair of a water heater or furnace from a licensed/certified repair professional, to include the name, address, phone number, and Federal Tax Identification number of the professional;
 - (c) Verification that the applicant applied for Energy Assistance with the county agency in which the applicant resides, along with proof assistance was denied;
 - (d) Verification that the applicant is the owner of the home;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 15-5. *Receipt of Required Documentation.* Upon receipt of the completed application for appliance repair and/or replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for appliance repair and/or replacement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 15-6. When a cost estimate indicates that the repair costs will exceed the value of the appliance, replacement will be considered and approved on a case by case basis.
- 15-7. The repair and/or replacement of a water heater shall not exceed \$350.00 once every ten (10) years.
- 15-8. The repair and/or replacement of a furnace shall not exceed \$2,500.00 once per lifetime.
- 15-9. The CSF reserves the right to discontinue assistance based on funding availability.

XVI. SECURITY DEPOSIT ASSISTANCE

- 16-1. *Purpose.* The purpose of the Security Deposit assistance program is to provide enrolled members of the Nation residing in the State of Wisconsin with financial support to ensure quality of life when shelter expenses are threatened with eviction.
- 16-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 16-3. *Eligibility Criteria.* In order to be eligible for Security Deposit assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Proof of residency in the State of Wisconsin, which shall include a landlord verification form completed by the potential landlord or a current rental/lease agreement showing the amount of the security deposit;
 - (c) Verification of a current emergency situation, which shall include, but is not limited to, a pending eviction;
 - (d) Must have repaid any prior security deposit assistance received to the CSF;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

- (f) Household members must demonstrate the ability to fulfill the terms of the rental agreement.
- 16-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Security Deposit assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Security Deposit assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 16-5. Security Deposit assistance shall not exceed the amount of \$500.00
- 16-6. Applicants who receive assistance in paying their security deposit shall repay those funds at 100 percent (100%) of the funds received.
- (a) All repayments must be made payable to the Oneida Nation in the form of a cashier's check, or money order.
 - (b) Payments must be brought to the Economic Support Department.
 - (c) Requests for security deposit assistance with no repayment of funds for prior assistance received will result in the application being denied.
- 16-7. Security Deposit assistance is limited to one (1) person per household.
- 16-8. CSF will not pay family members or caregivers a security deposit; it must be a valid landlord.
- 16-9. CSF reserves the right to discontinue assistance based on funding availability.

XVII. SOCIAL SECURITY DISABILITY DETERMINATION SHELTER ASSISTANCE

- 17-1. *Purpose.* The purpose of the Social Security Disability Determination Shelter assistance program is to assist enrolled members of the Nation with financial support for shelter expenses for those waiting an eligibility determination for the Social Security Administration for a disability finding.
- 17-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 17-3. *Eligibility Criteria.* In order to be eligible for Social Security Disability Determination Shelter assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification of a pending Social Security Disability Application;
 - (c) A Landlord verification form completed by a landlord or other statement from the mortgage holder that show the monthly rent and the applicant's current status;
 - (d) Verification of the applicant's current utility bills for water, heat, and electricity, however energy assistance must be applied for before any utility bills will be considered for payment;
 - (e) Verification of mortgage disability insurance, if applicable;

- (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 17-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Social Security Disability Determination Shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Social Security Disability Determination Shelter assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 17-5. Rent/mortgage assistance shall not exceed the amount of \$500.00 per month, not to exceed twenty-four (24) months.
- (a) Only the applicant's portion will be considered when the household consists of other adults.
 - (b) Rent/mortgage assistance will be terminated if the household fails to meet their timely portion of the scheduled payments.
 - (c) Retro-payment for back rent/mortgage assistance is not eligible for assistance.
- 17-6. Upon receipt of the verification that all other resources have been applied for, utility assistance will be considered for water, heat, and electricity.
- (a) Only the applicant's portion of the utility bill will be considered when the household consists of other adults.
 - (b) The utility bill must be in the applicant or current household member's name.
 - (c) Payment for past due amounts owed for utilities are not eligible for assistance.
- 17-7. The applicant is responsible to report to the Case Manager any change(s) in the household within ten (10) business day from the change occurring.
- (a) Examples of household change shall include, but is not limited to the following: relocation, household members, income, medical changes, submitted social security disability application, or application for or receipt of other agency assistance such as housing allowance, etc.
 - (b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the Case Manager, but shall not exceed thirty (30) days.
- 17-8. CSF will not pay family members or caregivers; the assistance is paid only to a valid landlord or mortgage holder.
- 17-9. CSF reserves the right to discontinue this assistance based on funding availability.
- 17-10. CSF reserves the right to discontinue this assistance in cases where fraud or illegal activity has been determined to have caused the eviction.
- 17-11. The Case Manager will provide ten (10) day written notification to an applicant whose assistance under this program is being discontinued.

XVIII. UTILITY DISCONNECTION ASSISTANCE

- 18-1. *Purpose.* The purpose of the Utility Disconnection assistance program is to assist enrolled members of the Nation with emergency financial support to ensure quality of life when home heating and electric services are threatened with disconnection.
- 18-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 18-3. *Eligibility Criteria.* In order to be eligible for Utility Disconnection assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) A copy of the current disconnection notice received from the utility company for the household in which the applicant is residing;
 - (c) Verification of address;
 - (d) Verification of application for Energy Assistance and crisis assistance with the county agency in which the applicant resides;
 - (e) Verification of payments made in each of the three (3) previous months of at least \$25.00 per month;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 18-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Utility Disconnection assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) Upon receipt of a completed application along with all the required documentation, the case manager shall have up to 10 business days to provide the initial decision in writing to the applicant.
 - (d) An application for Utility Disconnection assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 18-5. Requests for assistance for the payment of utilities shall only be allowed once every two (2) years by the responsible payee. Assistance requested under this Rule and under Rule 3 shall be counted towards the total number of requests for the two (2) year period limit.
- 18-6. Utility assistance shall not exceed the amount of \$300.00.
- 18-7. CSF reserves the right to discontinue assistance based on funding availability.

End.

Adopted in whole [Insert Date of Adoption] – Effective [Insert Effective Date] – LOC Certified [Insert Date of LOC Certification]

September 22, 2017
 Public Meeting
 Draft.



Title 1. Government and Finances – Chapter 125
 Community Support Fund
 Rule Nos. 1 through 16

I. Purpose, Delegation, Adoption, Amendment and Repeal

1-1. *Purpose.* The purpose of the Community Support Fund rules is to provide guidance on how the Community Support Fund is utilized so that the Nation can assist the greatest number of members of the Nation who apply for assistance to the Fund in times of a catastrophic event, illness, injury or emergency event when no other resources for assistance exist.

1-2. *Authority.* The Community Support Fund Law, Chapter 125, delegates rulemaking authority to the Social Services Area of the Government Services Division pursuant to the Administrative Rulemaking law (Chapter 17 Oneida Code of Laws).

1-3. These rules were adopted by the Economic Support Department of the Social Services Area of the Government Services Division in accordance with the procedures of the Administrative Rulemaking law.

1-4. These rules may be amended or repealed by the Economic Support Department and/or the Oneida Business Committee pursuant to the procedures set out in the Administrative Rulemaking Law. For the purpose of future amendments to these rules, each article is a separate rule and may be amended as such.

1-5. Should a provision of these rules or the application thereof to any person or circumstances be held as invalid, such invalidity shall not affect other provisions of these rules which are considered to have legal force without the invalid portions.

1-6. In the event of a conflict between a provision of these rules and a provision of another rule, internal policy, procedure, or other regulation; the provisions of these rules shall control.

1-7. These rules supersede all prior rules, regulations, internal policies or other requirements relating to the Community Support Fund.

1-8. This Article applies to each subsequent rule listed herein.

II. Definitions

2-1. This section shall govern the definitions of words and phrases used within this rule. All words not defined herein shall be used in their ordinary and everyday sense.

(a) “Applicant” means the subject of the application for assistance.

(b) “Business day” means Monday through Friday 8:00 a.m. to 4:30 p.m., excluding holidays of the Nation.

(c) “Caregiver” means the person who assists an ill or incapacitated immediate family member that is in need of twenty-four (24) hour per day, seven (7) days a week care.

(d) “Case manager” means an employee responsible for administering Community Support Fund benefits.

- (e) “Catastrophic event” means a natural or man-made incident, which results in a substantial damage or loss requiring major financial resources to repair or recover. This includes, but is not limited to, a house fire, tornado, flood, or other disaster.
- (f) “Catastrophic illness/injury” means a serious debilitating illness, injury, impairment, or mental or physical condition that involves:
- (1) In-patient care;
 - (2) A period of continuing treatment due to a chronic serious health condition, including, but not limited to, chemotherapy, radiation, dialysis, and daily/weekly therapy resulting from trauma;
 - (3) A period of illness or injury that is long-term due to a condition for which treatment may be ineffective including, but not limited to, stroke or terminal disease;
 - (4) Multiple treatments either for restorative surgery after an accident or other injury, or for a chronic condition, including, but not limited to, cancer or kidney disease.
- (g) “COBRA” means the Consolidated Omnibus Budget Reconciliation Act of 1985 also known as continued group health care coverage costs under an employer’s plan.
- (h) “Cosmetic” means any medical service provided with the intent to enhance a person’s appearance, including, but not limited to, braces, veneers, teeth whitening, implants, or other plastic surgery.
- (i) “Critical Medical” means professionally delivered care or treating a life threatening illness which requires immediate or regularly scheduled monitored medical care, which includes, but is not limited to dialysis, chemotherapy, radiation, daily/weekly therapy resulting from trauma. This does not include routine annual or semi-annual appointments.
- (j) “Emergency event” means a situation that poses an immediate risk to health, life, safety, property or environment. Emergencies require urgent intervention to prevent further illness, injury, death, or other worsening of the situation.
- (k) “Emergency medical travel” means an unexpected serious health situation or occurrence requiring the immediate presence of immediate family. This includes, but is not limited to, end of life situations, and situations in which an immediate family member is placed on life support.
- (l) “Eviction” means the legal notice received from a landlord or mortgage holder that orders the tenant(s) to vacate the property.
- (m) “FMLA” means the Family Medical Leave Act, a Federal law authorizing temporary time off from an employment position to provide direct care to a family member, without losing their employment status.
- (n) “Fund” means the Community Support Fund.
- (o) “Garnishment” means a legal action that directs that money owed be seized to satisfy a debt.
- (p) “Household” means all persons who reside together at the same residence.
- (q) “Immediate family” means an individual’s husband, wife, mother, father, step mother, step father, son, daughter, step son, step daughter, brother, sister, step brother, step sister, grandparent, grandchild, mother-in-law, father-in-law, daughter-in-law, son-in-law, brother-in-law or sister-in-law and any of the these relations attained through

legal adoption, and/or a person who is legally responsible or otherwise named the legal guardian for the applicant.

(r) "Incapacitation" means a state in which a person is temporarily or permanently impaired by mental and/or physical deficiency, disability, illness or injury.

(s) "Income" means a measurement including, but not limited to, a combination of salaries, wages, retirement pension, disability income, government benefits, and unemployment of all people sharing a particular household/residence.

(t) "Legal guardian" means a person who has the legal authority to care for the personal and property interests of another person granted through a Court order.

(u) "Legal responsibility" means specific duties imposed upon a person to care or provide for another including liability for personal obligations as granted through a Power of Attorney or Court order.

(v) "Major medical surgery" means a surgical procedure that carries a degree of risk to the patient's life, or the potential for severe disability if something goes wrong during surgery. It is a surgical procedure that usually requires a patient to be put under general anesthesia and given respiratory assistance because he or she cannot breathe independently.

(w) "Nation" means the Oneida Nation.

(x) "Non-medical" means necessary intervention to support a patient with an on-going medical illness, injury or potential life threatening illness, and requires further testing or consultation with a specialist.

(y) "Reimbursement" means to make repayment for expense(s) or a loss that incurred.

(z) "Routine Exam" means an annual or semi-annual health exam provided by a physician, dentist, orthodontist, oral surgeon, or other similar health care specialist.

(aa) "Security Deposit" means the payment of money held by a landlord in trust to protect him/herself from unpaid rent or damage to the living space.

(bb) "Wages" means taxable income reported to the Internal Revenue Service for performing work.

III. SHELTER ASSISTANCE

3-1. *Purpose.* The purpose of shelter assistance is to assist enrolled members of the Nation with financial support for shelter expenses due to experiencing a catastrophic event, illness, or injury where no other resources exist.

3-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.

3-3. *Eligibility Criteria.* In order to be eligible for shelter assistance a person must provide a completed Community Support Fund application and the following:

(a) Proof of enrollment in the Nation;

(b) Documentation verifying incapacitation within the last thirty (30) days, including but not limited to:

(1) Medical verification specifying dates effected by illness or injury;

(2) Verification of short and/or long term disability specifying the dates received and the amount of the benefit;

(c) Landlord Verification Form completed by the landlord of the applicant or a statement from the applicant's mortgage holder stating the applicant's monthly mortgage payment and current status;

- (d) A current utility bill, such as a water, heat, or electricity bill;
 - (e) Verification of all household income for the last thirty (30) days;
 - (f) Verification of any mortgage disability insurance;
 - (g) Verification of an applicant's personal and/or vacation time from employment; and
 - (h) Any other documentation requested by the Community Support Fund case manager.
- 3-4. *Receipt of Required Documentation.* Upon receipt of the completed application for shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for shelter assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 3-5. *Rent or Mortgage Assistance.* An applicant may request assistance for rent or mortgage payments.
- (a) The amount provided for rent or mortgage assistance shall not exceed \$500.00 per month. The amount of rent or mortgage assistance shall not exceed a total of twenty-four (24) months per life-time of the applicant.
 - (b) Only the applicant's portion of the rent or mortgage owed shall be considered when determining the amount of rent or mortgage assistance if the applicant's household consists of other adults.
 - (c) Shelter assistance shall not be used to pay family members or caregivers of the applicant. Only a valid landlord or mortgage holder shall be paid.
- 3-6. *Utility Assistance.* An applicant may request assistance for utilities, such as heat, water, and electricity.
- (a) The utility bill shall be in the applicant's or current household's member's name.
 - (b) Applicants shall provide verification of application to all other available resources and programs for utility assistance.
 - (1) The Wisconsin Home Energy Assistance Program (WHEAP) serves as an example of an alternate program the applicant should apply for before applying for shelter assistance.
 - (c) Only the applicant's portion of the utility bill shall be considered when determining the amount of utility assistance if the applicant's household consists of other adults.
- 3-7. *Reporting Changes in the Household.* The applicant shall report any changes in the household to the case manager within ten (10) business days from the change occurring.
- (a) Changes in the household that shall be reported include, but are not limited to, the following: relocation, addition or subtraction of a household member, income changes, medical changes, submission of a social security disability application, submission of application or receipt of assistance from other agency or program.
 - (b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the case manager, not to exceed thirty (30) days.
- 3-8. *Discontinuation of Assistance.* The Community Support Fund Manager reserves the right to discontinue shelter assistance based on the following:
- (a) A lack of funding availability

- (b) A discovery that fraud or illegal activity has been determined to have caused homelessness.
 - (c) The case manager shall provide ten (10) day notification to an applicant whose shelter assistance will be discontinued.
- 3-9. *Changes in Household Information.* An applicant shall be responsible to report to the Fund Case Manager any change(s) in the household within ten (10) business days from the change. Changes shall include, but are not limited to the following:
- (a) Relocation;
 - (b) Household member changes;
 - (c) Income;
 - (d) Medical changes;
 - (e) Submission of Social Security Disability application; and
 - (f) Receipt of other agency assistance
- (1) Failure of an applicant to report changes in the household may result in suspension of assistance until verification of the change(s) is provided to the Fund Case Manager.
 - (2) An applicant shall have thirty (30) days to provide the verification once notification is received from the Fund Case Manager that verification is required.
- 3-10. *Hotel Assistance.* Hotel Assistance may be provided in the event of extreme situations as determined by the Fund Case Manager and the Director of Economic Support.
- 3-11. *Federal Poverty Level.* Shelter Assistance is only available to those households' whose income is below 175% of the Federal Poverty Level.

IV. EMERGENCY/NON-EMERGENCY MEDICAL TRAVEL

- 4-1. *Purpose.* The purpose is to assist enrolled members of the Nation with emergency and non-emergency medical travel expenses. This assistance is limited to immediate family members to assist with travel expenses.
- 4-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 4-3. *Eligibility Criteria.* In order to be eligible for emergency/non-emergency medical travel assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verifications of medical appointments which include the medical condition, date, time and location of the appointment;
 - (b) Verification of the applicants relationship to the patient;
 - (c) Verification of a valid driver's license for reimbursement of fuel purchases
 - (d) Original receipts for hotel, gas, and/or airfare which shall be dated within thirty (30) days of travel and show total cost paid; and
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 4-4. *Receipt of Required Documentation.* Upon receipt of the completed application for emergency/non-emergency medical travel assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.

- (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for emergency/non-emergency medical travel assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 4-5. *Non-Emergency Travel.* Non-emergency travel is allowed when an immediate family member has scheduled medical appointments as shown through medical documentation.
 - (a) Documentation of scheduled appointments must be submitted and have prior approval.
 - (b) The medical appointment must be more than sixty (60) miles one way from the residence of the applicant.
 - (c) Gas cards will be disbursed the day prior to the appointment and original receipts are due within seven (7) business days. If receipts are not turned in, future requests for assistance will be denied for six (6) consecutive months starting when the first new request is made.
 - (1) Those who travel from sixty (60) miles up to one hundred fifty (150) miles one-way shall receive a \$30.00 gas card. Travel may also be eligible for reimbursement for up to \$30.00 with original receipts that coincide with an appointment.
 - (2) Those who travel over one hundred fifty (150) miles one-way shall receive a \$40.00 gas card. Travel may also be eligible for reimbursement for up to \$40.00 with original receipts that coincide with an appointment.
 - (d) Hotel reimbursement shall be a maximum of \$75.00 per night for up to a maximum of three (3) nights, and shall only be considered for approval by the Fund Case Manager where the appointment is more than one hundred (100) miles one-way from the residence of the applicant.
- 4-6. *Emergency Travel.* Emergency travel assistance is allowed when an immediate family member has a sudden or worsening life-threatening illness or injury, and is provided only on as a reimbursement of expenses.
 - (a) Airfare, bus, train, lodging, and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.
 - (b) Multiple immediate family members are limited to a reimbursement amount of \$500.00 each.
 - (c) Reimbursement for emergency travel assistance is limited to those persons who must travel one hundred (100) miles or more one-way.
 - (d) Hotel reimbursement shall be a maximum of \$75.00 per night.
 - (e) All receipts must coincide with the emergency event that required the applicant to travel. Applicant is responsible for providing all proper documentation regarding the illness or injury that required travel and the required receipts in order to be eligible for reimbursement.
- 4-7. *Items not Covered.* The Fund Case Manager is not responsible and will not make any reservations for any form of travel. In addition, the following items, which are not all inclusive, are not a benefit of this assistance program:
 - (a) Auto insurance and deductibles;
 - (b) Car Rentals;
 - (c) Personal expenses, including, but not limited to, meals or personal care items;

- (d) Any type of vehicle repairs and/or maintenance or towing
- 4-8. This program encourages and requests that multiple family members traveling to the same destination carpool and share hotel rooms whenever possible.
- 4-9. CSF reserves the right to discontinue assistance based on funding availability.

V. MEDICAL BILL ASSISTANCE

- 5-1. *Purpose.* The purpose of this program is to assist enrolled members of the Nation with financial support for the cost of unpaid medical bills where no other resources exist.
- 5-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 5-3. *Eligibility Criteria.* In order to be eligible for Medical Bill assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;
 - (b) Medical billing statements for the dates of service which are within the last twelve (12) months;
 - (c) Verification that the applicant's health insurance was utilized within his/her health care network;
 - (d) Explanation of Benefit (EOB) statements received from the health insurance provider showing what portion the health insurance covered;
 - (e) Verification that an Indian Health Service Clinic (IHS) was utilized if applicant is in its service area;
 - (f) Verification that the applicant applied for all of the financial care or assistance programs offered at the medical facility;
 - (g) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - (h) Statements of denial of assistance or caseworker verification of denial based on eligibility criteria, from an Indian Health Service (IHS) facility or (EOB) from any third party insurance carrier.
- 5-4. *Receipt of Required Documentation.* Upon receipt of the completed application for medical bill assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for medical bill assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 5-5. Financial assistance will only be available for services already rendered by a Health Care Provider for up to a maximum of \$5,000.00 within a twelve (12) month period. An extension of this twelve (12) month period can be considered only for chronic medical conditions, but may not exceed an additional \$5,000.00.
- 5-6. Medical and/or hospital bills incurred from illegal activity (i.e. operating while intoxicated, injuries due to alcohol or illegal drug use, etc.), or medical conditions that are a direct result

- from illegal drug use, including the abuse of prescription drugs, are not eligible for assistance.
- 5-7. Insurance denials resulting from an applicant's failure to submit information pertinent to processing an insurance claim are not eligible for assistance.
 - 5-8. Medical bills that have aged beyond twelve (12) months, or which have been referred to a collection agency are not eligible for assistance.
 - 5-9. Chiropractic care, holistic treatment, pain clinic treatment/injections, methadone clinic, Saboxin injection and/or nursing home and/or any assisted living facility are not eligible for assistance.
 - 5-10. CSF reserves the right to discontinue assistance based on funding availability.
 - 5-11. *Federal Poverty Level*. Medical Bill Assistance is only available to those households whose income is below 175% of the Federal Poverty Level.

VI. DENTAL RELATED EXPENSES

- 6-1. *Purpose*. The purpose of dental related expenses assistance is to assist enrolled members of the Nation with financial support with the cost of dental-related services where no other resources exist.
- 6-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 6-3. Approval from the Community Support Fund case manager is required prior to receiving treatment from a dental health care provider.
- 6-4. *Eligibility Criteria*. In order to be eligible for dental related expenses assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child;
 - (b) Verification by a dentist, orthodontist, or oral surgeon of the dental procedures to be completed, and that they are a medical need, not cosmetic, and the cost or estimated cost of the dental services, which shall include the name, address, and Federal tax ID number of the dental health care provider;
 - (c) Verification of dental insurance and that the dental health care provider is an in-network provider;
 - (d) Verification that the applicant is utilizing the Indian Health Service Clinic in his/her service area if available;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 6-5. *Receipt of Required Documentation*. Upon receipt of the completed application for dental related expenses assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for dental related expenses assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 6-6. Upper and lower dentures are limited to a maximum of \$250.00 each per lifetime.

- 6-7. Financial assistance for dental related services other than dentures is limited to a maximum of \$500.00 within a twelve (12) month period.
- 6-8. Dental services requiring surgery or hospital care will be referred to the Medical Bill Assistance Program (Rule 3).
- 6-9. Braces, implants, veneers, teeth whitening, or any other services considered strictly cosmetic are not eligible for assistance.
- 6-10. CSF reserves the right to discontinue assistance based on funding availability.
- 6-11. *Federal Poverty Level.* Auto Repair Assistance is only available to those households whose income is below 175% of the Federal Poverty Level.

VII. OPTICAL RELATED ASSISTANCE

- 7-1. *Purpose.* The purpose of the Optical related assistance program is to provide enrolled members of the Nation with financial support with the costs associated with optical related services where no other resources exist.
- 7-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 7-3. Approval from CSF is required prior to treatment or purchase.
- 7-4. *Eligibility Criteria.* In order to be eligible for Optical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) Cost estimate of optical services this includes the name, address and Federal Tax ID of the provider;
 - (c) Verification of the severe optical illness/injury from an ophthalmologist, optician, or optometrist;
 - (d) Verification of optical insurance and that the ophthalmologist, optician, or optometrist is an in-network provider.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 7-5. Applicant must utilize an Indian Health Service Clinic if available, or provided verification that such a clinic is not available.
- 7-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Optical Related assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Optical Related assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 7-7. Eye glass frames and lenses are limited to a maximum of \$250.00 once per twelve (12) month period, and only the actual frame and lenses are eligible for assistance. Enhancements, including, but not limited to transitional lenses, tinting, or anti-reflective coatings, are not eligible for assistance.

- 7-8. Optical services requiring surgery or hospital care will be referred to the CSF Critical Medical Bill program.
- 7-9. Transportation costs associated with reporting to a treatment/medical facility will be referred to the CSF Critical Medical Travel Assistance program.
- 7-10. The following are not eligible for assistance: contact lenses, routine eye exams, vision correction surgery (eye laser surgery), or any other services that are considered cosmetic. This list is not exhaustive.
- 7-11. CSF reserves the right to discontinue assistance based on funding availability.
- 7-12. *Federal Poverty Level.* Optical Related assistance is only available to those households whose income is below 175% of the Federal Poverty Level.

VIII. INPATIENT TREATMENT ASSISTANCE

- 8-1. *Purpose.* The purpose of the Inpatient Treatment assistance is to provide enrolled members of the Nation with financial support for inpatient treatment who have been referred by a licensed or certified counseling agency or program, or who have voluntarily entered into an inpatient treatment program where no other resources exist.
- 8-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 8-3. Approval from CSF is required prior to the inpatient stay in order to receive assistance.
- 8-4. *Eligibility Criteria.* In order to be eligible for Inpatient Treatment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Cost estimate of the Inpatient Treatment Center including the name, address and Federal Tax ID number;
 - (c) A referral from a licensed or certified counseling agency or program verifying the catastrophic illness;
 - (d) Verification of health insurance and that the treatment facility is in network. If not in network, verification is to be provided that attempts were made to find a facility in network;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 8-5. *Receipt of Required Documentation.* Upon receipt of the completed application for Inpatient Treatment assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Inpatient Treatment assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 8-6. Inpatient treatment assistance is available up to a maximum of \$5,000.00 once per lifetime.
- 8-7. Inpatient treatment assistance will be paid directly to the treatment facility and the treatment facility must be located within the continental United States.
- 8-8. Transportation costs associated with reporting to a treatment facility will be referred to the CSF Emergency/Non-emergency Medical Travel program (Rule 2).
- 8-9. Court ordered inpatient treatment stay requests are not a benefit of this program.

- 8-10. Follow up care expenses in a residential facility, half-way house, or transitional shelter shall be limited to one (1) month, and shall not exceed \$500.00.
- 8-11. Costs for incidentals such as food, personal care items, clothing, etc. are not eligible for assistance.
- 8-12. CSF reserves the right to discontinue assistance based on funding availability.

IX. MEDICAL RELATED EQUIPMENT, SUPPLIES, OR FURNITURE

- 9-1. *Purpose.* The purpose of the Medical Related Equipment, Supplies, or Furniture assistance program is to provide enrolled members of the Nation with financial assistance with furniture, equipment, or supplies verified by a licensed doctor as being necessary to improve or maintain the quality of life for those applicants who are diagnosed with a life-threatening or chronic medical condition where no other resources exist.
- 9-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 9-3. Prior approval must be received from the CSF before any purchases are made in order to be eligible for assistance.
- 9-4. Medically related equipment, supplies, or furniture must be rented whenever available.
- 9-5. *Eligibility Criteria.* In order to be eligible for Medical Related Equipment assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (1) a non-enrolled parent of an enrolled minor child may apply for assistance that directly affects the enrolled minor child.
 - (b) The cost estimate of supplies or equipment prior to purchasing, which shall include the vendor name, address, and Federal Tax ID number;
 - (c) The prescription from a licensed medical physician which must specify the following:
 - (1) If the need is on a short-term basis (less than six (6) months);
 - (2) The specific life-threatening or chronic medical condition; and
 - (3) That the equipment, supplies or furniture are need to improve or maintain the applicant's quality of life;
 - (d) Statement of denial of assistance from an Indian Health Service (HIS) facility or EOB from any third party insurance carrier;
 - (e) Proof of home ownership or rental lease agreement; and
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 9-6. *Receipt of Required Documentation.* Upon receipt of the completed application for Medical Related Equipment, Supplies, or Furniture assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Medical Related Equipment, Supplies, or Furniture assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 9-7. Financial assistance for this program is limited to a maximum of \$1,000.00 within a twelve (12) month period.

- 9-8. An additional \$500.00 may be considered based on medical documentation.
- 9-9. Permanent ramps require the applicant to be the homeowner. Temporary ramps must have the written consent of the property owner.
- 9-10. Home renovations necessary for handicap accessibility are limited to a maximum of \$1,000 once per twelve (12) month period.
 - (a) Renters are not eligible for home renovations.
 - (b) Home renovations may include, but is not limited to, accommodations to bathrooms, doorways, hallways for wheelchairs, or a walk-in or roll in shower.
- 9-11. The types of equipment, furniture or supplies to be considered for assistance may include, but is not limited to the following: hospital bed, lift chair, wheelchair, scooter, portable or permanent ramps, air conditioners, room air purification systems, hearing aids, artificial limbs, vision aids, wigs, and specialty made undergarments.
- 9-12. CSF reserves the right to discontinue assistance based on funding availability.
- 9-13. *Federal Poverty Level*. Medical Related Equipment, Supplies, or Furniture assistance is only available to those applicants whose income is below 175% of the Federal Poverty Level.

X. COBRA INSURANCE PAYMENTS

- 10-1. *Purpose*. The purpose of COBRA insurance payments assistance is to assist enrolled members of the Nation with payment of COBRA insurance premiums when they experience an interruption of employment.
- 10-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 10-3. *Eligibility Criteria*. In order to be eligible for COBRA insurance assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Verification of current group health insurance policy;
 - (c) Verification of coverage under a spouse/parent if available;
 - (d) Verification of all state and public benefits applied for if eligible;
 - (e) Written estimate of employer's group health care coverage plan premium for COBRA coverage;
 - (f) Verification of medical diagnosis, prognosis, and approximate length of employment interruption;
 - (g) Verification of the approved medical leave from employer;
 - (h) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 10-4. *Receipt of Required Documentation*. Upon receipt of the completed application for COBRA insurance payments, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for COBRA insurance payments shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 10-5. COBRA insurance premium payments are limited to a maximum of \$500.00 per month for a total period of three (3) months. An additional three months of COBRA Insurance premiums

may be requested with additional supporting documentation from a medical professional which indicates the applicant's return to employment is established and with documentation from the employer approving the extended leave time.

- 10-6. Upon notification of employment termination, a referral to state or public assistance will be made.
- 10-7. CSF reserves the right to discontinue assistance based on funding availability.

XI. FAMILY MEDICAL LEAVE ACT WAGE REPLACEMENT

- 11-1. *Purpose.* The purpose of the Family Medical Leave Act (FMLA) Wage Replacement assistance program is to assist enrolled members of the Nation with wage replacement when wages are interrupted due to the need to care for an immediate family member as approved under the Family Medical Leave Act.
- 11-2. FMLA wage replacement assistance is available only to employed immediate family members utilizing the FMLA or approved medical leave by the caregiver's employer.
- 11-3. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 11-4. *Eligibility Criteria.* In order to be eligible for FMLA Wage Replacement assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) Verification that the caregiver has been employed with their company for at least twelve (12) months, and must have worked for at least 1250 hours in the last twelve (12) months;
 - (c) Verification of approved FMLA or equivalent leave from the caregiver's employer;
 - (d) Verification of the medical need requiring full-time care of the immediate family member, which indicates that continuous care is needed twenty four (24) hours per day, for seven (7) days a week. Said verification must also specify the approximate length of time this direct care is needed.
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 11-5. *Receipt of Required Documentation.* Upon receipt of the completed application for FMLA Wage Replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for FMLA Wage Replacement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 11-6. FMLA wage replacement shall be for a maximum of \$350.00 per week for up to twelve (12) weeks. However, wages that are less than \$350 per week will be paid at the actual wage rate appearing on the caregiver's pay stubs.
- 11-7. An extension of an additional twelve (12) weeks of wage replacement may be considered on a case by case basis, and updated verification must be provided showing additional approved FMLA leave from the caregiver's employer.
- 11-8. FMLA wage replacement will not be available to caregivers who are unemployed, receiving social security benefits, retirement benefits, or any other source of income.

- 11-9. A W-2 tax statement will be issued to the caregiver from the Oneida Nation Central Accounting Department. This will be a separate W-2 tax statement from regular earnings if the caregiver is an employee of the Oneida Nation.
- 11-10. The applicant must notify the case manager ten (10) business days prior to the end of the approved FMLA.
- 11-11. The wage replacement will end seven (7) days after the immediate family member being cared for is institutionalized or passes away.
- 11-12. Failure of the applicant to report changes in the household will result in the termination of benefits.
- 11-13. Applicants are not eligible for shelter, utilities, or any other supportive service during the time of receiving wage replacement.
- 11-14. The applicant must be directly caring for an immediate family member, and not oneself.
- 11-15. CSF reserves the right to discontinue assistance based on funding availability.

XII. FIRE/NATURAL DISASTER ASSISTANCE

- 12-1. *Purpose.* The purpose of the Fire/Natural Disaster Assistance program is to assist enrolled members of the Nation with financial support for fire or natural disaster shelter expenses where no other resources exist.
- 12-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 12-3. *Eligibility Criteria.* In order to be eligible for Fire/Natural Disaster assistance, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) A police and/or fire department report specifying the fire/natural disaster and confirming that the home is uninhabitable;
 - (c) Verification of claim submitted to homeowner's or renter's insurance;
 - (d) Verification of assistance provided or applied for from disaster relief organizations such as Red Cross, FEMA, etc.;
 - (e) Verification of all household members at the time of the fire/natural disaster;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 12-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Fire/Natural Disaster assistance, the case manager shall determine if all required documentation was received from the applicant.
 - (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Fire/Natural Disaster assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 12-5. Temporary shelter assistance will be given for up to a maximum of fifteen (15) days with the limit of \$60.00 per day for a grand total of \$900.00.
- 12-6. Temporary shelter may be extended for up to an additional five (5) days upon verification from a licensed contractor that repairs are not able to be completed within the original fifteen (15) day time period, and alternate shelter is verified as not being available.

- 12-7. Immediate shelter arrangements may be made by the case manager for a hotel/motel, making an effort to obtain a room with appliances for storing and preparing meals.
- 12-8. Security deposit and first month's rent shall not exceed \$1,000.00 if the current home is uninhabitable and is in need of major repair beyond thirty (30) days. The following additional information must be provided:
 - (a) Landlord verification form which shall include the amount of security deposit and monthly rent;
 - (b) Copy of the rental lease agreement;
 - (c) Verification that the household income can support the monthly rent expense.
- 12-9. The security deposit paid pursuant to 9.8 above, shall be repaid at 100% of the funds paid to the Landlord and returned to the Oneida Nation Economic Support Department and shall be in the form of a cashier's check or money order upon vacating the premises and/or eviction from the premises.
- 12-10. Applicant is responsible to report to the Case Manager any changes in the current catastrophic situation, such as assistance from other agencies, or long-term housing arrangements.
- 12-11. Retail gift cards may be given up to \$100.00 per family member for clothing and basic household item needs.
- 12-12. Any claim of items stored in a household by persons other than residents of the household will not be considered for assistance (i.e. stored items in basement, garage, etc.)
- 12-13. Some services are not eligible for assistance, including, but not limited to auto replacement, transportation, food, storage fees, furnishings, smoke or water damage cleaning fees, and rebuilding costs.
- 12-14. The CSF will not pay family members or caregivers, rather payment will be made to a valid landlord or mortgage holder.
- 12-15. The CSF reserves the right to discontinue assistance in cases where fraud or illegal activity has been determined to have caused the catastrophic event, illness, injury or emergency event resulting in the need for shelter.
- 12-16. The CSF reserves the right to discontinue assistance based on funding availability

XIII. FUNERAL TRAVEL REIMBURSEMENT

- 13-1. *Purpose.* The purpose of the Funeral travel reimbursement program is to provide a consistent process of reimbursing enrolled members of the Nation with expenses associated with funeral travel where no other resources exist.
- 13-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 13-3. *Eligibility Criteria.* In order to be eligible for Funeral travel reimbursement, a person must provide a completed Community Support Fund application and the following:
 - (a) Proof of enrollment in the Nation;
 - (b) A copy of the obituary that lists and immediate family member;
 - (c) A copy of the applicant's valid driver's license if requesting fuel reimbursement;
 - (d) Original receipts that show payment for hotel, gas, and/or airfare turned in for reimbursement within thirty (30) days of the date of the funeral;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.

- 13-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Funeral Travel Reimbursement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Funeral Travel Reimbursement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 13-5. Airfare, train, bus, lodging and vehicle fuel is limited to a combined maximum reimbursement amount of \$500.00.
- (a) Multiple immediate family members are limited to reimbursement of \$500.00 each.
 - (b) Hotel lodging is limited to a maximum of \$75.00 per night and up to two (2) nights of stay and is only for those who reside in excess of sixty (60) miles one-way from the location of the funeral.
 - (c) All receipts must coincide with the initial funeral date.
- 13-6. Purchases not eligible for reimbursement include, but are not limited to, rental car, car repair, food, clothing, flowers, and actual funeral costs.
- 13-7. Vehicle fuel reimbursement is limited to those persons who must travel sixty (60) or more miles one-way to attend a funeral service.
- 13-8. Reimbursement of travel expenses will not be considered when travel was completed more than thirty (30) days after the verified date of the funeral.
- 13-9. CSF will not make any reservations for any form of travel. This assistance is by reimbursement only.
- 13-10. This program encourages multiple family members traveling to the same destination to carpool, and/or share hotel rooms whenever possible.
- 13-11. CSF reserves the right to discontinue assistance based on funding availability.

XIV. AUTO REPAIR ASSISTANCE

- 14-1. *Purpose.* The purpose of this program is to assist enrolled members of the Nation with financial support with expenses for vehicle repairs when the vehicle is necessary to obtain/maintain ongoing critical medical care when no other resources exist.
- 14-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 14-3. *Eligibility Criteria.* In order to be eligible for Auto Repair assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification of the critical medical illness, which shall include, the appointment that is scheduled with the date, time, and location;
 - (c) Verification of a valid driver's license;
 - (d) Verification of valid vehicle registration listed in the medical patient's name;
 - (e) Original receipts for repairs and emergency medical need if completed outside agency hours;
 - (f) Two (2) auto estimates from an Automotive Service Excellence (ASE) certified mechanic, or one (1) estimate if the vehicle is determined by the ASE mechanic as unsafe or not operable;

- (g) Verification of a medical emergency with the date of service listed if applicable;
 - (h) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 14-4. *Receipt of Required Documentation.* Upon receipt of the completed application for auto repair assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for auto repair assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 14-5. Auto repair assistance is limited to critical medical patients only and will be denied when an alternate vehicle is owned and available for use.
- 14-6. Auto repair assistance will only cover repairs that are necessary to keep the vehicle in standard operating condition. No routine maintenance or auto body repairs shall be eligible for assistance. Routine maintenance or repairs shall include, but is not limited to, oil changes, tires, batteries/fuses, lights, tune-ups, exhaust systems, flushes, and glass replacement.
- 14-7. Auto repair assistance is limited to a maximum amount of \$500.00 once every twelve (12) months.
- 14-8. Emergency repairs needed to obtain critical medical care which occurs outside of the program's business hours, may be considered on a case by case basis, in consultation with an independent ASE certified auto technician, and for services that occurred within the previous ten (10) days of the application.
- 14-9. Auto insurance premiums, auto insurance deductibles, auto rentals, auto loans, and vehicle registration are not eligible for assistance.
- 14-10. Towing assistance may be considered on a case by case basis for reimbursement up to a maximum of \$250.00 once every twelve (12) months when the vehicle is inoperable and towed to an ASE certified mechanic.
- 14-11. CSF reserves the right to discontinue assistance based on funding availability.
- 14-12. *Federal Poverty Level.* Auto Repair Assistance is only available to those households whose income is below 175% of the Federal Poverty Level

XV. APPLIANCE REPAIR AND REPLACEMENT: FURNACE AND WATER HEATER

- 15-1. *Purpose.* The purpose of Appliance Repair and Replacement assistance is to assist enrolled members of the Nation with an emergency repair or replacement of a furnace or water heater where no other resources exist.
- 15-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 15-3. This assistance is limited to furnaces and water heaters, and shall not include any other kind of appliances.
- 15-4. *Eligibility Criteria.* In order to be eligible for Appliance Repair and Replacement assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;

- (b) Two (2) cost estimates for repair of a water heater or furnace from a licensed/certified repair professional, to include the name, address, phone number, and Federal Tax Identification number of the professional;
 - (c) Verification that the applicant applied for Energy Assistance with the county agency in which the applicant resides, along with proof assistance was denied;
 - (d) Verification that the applicant is the owner of the home;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 15-5. *Receipt of Required Documentation.* Upon receipt of the completed application for appliance repair and/or replacement assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for appliance repair and/or replacement assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 15-6. When a cost estimate indicates that the repair costs will exceed the value of the appliance, replacement will be considered and approved on a case by case basis.
- 15-7. The repair and/or replacement of a water heater shall not exceed \$350.00 once every ten (10) years.
- 15-8. The repair and/or replacement of a furnace shall not exceed \$2,500.00 once per lifetime.
- 15-9. The CSF reserves the right to discontinue assistance based on funding availability.

XVI. SECURITY DEPOSIT ASSISTANCE

- 16-1. *Purpose.* The purpose of the Security Deposit assistance program is to provide enrolled members of the Nation residing in the State of Wisconsin with financial support to ensure quality of life when shelter expenses are threatened with eviction.
- 16-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 16-3. *Eligibility Criteria.* In order to be eligible for Security Deposit assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Proof of residency in the State of Wisconsin, which shall include a landlord verification form completed by the potential landlord or a current rental/lease agreement showing the amount of the security deposit;
 - (c) Verification of a current emergency situation, which shall include, but is not limited to, a pending eviction;
 - (d) Must have repaid any prior security deposit assistance received to the CSF;
 - (e) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
 - (f) Household members must demonstrate the ability to fulfill the terms of the rental agreement.
- 16-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Security Deposit assistance, the case manager shall determine if all required documentation was received from the applicant.

- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Security Deposit assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 16-5. Security Deposit assistance shall not exceed the amount of \$500.00
- 16-6. Applicants who receive assistance in paying their security deposit shall repay those funds at 100 percent (100%) of the funds received.
- (a) All repayments must be made payable to the Oneida Nation in the form of a cashier's check, or money order.
 - (b) Payments must be brought to the Economic Support Department.
 - (c) Requests for security deposit assistance with no repayment of funds for prior assistance received will result in the application being denied.
- 16-7. Security Deposit assistance is limited to one (1) person per household.
- 16-8. CSF will not pay family members or caregivers a security deposit; it must be a valid landlord.
- 16-9. CSF reserves the right to discontinue assistance based on funding availability.
- 16-10. *Federal Poverty Level.* Security Deposit is only available to those households whose income is below 175% of the Federal Poverty Level.

XVII. SOCIAL SECURITY DISABILITY DETERMINATION SHELTER ASSISTANCE

- 17-1. *Purpose.* The purpose of the Social Security Disability Determination Shelter assistance program is to assist enrolled members of the Nation with financial support for shelter expenses for those waiting an eligibility determination for the Social Security Administration for a disability finding.
- 17-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 17-3. *Eligibility Criteria.* In order to be eligible for Social Security Disability Determination Shelter assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) Verification of a pending Social Security Disability Application;
 - (c) A Landlord verification form completed by a landlord or other statement from the mortgage holder that show the monthly rent and the applicant's current status;
 - (d) Verification of the applicant's current utility bills for water, heat, and electricity, however energy assistance must be applied for before any utility bills will be considered for payment;
 - (e) Verification of mortgage disability insurance, if applicable;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 17-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Social Security Disability Determination Shelter assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.

- (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Social Security Disability Determination Shelter assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 17-5. Rent/mortgage assistance shall not exceed the amount of \$500.00 per month, not to exceed twenty-four (24) months.
- (a) Only the applicant's portion will be considered when the household consists of other adults.
 - (b) Rent/mortgage assistance will be terminated if the household fails to meet their timely portion of the scheduled payments.
 - (c) Retro-payment for back rent/mortgage assistance is not eligible for assistance.
- 17-6. Upon receipt of the verification that all other resources have been applied for, utility assistance will be considered for water, heat, and electricity.
- (a) Only the applicant's portion of the utility bill will be considered when the household consists of other adults.
 - (b) The utility bill must be in the applicant or current household member's name.
 - (c) Payment for past due amounts owed for utilities are not eligible for assistance.
- 17-7. The applicant is responsible to report to the Case Manager any change(s) in the household within ten (10) business day from the change occurring.
- (a) Examples of household change shall include, but is not limited to the following: relocation, household members, income, medical changes, submitted social security disability application, or application for or receipt of other agency assistance such as housing allowance, etc.
 - (b) Failure of the applicant to report changes in the household may result in suspension of benefits until verification of the change(s) is provided to the Case Manager, but shall not exceed thirty (30) days.
- 17-8. CSF will not pay family members or caregivers; the assistance is paid only to a valid landlord or mortgage holder.
- 17-9. CSF reserves the right to discontinue this assistance based on funding availability.
- 17-10. CSF reserves the right to discontinue this assistance in cases where fraud or illegal activity has been determined to have caused the eviction.
- 17-11. The Case Manager will provide ten (10) day written notification to an applicant whose assistance under this program is being discontinued.

XVIII. UTILITY DISCONNECTION ASSISTANCE

- 18-1. *Purpose.* The purpose of the Utility Disconnection assistance program is to assist enrolled members of the Nation with emergency financial support to ensure quality of life when home heating and electric services are threatened with disconnection.
- 18-2. Requests for assistance from the Fund shall be tied to or be a result of a catastrophic event, illness, injury or emergency event.
- 18-3. *Eligibility Criteria.* In order to be eligible for Utility Disconnection assistance, a person must provide a completed Community Support Fund application and the following:
- (a) Proof of enrollment in the Nation;
 - (b) A copy of the current disconnection notice received from the utility company for the household in which the applicant is residing;

- (c) Verification of address;
 - (d) Verification of application for Energy Assistance and crisis assistance with the county agency in which the applicant resides;
 - (e) Verification of payments made in each of the three (3) previous months of at least \$25.00 per month;
 - (f) Verification of all household income within the last thirty (30) days of submission of the application for assistance.
- 18-4. *Receipt of Required Documentation.* Upon receipt of the completed application for Utility Disconnection assistance, the case manager shall determine if all required documentation was received from the applicant.
- (a) The applicant shall provide all documentation requested by the case manager.
 - (b) The case manager shall notify the applicant in writing of any necessary documentation that was not received and is still needed.
 - (c) An application for Utility Disconnection assistance shall be valid for thirty (30) days. If the applicant fails to provide all requested documentation, the case manager shall send the applicant an expiration notice for their application.
- 18-5. Requests for assistance for the payment of utilities shall only be allowed once every two (2) years by the household.
- 18-6. Utility assistance shall not exceed the amount of \$300.00.
- 18-7. CSF reserves the right to discontinue assistance based on funding availability.
- 18-8. *Federal Poverty Level.* Security Deposit is only available to those households whose income is below 175% of the Federal Poverty Level.

End.

Adopted in whole [Insert Date of Adoption] – Effective [Insert Effective Date] – LOC Certified [Insert Date of LOC Certification]



Economic Support Services
Social Services

ONEIDA

MEMORANDUM:

To: Oneida Nation LOC
From: Delia Smith, Community Economic Support Director
Date: January 12, 2018
Subject: Community Support Fund

Tribal TANF

Child Care

Food Share

Medical Assistance

Wisconsin Job
Center

Community
Support Services
Fund

Wisconsin Home
Energy Assistance

Weatherization

Food/Shelter
Assistance
(CSBG)

Native
Employment
Works (NEW)

General Assistance

The Oneida Nation Economic Support Agency did not receive any public or written comments during the allowed time frame. Therefore, there was no need to address any responses or make changes to the proposed Community Support Rules.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 1 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor: Denise Vigue, Executive Assistant to the CFO /Finance Administration
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

Oneida Business Committee approval is required to approve all Finance Committee meeting actions as the FC is a standing committee of the OBC.

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

ONEIDA NATION

P.O. Box 365



Oneida, WI 54115

MEMORANDUM

TO: Finance Committee

CC: Business Committee

FR: Denise Vigue, Executive Assistant

DT: Jan. 16, 2018

RE: E-Poll Results of: FC Meeting Minutes of January 15, 2018

An E-Poll vote of the Finance Committee was conducted to approve the January 15, 2018 Finance Committee meeting minutes. The results of the completed E-Poll are as follows:

E-POLL RESULTS:

There was a Majority 4 YES votes from Jennifer Webster, Patrick Stensloff, Larry Barton, and Chad Fuss. to approve the Jan. 15, 2018 Finance Committee Meeting Minutes. Daniel Guzman-King and Shirley Barber did not vote.

The minutes will be placed on the next BC agenda of Jan. 24, 2018 for approval and the next Finance Committee agenda of Feb. 5, 2018 to ratify this E-Poll action.

Yaw^ko

* Per the Finance Committee By-Laws Article III-Meetings, 3-4 Quorum. Four (4) members of the Finance Committee shall constitute a quorum & 3-6 Voting. (d) The Finance Committee shall act by a majority of vote of the quorum present at any meeting.

ONEIDA FINANCE COMMITTEE**FC WORK MEETING**

January 15, 2018 – 9:00 A.M.
BC Executive Conference Room

FC REGULAR MEETING

January 15, 2018 – 10:00 A.M.
BC Executive Conference Room

REGULAR MEETING MINUTES**FC Regular Meeting:**

Patricia King, Treasurer/FC Chair

Larry Barton, CFO/FC Vice-Chair

Jennifer Webster, BC Council Member

Daniel Guzman King, BC Council Member

Chad Fuss, AGGM-Finance (Gam. Alt.)

Patrick Stensloff, Purchasing Director

Shirley Barber, FC Elder Member

Others Present: Nathan King, Kevin B. House and Denise Vigue, taking notes

I. CALL TO ORDER: The regular meeting was called to order by the FC Chair at 10:02 A.M.

II. APPROVAL OF AGENDA: JANUARY 15, 2018

Motion by Jennifer Webster to approve the FC meeting agenda of Jan. 15, 2018 with one Late ADD On under New Business #2. Seconded by Patrick Stensloff. Motion carried unanimously.

III. APPROVAL OF MINUTES: JANUARY 2, 2018 (Approved via E-Poll on 01/02/18)

Motion by Larry Barton to ratify the FC E-Poll action taken on Jan. 2, 2018 approving the Jan. 2, 2018 Finance Committee meeting minutes. Seconded by Jennifer Webster. Motion carried unanimously.

IV. TABLED BUSINESS: No Tabled Business

V. CAPITAL EXPENDITURES: None

VI. DONATIONS:

1. Donation Update Report for January 2018

Denise J. Vigue, Finance

Motion by Jennifer Webster to accept as FYI the January 2018 Monthly Update Report for the Finance Committee Donation line. Seconded by Patrick Stensloff. Motion carried unanimously.

2. Woodland Indian Arts, Inc.

Amount: \$2,500.00

Requestor: John Breuninger, WIA Board member

Motion by Jennifer Webster to approve from the Finance Committee Donation Line, \$2,500.00 for a donation to the 2018 Woodland Indian Arts & Market in June. Seconded by Daniel Guzman King. Motion carried unanimously.

VII. NEW BUSINESS:

- 1. FY18 Blanket PO- The Karma Group** Amount: \$225,000.00
Nathan King, Legislative Affairs & Communications

Nathan King was present to discuss this three year contract for the Oneida branding initiatives; utilizing same vendor as they are already familiar with first phases of initiatives, cost is \$75,000 per year for three years; discussed components of contract with specific changes to signage of the Packer Gate, LPGA, and HR initiatives to obtain qualified applicants with an easier online application process. It was suggested a possible training component of staff working with this group could be included as well as bringing updates back on a periodic basis.

Motion by Larry Barton to approve the three year contract for the Karma Group in the amount of \$225,000.00 with an ongoing assessment brought back to the Finance Committee at a future date. Seconded by Daniel Guzman King. Motion carried unanimously.

- 2. LATE ADD ON: OTIE Modification Project #17-009** Amount: \$1,697.11
Paul Witek, Engineering Dept.

Kevin House was present and provided handouts to discuss this contract modification for the Oakwood Count Reconstruction Project; increase is for smoke restoration, updates to existing water and sewer, and changes to concrete to manage water run-off; costs to come from savings from other areas as identified. There was a discussion of concerns with total costs, bidding out for work and if there is written approval from HUD of the modifications.

Motion by Jennifer Webster to approve the OTIE Modification for Project #17-009 in the amount of \$1,697.11. Seconded by Larry Barton. Motion carried unanimously.

Motion by Larry Barton for Engineering to provide written confirmation of HUD's approval of the modification of this project noting that is in accordance with the procurement standards and follow up procedures. Seconded by Jennifer Webster. Motion carried unanimously.

VIII. EXECUTIVE SESSION: None

IX. FOLLOW UP: None

X. FYI and/or Thank You:

- 1. TKYOU: Oneida Relay-for-Life**
Paula King Dessart, ORFL Co-Chair

Motion by Jennifer Webster to accept as FYI the Thank You Letter from the Oneida Relay-for-Life Committee. Seconded by Patrick Stensloff. Motion carried unanimously.

2. FYI: Intergovernmental Agreement – Outagamie County

Nathan King, Legislative Affairs & Communications

Motion by Jennifer Webster to accept as FYI the Intergovernmental Agreement between the Oneida Nation and Outagamie County for services the county provides. Seconded by Larry Barton. Motion carried unanimously.

- XI. ADJOURN:** Motion by Daniel Guzman King to adjourn. Seconded by Chad Fuss. Motion carried unanimously. Time: 11:00 A.M.

Minutes taken & transcribed by:

Denise Vigue, Executive Assistant to the CFO
& Finance Committee Contact/Recording Secretary

Finance Committee-E-Poll Minutes Approval Date: January 16, 2018

Oneida Business Committee's FC Minutes Approval Date: _____

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 1 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Motion to accept the November 2, 2017 Community Development Planning Committee (CDPC) meeting minutes.

3. Supporting Materials

Report Resolution Contract

Other:

1. 3.

2. 4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Cathy Bachhuber, Executive Assistant
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Community Development Planning Committee

CDPC Meeting Minutes- Revised

9:00am – 12:00pm Thursday, November 2, 2017
Business Committee Conference Room

**I. Call to Order and Roll Call**P Brandon Stevens, CDPC MemberA Daniel Guzman King, CDPC Member
(travel to Washington, D.C.)P Patricia King, CDPC MemberA Jennifer Webster, CDPC Member
(travel to Washington, D.C.)P Kirby Metoxen, CDPC MemberP Ernest Stevens III, CDPC Member

A = Absent

P = Present

Others present: Councilman David Jordan, Joanie Buckley, Lotni Richard Hill, Cathy Bachhuber, Jo Ann House, Paul Witek, Sue Doxtater, Troy Parr, Stacie Danforth, Jeff Witte, Gene Schubert, Scott Denny, Rae Skenandore, Brenda Skenandore, Karen Smith, Jacque Boyle, Scott Cottrell, Larry Barton, Dennis Johnson, Brian Doxtator, RC Metoxen, James Petitjean, Nik Rademacher (IHS), Brian Breuer (IHS), Kevin Staus (IHS), Louis Cottrell and Jessica Wallenfang (minute-taker)

II. Adopt the Agenda

This is the first CDPC meeting of this new term.

Motion to adopt agenda by Trish King, seconded by Ernest Stevens III. Motion carried unanimously.

III. Meeting Minutes

The CDPC Work Session scheduled for October 30, 2017, was canceled due to no quorum.

Motion to accept meeting minutes by Trish King, seconded by Ernest Stevens Motion carried unanimously.

IV. New Business**a. CDPC Officer Selection**

- i. Chair – Motion by Trish King to nominate Ernest Stevens III for Chairman of CDPC. Seconded by Kirby Metoxen. Ernest accepts. Motion carried unanimously.
- ii. Vice Chair – Motion by Ernest Stevens III to nominate Daniel Guzman-King for Vice Chairman of CDPC. Seconded by Trish King. Motion carried unanimously.

b. CDPC Charter Review

Recommended Changes: Committee Scope #3 – Change to reflect Budget Management Control Law and anyplace it says Four Strategic Directions or goals. Names in the Team Members section needs to be changed. Add By-laws to charter.

Motion by Brandon Stevens to submit all recommended changes to the CDPC Chairman's office to revise and bring final draft back to the December CDPC meeting. Seconded by Trish King. Motion carried unanimously.

c. Community Wells Project – Paul Witek

Deferred until IHS officials arrived.

CONFIDENTIAL DISCUSSION – Discussion and motion submitted to appropriate individuals for follow up.

d. Upper Oneida Presentation – Oneida Planning Department

Input was gathered from the community for future development of Oneida. Tribal members want to rent space in that location for their small businesses. Discussed ideas and opportunities for tourism and culture with a sensitive balance. Discussed the availability and approval needed for access to the set aside for the block grant. Requested support to have access to funds for 2019 to move it to CIP to stay with the project. After the Transportation consultation, a written recommendation will be sent to the CDPC after the week of November 6th. Discussed challenges and goals for the property. For next summer, the goal is to have the site walkable with more space utilized, with activities and programming. Discussed the location, advertising and branding of the Farmer's Market. Support requested for construction and implementation of the project.

Motion by Brandon Stevens to accept the information in the presentation as an FYI, seconded by Kirby Metoxen. Motion carried unanimously.

e. Hemp Roundtable for December CDPC Meeting – Councilman Daniel Guzman King

A meeting is being set up with the Chairman and the Chairman of the Menominee Nation. Communication and educating the community about hemp versus marijuana is needed. Experts can help us decide what products and where we want to be in the chain of the harvesting process. Requested previous plans worked to be sent to CDPC for discussion.

Three (3) Sub-committees: Legislative – Nathan King; Administrative - Troy Parr and Joanie Buckley; Partnerships – Brandon Stevens and Chairman Tehassi Hill

Motion by Brandon Stevens to establish three sub-committees to bring back a draft strategy by the December CDPC meeting. Seconded by Kirby Metoxen. Motion carried unanimously.

V. Follow Ups/Directives

a. Cultural Heritage Site Plan – Troy Parr, George Skenandore, Joanie Buckley and Pat Pelky

June 8, 2017 CDPC Meeting excerpt - Motion was made by Jenny Webster to accept this update on the Cultural Heritage Site Plan as an fyi, and that this item will carry through to the new administration for the next term, seconded by David Jordan. Motion carried unanimously.

Discussed having the team work with the language staff to infuse some culture and language into renovations. Discussed possible funding options for the project. Discussed recommendations for the building and lake and looking at the boundaries and lease.

Motion by Brandon Stevens to approve the Cultural Heritage Site Plan/Project Report and to have the team provide Quarterly Reports to CDPC on the Cultural Heritage Site Plan/Project with updates, action taken and progress in the report. Seconded by Kirby Metoxen. Motion carried unanimously.

b. Kitchen Incubator Project (Oneida Food Center)/NWTC Tour – Joanie Buckley

June 8, 2017 CDPC Meeting excerpt – Motion has been made by David Jordan to accept the update as an fyi, and to schedule a tour in late September with the CDPC, seconded by Jenny Webster. Motion carried unanimously.

A change to the timeline for the RFP will be needed. Information on the NWTC site tour will be sent.

Motion by Brandon Stevens to accept the Kitchen Incubator Project report, seconded by Kirby Metoxen. Motion carried unanimously.

c. Indian Community Block Grant Update – Jeff Witte

June 8, 2017 CDPC Meeting excerpt - The former BP site is currently waiting to see if it will be awarded the ICDBG (Indian Community Development Block Grant). This grant is to be used for the infrastructure for this site and a community center.

Motion by Kirby Metoxen to accept the Indian Community Block Grant update report noting the grant will be applied for next year, seconded by Brandon Stevens. Motion carried unanimously.

VI. Reports**a. Economic Development & Diversification Set Aside per BC Resolution 09-28-16-B – Chief Counsel Jo Ann House**

Motion by Brandon Stevens to forward both VI.a. Economic Development & Diversification and VI.b. Budget Management & Control Act CIP to a CDPC work meeting, seconded by Trish King. Motion carried unanimously.

b. Budget Management & Control Act CIP – Trish King & Troy Parr

Motion by Brandon Stevens to forward both VI.a. Economic Development & Diversification and VI.b. Budget Management & Control Act CIP to a CDPC work meeting, seconded by Trish King. Motion carried unanimously.

VII. Adjourn

Motion by Kirby Metoxen to adjourn at 11:56 a.m., seconded by Jenny Webster. Motion carried unanimously.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Delete the item from the agenda noting the Oneida Trust Enrollment Committee are addressing the questions and concerns and an updated draft will be submitted at a later date.

3. Supporting Materials

Report Resolution Contract

Other:

- 1.
- 2.
- 3.
- 4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Lisa Liggins, Info. Mgmt. Spec./BC Support Office
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

**Trust Enrollment Department**PO Box 365, Oneida WI 54155
(920) 869-6200 * 1-800-571-9902

Fax: (920) 869-2995

TrustEnrollments@oneidanation.org<https://oneida-nsn.gov/resources/enrollments/>**MEMORANDUM**

TO: Lisa Summers, Tribal Secretary
FROM: Susan White, Trust Enrollment Director *S. White*
DATE: January 17, 2018
RE: 2018 Amended OTEC/OBC Memorandum of Agreement

At the Oneida Business Committee's regular meeting on January 10, 2018, the draft Memorandum of Agreement (MOA) between the Oneida Trust Enrollment Committee (OTEC) and the Oneida Business Committee (OBC) was addressed as an agenda item. Questions were raised as to the twelfth "Whereas clause" as it pertained to the review and approval of the revenue allocation plan. The MOA was deferred until the next regular Business Committee meeting.

I am requesting that the item be removed from the agenda so that the questions and concerns may be addressed at the next OTEC regular meeting. An updated draft of the MOA will then be placed back on the agenda once any necessary revisions have been made. The Law Office memorandum which provided clarification on the responsibilities and authorities of the OTEC regarding the review and approval of the revenue allocation plan will be attached to the updated draft.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve request to post one (1) vacancy, for the remainder of a term which will end 7/31/2019
.

3. Supporting Materials

Report Resolution Contract

Other:

1. <input type="text" value="Election Board Memo"/>	3. <input type="text"/>
2. <input type="text"/>	4. <input type="text"/>

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Brooke Doxtator, BCC Supervisor
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

On January 10, 2018 the Business Committee took action to terminate an appointment on the Oneida Election Board.

On January 11, 2018 the Election Board submitted a request to post this vacancy.

Per the Election Law: 2.4-5. Vacancies. Any vacancy in an unexpired term shall be filled by appointment by the Business Committee for the balance of the unexpired term. The filling of a vacancy may be timed to correspond with the pre-election activities and the needs of the Election Board

1) Save a copy of this form for your records.

2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

MEMORANDUM

To: Brooke Doxtator – Board, Committee, and Commission Supervisor

From: Racquel Hill, Election Board Chairperson *RH*

Subject: Request to Post for One (1) Appointment

Date: January 11, 2018

On behalf of the Oneida Election Board, per formal action by the Board at a special meeting of January 10, 2018, I hereby request to post for one (1) vacancy appointment as follow-up to the action taken by the Business Committee to terminate an appointment as of January 10, 2018. The length of term for the appointment will be until August, 2019.

Per the Election Law: 2.4-5. Vacancies. Any vacancy in an unexpired term shall be filled by appointment by the Business Committee for the balance of the unexpired term. The filling of a vacancy may be timed to correspond with the pre-election activities and the needs of the Election Board.

Please begin the posting process to fill this vacancy. If you have any questions or concerns regarding this request, let me know.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Motion to accept the Tribal Action Plan (TAP) Communication Overview and Strategy as an FYI.

3. Supporting Materials

Report Resolution Contract

Other:

1. 3.

2. 4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Cathy Bachhuber, Executive Assistant
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

The TAP Communication Overview and Strategy is a component of the goals, objectives, and outcomes identified in the Oneida Nation Tribal Action Plan (TAP).

The Tribal Coordinating Committee (TCC) is requesting the BC review the communications strategy and accept as an FYI.

1) Save a copy of this form for your records.

2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidation.org

Tribal Action Plan Communication Overview and Strategy

TAP Overview

The Tribal Action Plan (TAP) is part of a collaboration of efforts by the Department of Health and Human Services (DHHS), the Secretary of the Interior and the Attorney General to address Alcohol and Substance Abuse Prevention and treatment in Native American Communities. These Collaborations are mandated through the Tribal Law and Order Act of 2010 (TLOA Public Law 111-211

Through these collaborations, the following Federal entities have been mandated to coordinate and provide resources to assist Indian tribes in TAP implementation for the prevention, intervention and treatment of alcohol and substance abuse: Substance Abuse and Mental Health Services Administration (SAMHSA), Bureau of Indian Affairs (BIA), Bureau of Indian Education (BIE), and the Department of Justice (DOJ).

On May 10, 2017, the Oneida Business Committee passed resolution #05-10-17-C declaring that the Oneida Nation has prioritized alcoholism and substance abuse prevention and treatment as a primary issue and has directed that a comprehensive strategy, in compliance with the anti-drug abuse act of 1986, P.L. 99-5-70, be developed to address the needs of Tribal members and other community members within the Oneida Nation Reservation. The resolution also establishes a Tribal Coordinating Committee (TCC) to drive the TAP process and implementation. The TCC consists of representatives from numerous tribal departments as well as community members.

The TAP is a long term strategic plan with several phases. The plan will constantly change based on community's needs and level of readiness. As a part of TAP development, communication becomes critical. This communication plan is intended to be a guideline for how and when we communicate, who communicates it, and what is communicated. Our communication plan is aligned with the TAP mission, vision and Oneida Nation core values.

Communication Strategy

Who is our audience:

The audience is our community members, employees, surrounding communities, other Tribal Nations, other governments and the general public.

Who delivers the message and how:

The Business Committee and the TCC has the responsibility to deliver a clear and consistent message to our audience. The role of the BC is to be leaders who establish laws and policies, and assure they are communicated and enforced. The role of the TCC is to ensure TAP implementation and updates are constantly communicated. The message is developed to include an overview of the initiative to address all the issues of substance abuse on the Oneida Reservation, the impact of substance abuse, education of our community, prevention from the earliest of our children to intervention and treatment where possible.

Communication Strategies

We will be using the following variety of communication outlets to provide updates on the progress of the TAP: Kalihwisaks, direct mailing, social media, website, videos, and community meetings. Updates may include awareness building, photos, family and community events, training opportunities, TAP achievements, joint ventures, and/or future plans, among others. The variety of communication outlets are geared toward reaching all ages; youth-elders. Below is an outline of educational topics we plan to cover to increase awareness:

- 1) How opiates affect the user, their children, family, and our community
 - a) When a baby is born addicted, how do you cope with his addiction and how many are abandoned or abused?
 - b) Testimonials
 - i) Create a flow chart of what happens from the time you take that first hit to the day you end up in the morgue
- 2) Detailed explanation of TAP
 - a) Obama TLOA
 - b) How TAP Guideline was created
 - c) Each step within TAP Guideline
 - d) Explain resolution
 - e) Randy/Bob Core Values
 - f) Explain vision, mission, value statement in-depth
- 3) Drug identification and paraphernalia
 - a) Symptoms of opiates/meth
 - b) Professional liars
 - c) Stats of overdoses
 - d) Users stats in the area
- 4) Neighborhood Watch Tips
 - a) See Something, Say Something
 - b) Securing Home and Automobile
 - c) Surveillance
 - d) What Law Enforcement Needs for Evidence
- 5) Develop a resource library
 - a) Create the FAQ's
 - b) Create flow chart for intervention, how does someone go about getting another into treatment.
 - c) Fact based materials development
- 6) Develop a comprehensive presentation that is mandatory for all employees, develop promotional items for community wide distribution, and create magnets for your fridge with phone numbers and other promotional items for distribution.
 - a) BC and Senior Management updates, achievements, contribution, and support.

Who implements the communication plan?

- The Tribal Coordinated Committee

Communication Tasks and Timeframe Guideline is to be developed by the next QOL meeting.

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve 2018 special election date of July 7, 2018

3. Supporting Materials

Report Resolution Contract

Other:

1. <input type="text" value="Memo"/>	3. <input type="text"/>
2. <input type="text"/>	4. <input type="text"/>

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Racquel Hill, Election Board Chairperson
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.



MEMORANDUM

To: Business Committee

From: Racquel Hill, Election Board Chairperson *RH*

Date: January 11, 2018

Subject: **Recommended Date for 2018 Special Election**

The Oneida Election Law 2.9-1 states: *Special Elections shall be set in accordance With 2.12-6; whereas, 2.12-6 states: Dates of all Special Elections shall be set, as provided for in this law, by the Business Committee as recommended by the Election Board or as ordered by the Judiciary in connection with an election challenge.*

On behalf of the Election Board, the following schedule is hereby recommended for the 2018 Special Election:

DAY	DATE	TIME	PURPOSE
Saturday	May 5, 2018	1:00 p.m.	Caucus
Friday	May 11, 2018	4:30 p.m.	Application Deadline
Saturday	July 7, 2018	7 am – 7 pm	Special Election
Wednesday	August 8, 2018	9:00 am	BC Mtg to Ratify Results

Yaw^ko.

From: [Marc Philpart](#)
To: [Marc Philpart](#)
Cc: [Marc Philpart](#); [Marc Bacani](#)
Subject: INVITATION: Join the Alliance for Boys and Men of Color!
Date: Wednesday, January 10, 2018 6:04:49 PM

Dear Leaders,

Happy New Year! Because of your outstanding leadership and commitment to vulnerable communities, we're inviting you to join the Alliance for Boys and Men of Color (The Alliance).

The Alliance is a grassroots network of leaders forcefully advocating for policy and systems change at the local, state, and national levels. The work of leaders within the Alliance is centered on building youth and community power to drive change in partnership with a wide variety of leaders in the private, philanthropic, and public sectors.

If you're interested in joining the Alliance and learning more -- we have two opportunities for you to get engaged in 2018.

First -- join us for an orientation call where we'll share more about the Alliance and how we might be able to help you further your work. Use the following link to sign up for an orientation call scheduled throughout January and February: [Alliance for Boys and Men of Color Orientation](#).

Second -- confirm your spot as part of an Alliance for Boys and Men of Color delegation at the Equity Summit in Chicago from April 11 - 13. We will host a special gathering of the national network on the afternoon of April 12th from 4:30 PM - 7:30 PM.

Please register ASAP to confirm your space! Use the following link for a discounted price as part of this delegation: [Alliance for Boys and Men of Color Delegation](#) (be sure to select the \$225 category). **The deadline for the discounted price is January 31st**. Registration is filling up quickly and is extremely limited. We expect that there will not be any more availability after January 31st. Don't miss out!

Additionally, if you have potential delegates who are 24 years of age or younger, I recommend for them to register now to take advantage of the \$100 registration fee, as it is capped at 250 participants (with less than 150 spots remaining).

We look forward to working with you and supporting your bold and audacious demand for a more just society.

Should you have any questions, please don't hesitate to contact me and my colleague Marc Bacani (copied).

In community,

Marc

Marc Philpart

Pronouns: He / Him / His

Senior Director
PolicyLink

O: 510-663-4382

C: 206-890-4008

marc@policylink.org

This is our moment for equity: [#ClaimTheTorch!](https://twitter.com/ClaimTheTorch) <http://plcyk.org/claimthetorch>

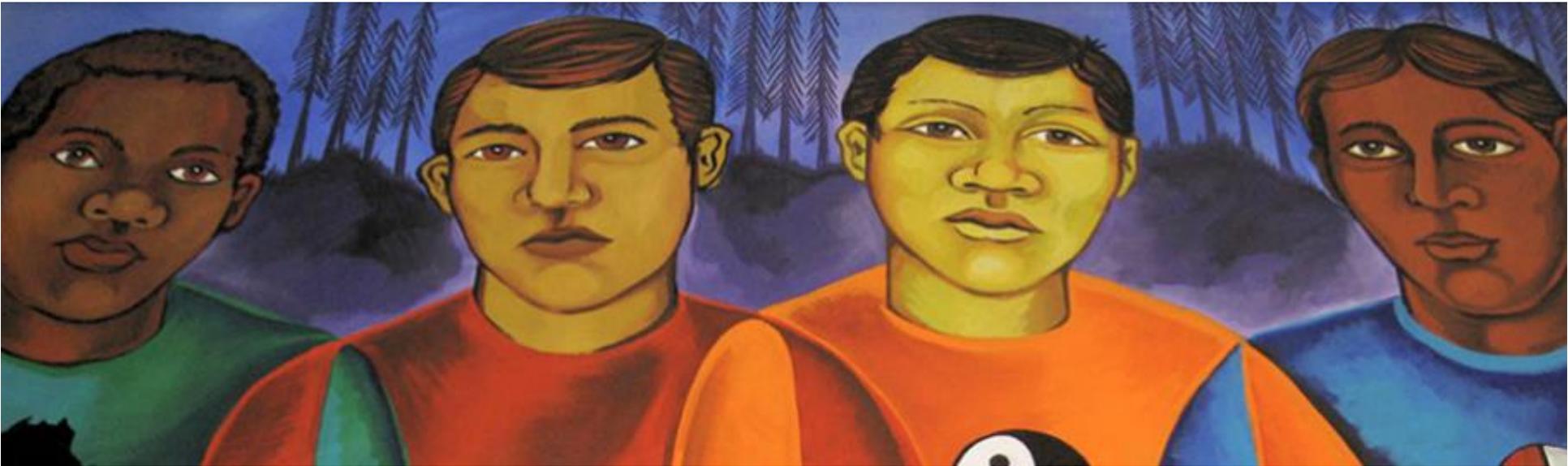


ALLIANCE FOR
Boys and Men of Color

Table of Contents

The Alliance for Boys and Men of Color

1. Background on the Alliance
2. PolicyLink Support
3. Equity Summit



Background

About the Alliance

The Alliance is a coalition of the willing, welcoming partners who are committed to adopting a shared message and strategy to advance the Alliance's policy objectives and strategies in local communities and through state policy. Alliance partners contribute to and benefit from access to a diverse community of practice and leaders with decades of successful work engaging and empowering BMoC.

Participation is open to youth and community leaders, program practitioners, researchers and policy advocates, communications and media professionals, and system leaders. Alliance partners welcome collaboration with local and state policymakers.

Declaration of Rights

We want...

1. Right to Childhood
2. Right to Family
3. Right to a Home
4. Right to Health, Wellness, and Healing
5. Right to a Healthy, Sustainable Environment
6. Right to be Free from Fear and Violence
7. Right to an Education
8. Right to Full Participation in the Economy
9. Right to Self Determination
10. Right to Love and Connection
11. Right to Our Culture and Ancestry
12. Right to Forgiveness and Redemption
13. Right to be Represented in Our Full Humanity
14. Right to Age with Dignity
15. Right to Protest and Dissent

Alliance for Boys and Men of Color Logic Model

SLIDE TEMPLATE D

CHANGE AGENTS

STRATEGIES ADVANCING THE GOALS

Youth Leaders

Investors

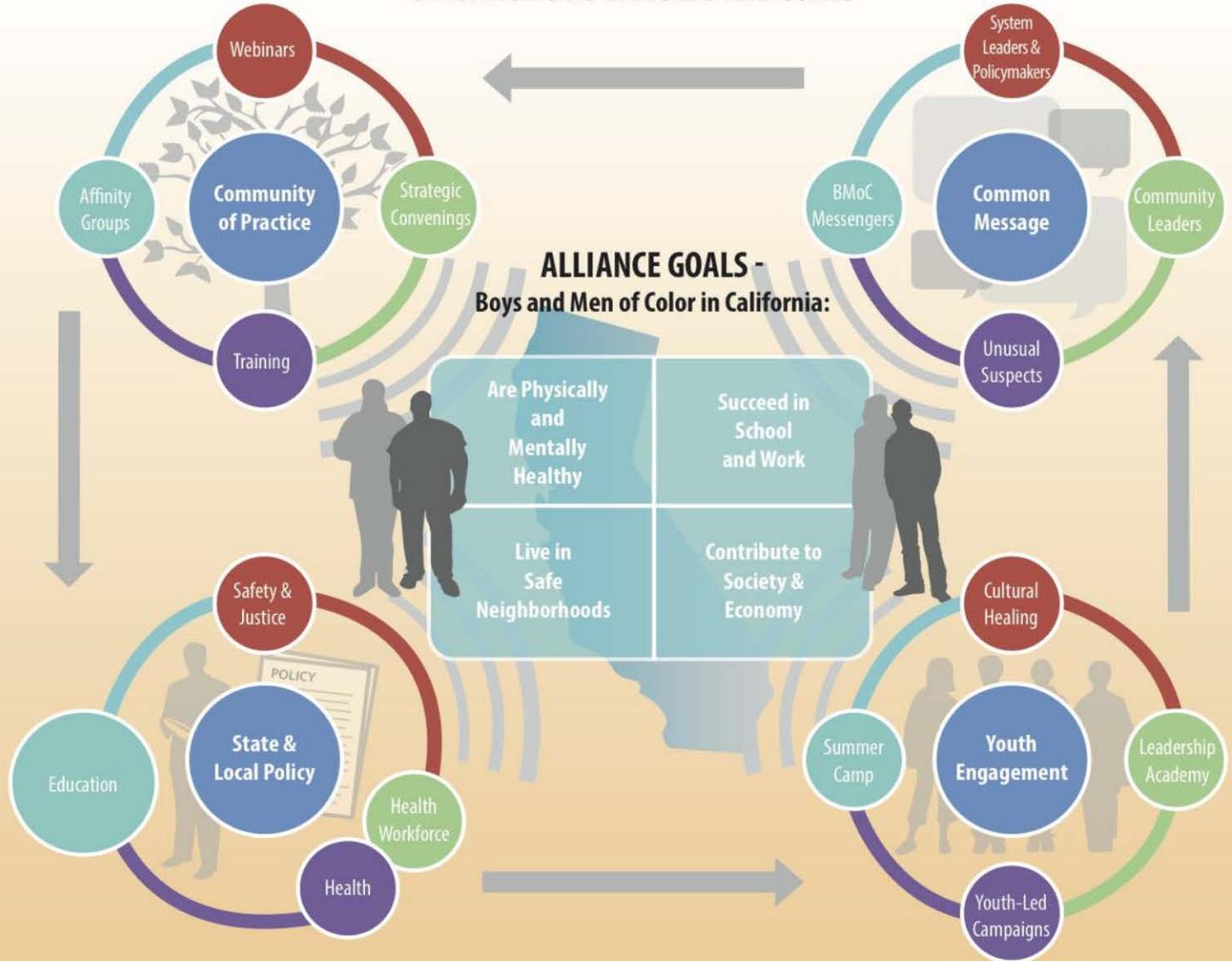
State & Local Coalitions

Research Partners

Systems Leaders

Expert Practitioners

Policymakers



Local Networks in California

- Coachella
- East Salinas
- Fresno
- Long Beach
- Los Angeles
- Oakland
- Richmond
- Riverside
- Sacramento
- San Bernardino
- San Diego
- San Jose
- Santa Ana
- Stockton

With more coming soon!

- Bakersfield
- Del Norte
- Santa Cruz
- San Francisco
- Santa Rosa
- Oxnard

ALABAMA (Birmingham)
ARKANSAS (Little Rock)
ARIZONA (Phoenix, Tucson)
CALIFORNIA (statewide)
COLORADO (Denver, Aurora)
FLORIDA (Jacksonville, Miami, Orlando)
GEORGIA (Atlanta)
ILLINOIS (Chicago)
KENTUCKY (Louisville, Lexington)
LOUISIANA (New Orleans, Baton Rouge)
MARYLAND (Baltimore)
MICHIGAN (Detroit)
MINNESOTA (Minneapolis, St. Paul)
MISSISSIPPI (Jackson)
MISSOURI (St. Louis, Kansas City)
NEW JERSEY (Newark)
NEW MEXICO (Albuquerque)
NEW YORK (Buffalo, New York City)
NORTH CAROLINA (Triangle, Triad)
PENNSYLVANIA (Philadelphia, Pittsburgh)
SOUTH DAKOTA (Pine Ridge)
TENNESSEE (Memphis)
TEXAS (Dallas, Austin, San Antonio, Houston)
WASHINGTON (Seattle, Tacoma)
WISCONSIN (Milwaukee, Madison)

RECRUITING
LEADERS +
BUILDING
NETWORKS
OUTSIDE OF
CALIFORNIA

2017 CA Legislative Victories

- The Alliance aims to secure and implement policies that achieve our policy objectives through statewide legislation, administrative procedures, and the budgetary process to improve the lives of California's boys and young men of color.
- From 2012 to 2017, 96 bills prioritized by the Alliance were signed by the Governor in California. Below are some of the bills signed into law in 2017:
 - **AB 90 (Weber):** CalGang Database Moratorium and Due Process Protections.
 - **AB 1008 (McCarty):** Ban the Box.
 - **SB 190 (Mitchell):** Ends Juvenile Administrative Fees.

Catalyst Fund

- **The mission of the Alliance for Boys and Men of Color Catalyst Fund** is to support community leadership and engagement in the activities of the Alliance for Boys and Men of Color. The Fund will provide core and campaign support to participating organizations throughout the country. The resources raised will support national scale-up, replication, and expansion of the Alliance's work in California.
- **Catalyst Fund Activities in 2018:**
 1. Establish the Catalyst Fund's Community Advisory Committee
 2. Approve Operating Agreements and Procedures for Grant making and Fund Management
 3. Launch Initial Investments in Community Organizations
 4. Promote the Fund and Field Interest from Additional Investors

The Next Evolution of the Alliance

- **Expand the footprint of the coalition to other states** and replicate the success in California.
- Become a tighter **coalition** focused on **specific campaigns to move a broader shared policy agenda** and to **build movement infrastructure** in communities of color
- Ensure **implementation and accountability** of new laws at the state **and local level** combined with **strategic support for local and regional campaigns**
- Maintain a mix of groups but adopt a governance structure that **prioritizes and centers those member organizations who are accountable to a grassroots base**
- Retain race and gender specificity but move **towards tighter alliances with coalitions working for girls and women of color (GWOC) and Queer/Trans youth of color.**
- Develop a **shared root cause analysis, operating principles, goals, and a policy platform.** Use this framework to set **multi-year strategic goals**, this then guides support for campaigns and bills.
- Raise **funds that go specifically to grassroots orgs** who are leading coalitions initially incubated by the Alliance; Funds live at Community Partners; Decisions about re-granting made by board representing philanthropic and community membership.

PolicyLink Support

Activities and Performance Measures

Major Activities	Purpose	Performance Measures
Guiding Vision, Strategy and Reflecting a BMoC Point of View	For a collective effort to be successful it requires a shared set of goals and vision for the future, based on the needs and perspectives of local BMoC.	<ul style="list-style-type: none"> ▪ Partners accurately describe the common agenda ▪ Partners publicly discuss / advocate for common agenda goals ▪ Partners' individual work is increasingly aligned with common agenda ▪ Advisory committee members and key leaders increasingly look to backbone organization for strategic guidance and leadership
Supporting Aligned Activities to Achieve Population Level Impact for BMoC	An effective collective effort requires all partners to have clear, accountable roles and specific methods for collaborating, resource sharing, and supporting each other that is enhanced by deepening relationships and trust over time.	<ul style="list-style-type: none"> ▪ Partners articulate their role in the initiative ▪ Relevant stakeholders from multiple sectors are engaged in the initiative ▪ Partners communicate and coordinate efforts regularly, with, and independently of backbone ▪ Partners report increasing levels of trust with one another ▪ Partners increase scope / type of collaborative work ▪ Partners improve quality of their work ▪ Partners improve efficiency of their work ▪ Partners feel supported and recognized in their work
Establishing Shared Measurement Practices Using Data to Identify Challenges and Opportunities Facing BMoC	A collective effort calls for partners to have a shared response to the question: "how will we measure our progress for each goal, and ultimate success?" Partners need to access, understand, and value the data sources that will answer that question.	<ul style="list-style-type: none"> ▪ Shared data system is in development ▪ Partners understand the value of shared data ▪ Partners have robust / shared data capacity ▪ Partners make decisions based on data ▪ Partners utilize data in a meaningful way
Building Public Will that Includes the Aspirations of BMoC, their Families, and Communities	A successful population impact effort requires influencing the hearts and minds of people including policymakers and community members, to see the inherent value of the focus population and support solutions to challenges they face.	<ul style="list-style-type: none"> ▪ Youth, community members, elected officials and systems leaders are increasingly aware of the issues ▪ Youth, community members, elected officials and systems leaders express support for the priorities articulated ▪ Building power is an explicit focus for youth and community leaders ▪ Youth and community members feel empowered to engage in the issues ▪ Youth, community members, elected officials and systems leaders increasingly take action
Advancing Policy that Reflects a BMoC Lens	To impact population-level results at full scale it requires shifts in public policies and public systems that address barriers and improve opportunities for people to thrive.	<ul style="list-style-type: none"> ▪ Target audience (e.g., influencers and policymakers) is increasingly aware and engaged in advancing solutions ▪ Target audience expresses public support for boys and men of color ▪ Target audiences advocate for changes to the system aligned with initiative goals ▪ Policy and systems changes are increasingly aligned with the BMoC policy platform
Mobilizing Funding to Support a BMoC Policy and Systems Change Agenda	In a successful collective effort, partners need to be able to secure sufficient funds for the partnership to continue its activities, evaluate its work, and deepen its expertise and influence.	<ul style="list-style-type: none"> ▪ Partners accurately describe the common agenda ▪ Partners publicly discuss / advocate for common agenda goals ▪ Partners' individual work is increasingly aligned with common agenda ▪ Advisory committee members and key leaders increasingly look to backbone organization for strategic guidance and leadership

Examples of Support

Major Activities	Frequently Asked Questions
Guiding Vision, Strategy and Reflecting a BMoC Point of View	How do I develop and advance a policy agenda that impacts boys and men of color?
Supporting Aligned Activities to Achieve Population Level Impact for BMoC	How do I identify and leverage different partner's capacity to drive change?
Establishing Shared Measurement Practices Using Data to Identify Challenges and Opportunities Facing BMoC	How do I develop a data system with results and indicators to track progress on outcomes for boys and men of color?
Building Public Will that Includes the Aspirations of BMoC, their Families, and Communities	How do I develop an organizing and advocacy strategy to uplift the issues facing boys and men of color?
Advancing Policy that Reflects a BMoC Lens	How do I cultivate state legislators as champions?
Mobilizing Funding to Support a BMoC Policy and Systems Change Agenda	How can we ensure that partners delivering on the work are getting resources?

Equity Summit

Our Power. Our Future. Our Nation.



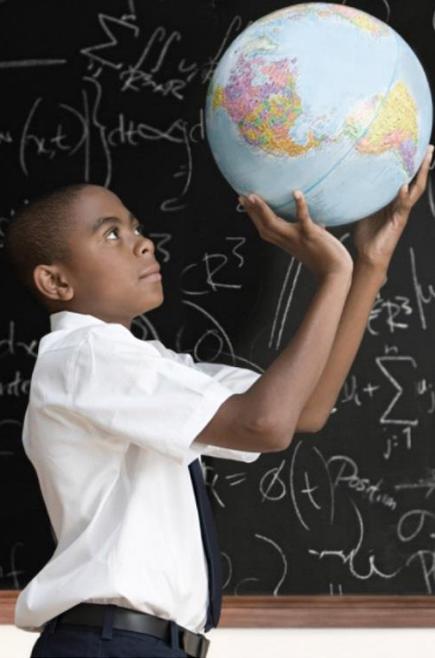
PolicyLink ★ Equity Summit 2018 ★ April 11-13, Chicago ★ Our Power. Our Future. Our Nation.

- April 11th - 13th in Chicago, IL
- We will host a special gathering of the national network at the Equity Summit on April 12th from 4:30-7:30 PM.

Register Now

- Registration will close next week, register now to confirm your spot!
- Use the following link for a discounted price as part of this delegation: [Alliance for Boys and Men of Color Delegation](#) (be sure to select the \$225 category).
- If you have potential delegates who are 24 years of age or younger, urge them to register now to take advantage of the \$100 registration fee, as it is capped at 250 participants (with less than 125 spots remaining).

Questions about the Alliance for Boys and Men of Color?



Contact:

Marc Philpart, Principal Coordinator

510.663.4382

marc@policylink.org

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 1 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter:

Your Name, Title / Dept. or Tribal Member

Additional Requestor:

Name, Title / Dept.

Additional Requestor:

Name, Title / Dept.

Oneida Comprehensive Health Division
 Oneida Community Health Center
 Behavioral Health Services
 Anna John Resident Centered Care Community
 Employee Health Nursing



**ONEIDA COMPREHENSIVE HEALTH DIVISION
 DR. RAVINDER VIR MEDICAL DIRECTOR
 DEBRA DANFORTH, RN, BSN, OPERATIONS DIRECTOR
 DIVISION UPDATE
 Quarter 1 - FY 2018
 October 2017- December, 2017**



Executive Management Team:

Division Dir-Operations, Debra Danforth RN, BSN,	869-4807
Division Dir-Medical, Ravinder Vir, MD,	869-4808
Asst. Operations Director, Vacant,	869-4809
Executive Assistant, Mercie Danforth	869-4810
Business Operations Director, Jeff Carlson,	869-4805
Director of Nursing-OCHC, Sandra Schuyler,	869-4906
Behavioral Health Manager, Mari Kriescher,	490-3737
Employee Health Manager, Mary Cornelissen	405-4492
Public Health Officer, Eric Krawczyk,	869-4812
AJRCCC Continuum of Care Director, Dave Larson	869-2797
	869-4820

Mailing Address: P.O. Box 365, Oneida, WI 54155
<https://oneida-nsn.gov/resources/health/>

Oneida Community Health Center
 Behavioral Health Services
 Anna John Resident Centered Care Community
 Employee Health Nursing

525 Airport Rd., Oneida, WI 54155
 2640 West Point Rd., Green Bay, WI 54304
 2901 S. Overland Rd., Oneida, WI 54155
 701 Packerland Dr., Green Bay, WI 54303

Phone: (920) 869-2711 or 1-866-869-2711
 Phone: (920) 490-3790 or 1-888-490-2457
 Phone: (920) 869-2797
 Phone: (920) 405-4492

Fax: (920) 869-1780
 Fax: (920) 490-3883
 Fax: (920) 869-3238
 Fax: (920) 405-4494

THE ONEIDA COMPREHENSIVE HEALTH DIVISION IS COMPRISED OF:

Oneida Community Health Center (OCHC)
Anna John Resident Centered Care Community (AJRCCC)
Oneida Behavioral Health (OBH)
Employee Health Services (EHS)

VISION:

A progressive sustainable health system that promotes Tsi?niyukwaliho t^ (Our Ways).

MISSION:

We provide the highest quality, holistic health care to ensure the wellness of OUR Oneida Community.

VALUES:

Responsive Leadership: *Consistent attentive listening, honesty, doing the right thing, timely decision making and seeing issues resolved to completion.*

Culturally Sensitive: *Meeting people where they are and being sensitive to their unique needs as human beings within the Oneida Community.*

Continuous Improvement: *Striving to achieve a higher quality of health care and a higher performing workforce through our Commitment to Learning and Growth.*

Communication: *Fostering honest, respectful and timely communication with the appropriate level of transparency.*

Safety: *Striving for an environment that provides the highest level of physical and emotional safety for our patients, employees and community in an environment free of fear, retaliation and repercussion.*

Respect: *Create a welcoming and compassionate environment focused on the individual needs of OUR community and Health Care Team*

OUR 2015-2018 STRATEGIC PLAN IS FOCUSED IN FOUR SPECIFIC AREAS:

1. Improve Population Health Management
2. Continuous Quality Improvement
3. Optimize Technology
4. Enhance Our Workforce

OUR 2015-2018 INITIATIVES THAT WILL BE FOCUSED TO ACHIEVE OUR STRATEGIES:

1. **Accreditation:** The Comprehensive Health Division will validate and assure the community the delivery of the highest quality health care services in achieving AAAHC (Accreditation Association for Ambulatory Health Care) accreditation by December 2017 through team work, leadership and commitment. By accomplishing accreditation we will provide staff a sense of accomplishment, increase quality of care, enhance public validation for community/customer satisfaction, improve recruitment/retention of providers, and increase the probability of outside funding.
2. **Advancing Technology:** Utilize innovative State of the Art technology and data analytics to continuously improve wellness and health outcomes.
3. **Optimize staffing processes:** To work collaboratively with HRD to enhance the Division processes for recruitment, hiring, and retention and provide recommendation (s) for change to the Oneida Business Committee by September 30, 2017-**GTC has placed the Employment Law on hold.** By enhancing the recruitment, hiring, and retention processes we will have a lean hiring practice, improve our recruitment and retention, enhance our services from HRD (letters, market analysis), have improved collaboration/working relationship with HRD, fill all vacancies with qualified people in a timely manner, and improve our Supervisor/Director satisfaction with HRD processes.

IMPROVE POPULATION HEALTH MANAGEMENT

Initiatives: Optimizing Staffing Processes and Accreditation

- We continue to have vacancies in Primary Care including Pediatrics, Family Practice and Internal Medicine
- We hired a new Lab Supervisor, Carrie, Blohowiak. Carrie had started in December 2017.
- Our no show rates have declined in the past year to 9.6 % in the Medical Clinic and 11.2 % at OBH

Medical

- Routine appointments are currently booking 4-8 weeks out for the Medical Clinic
- **See attachment A for Medical Clinic NO-SHOW data**

Behavioral Health

Improve our access to care, as of 1/2/18

- initial intakes are out
 - 5 weeks for Mental Health,
 - 6 weeks for Co Occurring,
 - 7 weeks for ATODA,
 - 8 weeks for Veteran Evaluation,

- 15 weeks for Adult Psychiatry,
 - 6 weeks for Child Psychiatry and
 - 1 week for Psychology.
- Ongoing individual sessions are out
 - 1-4 week for Mental Health,
 - 1-4 week for Co Occurring,
 - 1-4 weeks in ATODA,
- For our follow up medication check appointments,
 - 3 weeks for Adult Psychiatry,
 - 8 weeks for Child Psychiatry and
 - 1 week for Psychology.
- We continue to provide walk in services with a Triage Counselor and Daily Wellness Support Services.
- **See attachment B for Behavioral Health NO-SHOW data.**

- **Access to Care** ongoing evaluation to meet the needs of the patients without hiring of additional staff and maintaining full staff. The positions are posted until filled. **Recruitment is a concern and maintaining competitive within our professional market.** We are completing a market analysis on our professional positions.

- **Tele Health-** Behavioral Health is working on contracting with ReGroup Therapy to provide Tele Psych services on site at Behavioral Health. This will have to be added to our state license.

Optical

- Routine exams are booking 4 months out for Optical
 - Optical does have a walk-in clinic on Monday and Thursday mornings for patients who needs their appointments sooner. A sign-up begins at 7:45 AM and the patient will need to wait to be seen.
 - Optical also sees emergencies as needed
- The March Vision Contract is not finalized yet. The plan changed 1-1-18. Our work around process for patients with this insurance coverage is to offer them the Tribe Benefit and let them know who the participating providers are in our area.
- Recent issues involving property damage is a concern due to lack of security cameras in the proper areas.

Dental

- For Routine exam and Filling appointments are booking out 3 months.
- Emergencies are still being seen on a daily basis
- Dental Cleaning and other Perio appointments are being scheduled out to May. A call list is still utilized for cancelations.
- We are short staffed five Dental Assistants. The hiring cap is impacting the shortage of staff and will begin to impact our access further out.
- Currently in negotiations with a full-time Dentist.
- Working at stabilizing the Dental care due to upcoming retirements.
- Dental currently is faced with space issues to try and resolve the access to care issue. Working to find different avenues to meet these space issues.

ANNA JOHN RESIDENT CENTERED CARE COMMUNITY (AJRCCC) UPDATE:

The average daily census for 1st Qtr of the Fiscal Year 2018 is indicated in the chart below:

	OCT	NOV	DEC	TOTAL
Total Resident Billable Days	1226	1151	1194	3571
Calendar Days	31	30	31	92
Oneida Enrolled	29	29	28	N/A
Other Tribe	5	5	5	N/A
Non Tribal	5	5	5	N/A
Number of Beds	48			
Capacity Percentage	82%	80%	80%	81%
	OCT	NOV	DEC	QTR AVG
Payment Source	76%	77%	77%	77%
Medicaid	5%	5%	4%	5%
Medicare A	10%	10%	11%	11%
Private	3%	3%	5%	3%
VA				

- Full Time Registered Dietician for AJRCCC was hired.
- The Harvest Supper was held on November 15, 2017 at 5 p.m. Family members and volunteers paid \$5 for their meal and the Oneida VFW Auxiliary volunteered to help AJRCCC staff serve the meal to the Residents and their guests
- The Christmas Party was held on December 20, 2017 at 2 p.m. Entertainment and gifts (bought by staff) were distributed to the Residents.
- The Congregate Mealsite hours of operation are Monday through Friday from 8:00 AM to 4:30 PM and continues to average 80-100 per day in attendance.
- The AJRCCC Board continues to meet on a regular basis.

OPTIMIZE TECHNOLOGY**Initiatives: Advancing Technology and Accreditation****ELECTRONIC MEDICAL RECORD (EMR):**

- **The EMR Team** continues its work within the Oneida Comprehensive Health Division (OCHD) including Oneida Community Health Center (OCHC) and Oneida Behavioral Health (OBH).
 - The EMR Team continues ongoing review and updating of the system on a regular basis as new releases are available within the application and all additional software. Every software update or new release that is needed requires numerous hours of testing and coordination for implementation to assure that all the application and updates are tested before going live.
- The EMR team would benefit from having an Internal Program/Project Manager that oversees all the products to include Centricity Practice Management/Electronic Medical Record (PM/EMR), ePrescribe, Visualutions, Secure Messaging, Patient Portal, Biscom, Meaningful Use, PQRS, and CQR. This person would research to make sure that the enterprise is on the latest/appropriate versions of the various products and bring the

information to the team. The PM should be able to explain the various aspects of the newer versions and what enhancements are available with them.

PATIENT MANAGEMENT SYSTEM (PMS)

- **The RAVE Alert System** is an emergency notification system that can send a mass notification to our employees via text messages, e-mail message, and/or phone calls in the event of an emergency. i.e. Emergency closure. We have implemented the RAVE system to inform employees of building closures and other situations that need to go out.

CONTINUOUS QUALITY IMPROVEMENT

Initiatives: Accreditation

Accreditation of the Health Division

- Data tracking and collecting with all departments continues with the use of the data base, this will enable better reporting for QA studies as we move toward accreditation.
- An orientation video was recorded which is still in process but will become part of the Orientation process for all new employees of the Health Division.
- Departments continue to update their SOPs based upon the calendar schedule that has been developed Division Wide.
- All departments are meeting monthly, taking minutes, and storing them within the g:drive under Accreditation.
- The QA Coordinator and the Operations Division Director attended AAAHC Accreditation training for first time accreditation visits in Las Vegas, NV. The training helped to identify what specific things will be reviewed based upon the chapters of the Accreditation manual.

Public Health Accreditation

- The on-site visit was completed in October 2017 and we are expecting a final decision in mid-February 2018.

ENHANCE OUR WORKFORCE

Initiative: Optimizing our staffing processes

HUMAN RESOURCE MANAGEMENT

- The hiring freeze/cap that went into effect in December is adversely impacting our ability to provide services to our community. Within OCHD the freeze will result in service access deterioration and services being placed on hold. In the projected scenario of a longer term hiring freeze, service(s) elimination maybe a consideration due to lack of adequate staffing resources.
- We have staffing, space and financial constraints that prevent us from providing optimal access to care in our Division.

Number As of 1/01/18 Comprehensive Health Division Employees: 328 FTE (includes full-time, part-time, LTEs,) NOTE: The Work Force report is being worked on with HRD to confirm accuracy.

- Total # employees for the division is 351:
 - **118 Oneida Enrolled**

- **31 American Indian/Alaskan**
- **3 Black/African American**
- **1 Asian**
- **6 Hispanic/Latino**
- **188 Caucasian/other**
- **4 Two or more Races**

- **Breakdown of # of employees by area:**
 - **AJRCCC: (70)**
 - 24 Oneida Enrolled 6 American Indian/Alaskan
 - 1 Asian
 - 4 Hispanic/Latino
 - 1 Black/African American
 - 3 Two or more Races
 - 31 Caucasian/other
 - **Behavioral Health (44)**
 - 1 Hispanic/Latino
 - 6 American Indian/Alaska Native
 - 1 Black/African American
 - 7 Oneida Enrolled
 - 28 Caucasian/other
 - 1 Two or more races
 - **Employee Health Nursing (10)**
 - 1 American Indian/Alaska Native
 - 2 Oneida Enrolled
 - 7 Caucasian/other
 - **Medical (44)**
 - 5 American Indian/Alaskan
 - 12 Oneida Enrolled of WI
 - 27 Caucasian/other
 - **Operations (183)**
 - 1 Black/African American
 - 13 American Indian/Alaska Native
 - 73 Oneida Enrolled of WI
 - 95 Caucasian/other
 - 1 Hispanic/Latino

- **Current vacancies as of 1/1/18:**
 - **Certified Medical Assistant**
 - **Clinical Substance Abuse Counselor**
 - **Dental Assistant**
 - **Dental Systems Coordinator**
 - **Dual Diagnosis Therapist**
 - **Physician –Peds**
 - **Physician – Internal medicine**
 - **Psychiatrist**
 - **Psychotherapist**
 - **Certified Nursing Assistant**
 - **Dental Hygienist**

- Dietary Aide Cook LPN- AJRCC
- RN – AJRCCC
- Triage Supervisor
- Dental Assistant

FINANCIALS

Comprehensive Health Division

BUDGETED Funding Sources for FY-2018 (Total)

TRIBAL CONTRIBUTION: 4.50% (\$2,699,903)

GRANTS: 3.42% (\$2,053,885)

OTHER SOURCES:

External Sales/Third Party Revenue/other income 58.45% (\$35,072,745)

Indian Health Services: 33.63% (\$20,177,282)

Total Budget for FY 2018: \$60,003,815

Actuals as of 12/31/17

1st Quarter Total Actuals as of 12/31/17 (Oct-Dec 2017): \$12,309,348

Consolidated Health (OCHC & OBH) has not been utilizing Tribal Contribution to provide services to the Community.

Tribal Contribution is utilized within the Comprehensive Health Division at AJRCCC (Budgeted \$1,478,742), EHN (Budgeted \$877,126), and Case Management/COP (Budgeted \$343,381 Grant matching requirement), and WIC (Budgeted \$654, Grant matching requirement).

LONG TERM CARE:

- The issue related to the proposed 1115 Medicaid Waiver and it's impact on the Tribes in Wisconsin continues to be the focus of our discussions during this past quarter. The Tribes continue to discuss the 1915B and 1915C waivers and the impacts to the Tribal communities. There has been active involvement of Tribal leadership and the law office as we continue to work to an amicable solution to the issues that will impact all Tribes in WI but more specifically Oneida and Menominee.

Celebrations and Successes:

- Celebrated and recognized our OCHC staff for their service to the Community. The Yaw^ko event was sponsored and supported by Employee fund raising and organized by OCHC Booster Club. Kudos to the Booster Club for an excellent program that celebrated the dedication and passion that our staff have for the services we provide to our community.
- Behavioral Health staff have been voluntarily reaching out and supporting the community fire-several ATODA groups have spent time there in the month of December.
- Employee Health Nursing (EHN) has completed 1,626 Health Risk Assessments for employees and spouses out of 1,900 that are eligible to have the assessment done.
- 473 employees, Nation wide, have completed their points for the Reasonable Alternative Standard (RAS) out of 550 that signed up through EHN.
- The Public Health Accreditation Board site visit was October 4th & 5th 2017. Staff did great!
- The Craft Sale held on December 2nd was a success. We had 51 vendors expected to attend with 49 showing-up. Each year we have more vendors that want to participate.
- Successful implementation of the Exercise at Work Policy on the Programs side and Gaming has implemented a pilot within the Custodial area which will be evaluated after 90 days. At that time, it will be decided how to proceed.

- The percentage of Oneida WIC Infants and mothers who successfully initiate breastfeeding, increased from the original baseline of 78.4% to 82.1%. Note: Target Goal was: 79%. Oneida WIC Breastfeeding rates continue to exceed all State and WI Tribe averages in all categories (initiation through 12 months).
- The Cultural Awareness team's (CAT) work is being recognized and valued by other divisions in the Nation and external from the Nation. Other departments would like to have a similar policy as we do. We have been asked by other divisions (Oneida Nation School System and Oneida Headstart) in the Nation about our CAT policy and implementation of the Oneida culture education. At this time, the School System has requested our power points. We also have the Green Bay School System requesting us to work with them to incorporate into their teacher's personal knowledge of culture. The Cultural Heritage Staff and the Oral Speakers we receive the teachings from have approved to share the e-Learnings we have completed to this point. However, they prefer not to have the pictures or the Medicine Society e-Learning shared at this time. Further direction/guidance from the Division Directors on how to handle these requests will be requested.
- The 2017 Annual Cultural Awareness event with Blackwolf Jones as the speaker was held at the Radisson with 3 different sessions for employees to attend. Out of the 366 employees expected to attend, we had 302 or 82.5 % attend the third annual event.

Please follow us on our Oneida Comprehensive Health Division Facebook page!

Cultural Awareness training (December 2017)



Yaw^ko Event (December 2017)



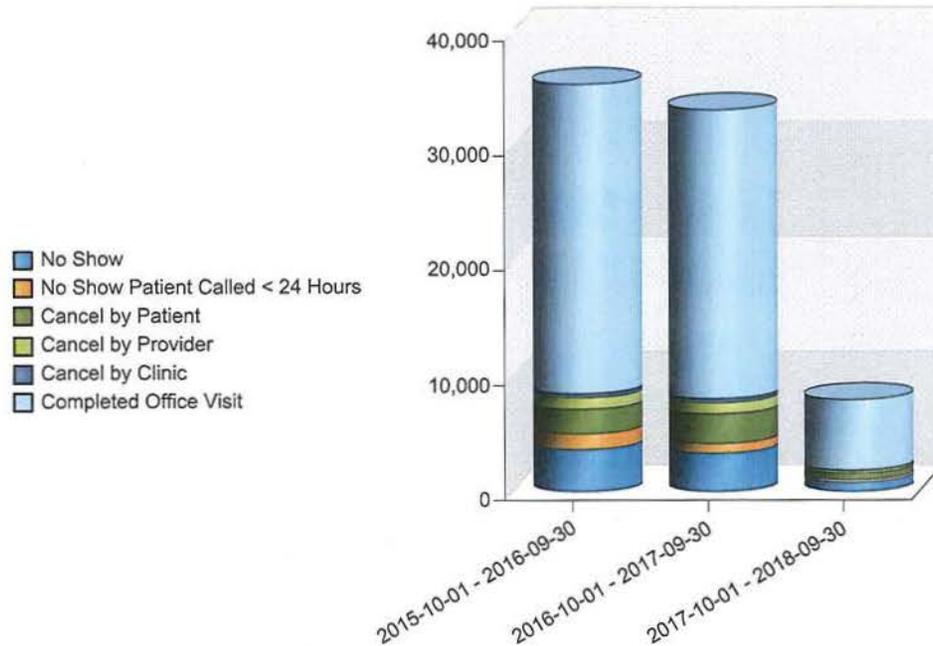
Public Health Accreditation (PHAB) (October 2017)





Three Year By Quarter No Show/Cancellation Summary

Oneida Health Center Medical Clinic



Range	FY QTR	No Show	%	No Show Patient Called < 24 Hrs	%	Cancel by Patient	%	Cancel by Provider	%	Cancel by Clinic	%	No Show Cancellation Total	Completed Office Visit	Total Appointments	Billed Visits	Total Clients
2017-10-01 - 2018-09-30	Qtr01	795	10.0%	217	2.7%	593	7.5%	174	2.2%	76	1.0%	1,800	6,131	7,931	5,811	4,326
2017-10-01 - 2018-09-30		795	10.0%	217	2.7%	593	7.5%	174	2.2%	76	1.0%	1,800	6,131	7,931	5,811	4,326
2016-10-01 - 2017-09-30	Qtr04	705	9.8%	182	2.5%	552	7.7%	249	3.5%	76	1.1%	1,738	5,445	7,183	5,445	4,004
	Qtr03	799	9.9%	153	1.9%	791	9.8%	229	2.8%	58	0.7%	2,009	6,063	8,072	6,065	4,197
	Qtr02	834	9.6%	226	2.6%	685	7.9%	234	2.7%	137	1.6%	1,991	6,681	8,672	6,694	4,459



Three Year By Quarter No Show/Cancellation Summary

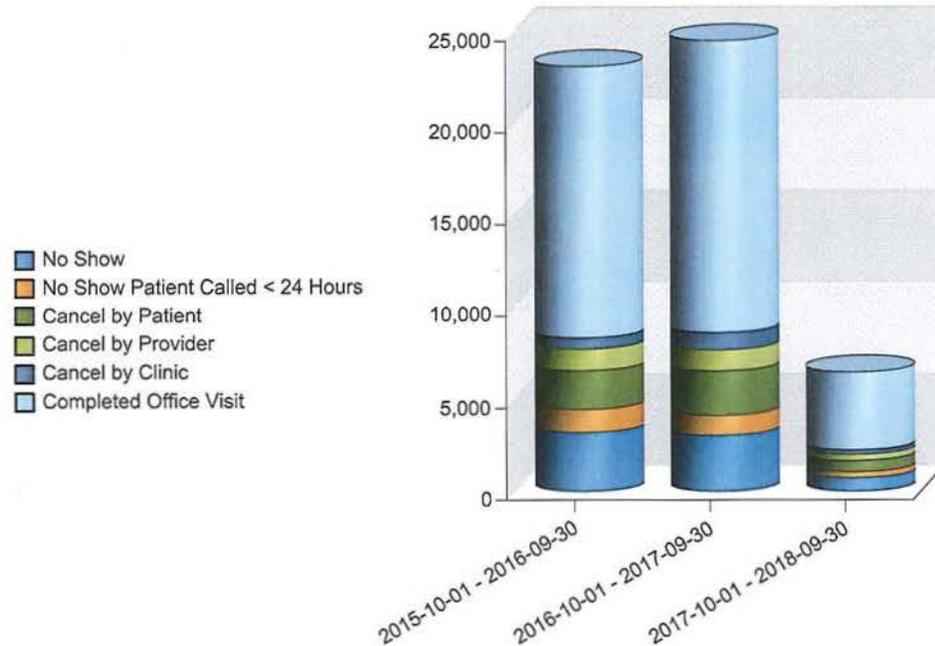
Oneida Health Center Medical Clinic

Range	FY QTR	No Show	%	No Show Patient Called < 24 Hrs	%	Cancel by Patient	%	Cancel by Provider	%	Cancel by Clinic	%	No Show Cancellation Total	Completed Office Visit	Total Appointments	Billed Visits	Total Clients
2016-10-01 - 2017-09-30	Qtr01	977	10.8%	267	2.9%	583	6.4%	256	2.8%	100	1.1%	2,136	6,917	9,053	6,917	4,808
2016-10-01 - 2017-09-30		3,315	10.1%	828	2.5%	2,611	7.9%	968	2.9%	371	1.1%	7,874	25,106	32,980	25,121	8,182
2015-10-01 - 2016-09-30	Qtr04	939	11.0%	292	3.4%	565	6.6%	185	2.2%	59	0.7%	2,002	6,545	8,547	6,545	4,622
	Qtr03	861	9.9%	353	4.0%	550	6.3%	192	2.2%	109	1.2%	2,027	6,710	8,737	6,712	4,502
	Qtr02	777	9.0%	338	3.9%	548	6.4%	285	3.3%	115	1.3%	2,038	6,576	8,614	6,578	4,464
	Qtr01	1,059	11.2%	370	3.9%	522	5.5%	337	3.6%	81	0.9%	2,361	7,061	9,422	7,065	5,031
2015-10-01 - 2016-09-30		3,636	10.3%	1,353	3.8%	2,185	6.2%	999	2.8%	364	1.0%	8,428	26,892	35,320	26,900	8,663
Summary		7,746	10.2%	2,398	3.1%	5,389	7.1%	2,141	2.8%	811	1.1%	18,102	58,129	76,231	57,832	10,808



Three Year By Quarter No Show/Cancellation Summary

Behavioral Health Services



Range	FY QTR	No Show	%	No Show Patient Called < 24 Hrs	%	Cancel by Patient	%	Cancel by Provider	%	Cancel by Clinic	%	No Show Cancellation Total	Completed Office Visit	Total Appointments	Billed Visits	Total Clients
2017-10-01 - 2018-09-30	Qtr02	80	11.2%	36	5.1%	74	10.4%	71	10.0%	35	4.9%	296	416	712	237	547
	Qtr01	650	11.3%	290	5.0%	534	9.3%	264	4.6%	214	3.7%	1,952	3,802	5,754	3,596	1,569
2017-10-01 - 2018-09-30		730	11.3%	326	5.0%	608	9.4%	335	5.2%	249	3.9%	2,248	4,218	6,466	3,833	1,641
2016-10-01 - 2017-09-30	Qtr04	765	13.8%	244	4.4%	547	9.9%	239	4.3%	307	5.5%	2,102	3,441	5,543	3,422	1,550
	Qtr03	784	12.9%	285	4.7%	567	9.3%	214	3.5%	159	2.6%	2,009	4,072	6,081	4,073	1,559



Three Year By Quarter No Show/Cancellation Summary

Behavioral Health Services

Range	FY QTR	No Show	%	No Show Patient Called < 24 Hrs	%	Cancel by Patient	%	Cancel by Provider	%	Cancel by Clinic	%	No Show Cancellation Total	Completed Office Visit	Total Appointments	Billed Visits	Total Clients
2016-10-01 - 2017-09-30	Qtr02	734	10.8%	271	4.0%	754	11.1%	408	6.0%	283	4.2%	2,450	4,342	6,792	4,341	1,599
	Qtr01	770	12.5%	286	4.7%	537	8.8%	262	4.3%	194	3.2%	2,049	4,087	6,136	4,087	1,535
2016-10-01 - 2017-09-30		3,053	12.4%	1,086	4.4%	2,405	9.8%	1,123	4.6%	943	3.8%	8,610	15,942	24,552	15,923	2,558
2015-10-01 - 2016-09-30	Qtr04	768	13.2%	268	4.6%	538	9.2%	281	4.8%	164	2.8%	2,019	3,810	5,829	3,808	1,481
	Qtr03	808	13.8%	314	5.4%	532	9.1%	207	3.5%	101	1.7%	1,962	3,892	5,854	3,657	1,496
	Qtr02	824	13.2%	339	5.4%	573	9.2%	307	4.9%	224	3.6%	2,267	3,980	6,247	3,658	1,501
	Qtr01	808	15.5%	331	6.4%	457	8.8%	362	7.0%	122	2.3%	2,080	3,126	5,206	3,129	1,377
2015-10-01 - 2016-09-30		3,208	13.9%	1,252	5.4%	2,100	9.1%	1,157	5.0%	611	2.6%	8,328	14,808	23,136	14,252	2,485
Summary		6,991	12.9%	2,664	4.9%	5,113	9.4%	2,615	4.8%	1,803	3.3%	19,186	34,968	54,154	34,008	3,760

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve GSD FY 2018 1st Quarter Report

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: _____
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Governmental Services Division

FY2018 First Quarter Report

George Skenandore, Division Director

DIVISION EXECUTIVE SUMMARY

The purpose of the Governmental Services Division (GSD) is to provide education and lifelong learning opportunities, programs, and services for individuals and families to encourage and support their overall wellbeing. The first quarter report of GSD for FY 2018 reflects the continual high level of use of programs/services by community members of all ages. Program areas and the employees who serve in those areas continue providing quality customer care and services consistent with the mission, vision and values of the Nation as a whole. In an effort to improve operationally across the Division, performance assurance audits continue to occur with findings being followed up on as required to ensure that efficiencies and best practices are considered as part of program design and delivery of services. Because of the current hiring freeze, the position vacancies are being addressed to determine the level of service GSD is capable of providing. GSD is being strategic as possible to collaborate with other areas of the organization and within all areas of GSD itself to continue the service to the customer/client base. We are thankful for the opportunity to serve the community and for the community's continual support.

CULTURAL HERITAGE AREA

CULTURAL ADVISOR			
NARRATIVE	FREQUENCY/ UTILIZATION		HIGHLIGHTS (CONT.)
As a whole, Oneida Cultural Heritage is responsible for maintaining and interpreting Oneida traditional customs, history, and teachings. All departments work to preserve and protect the artifacts, collections, documents, audio and visual recordings for reference and research including Oneida language material. The Oneida language is a vital part of our existence and is taught using different teaching methods to meet different learning styles.	# of Walk-ins:	12	*Appointments made were to address medicine societies, a need for personal guidance, how to handle the passing of a loved one, or to request an Ukwehúwené (first nations) name. *Workshop topics Included: - History on the formation of the clans - Introduction of ceremonies - Peacemaker – Establishing the Great Law *Home school participants include one or both of the parents, and sometimes grandparents. *Currently visiting with two (2) elders; one is requesting assistance with a language project, and the other request time to discuss personal illnesses. Chief Council Meetings may last for a couple hours or turn into two (2) day sessions depending on topics needing to be addressed.
	# of Appointments Made:	14	
	# of Cancelations (including No Call/No Shows):	6	
	# of Presentations/ Workshops Provided:	4	
	# of Presentation/ Workshop Participants:	154	
	# of Home School Participants:	21	
	# of Elder Visits:	14	
	# of Hours worked on Re-writing Kalihwi·yó Instructions:	16	
	# of Chiefs Council Meetings:	4	
	# of Chiefs Council Meetings Attended:	4	
# of Repatriation Consults:	2		
ANNUAL GOALS	DEMOGRAPHICS		
*Continue sharing all aspects of our Oneida culture, history, and language through presentations as requested.	Youth (0-17):	46	
	Adult (18-54):	63	
	Elder (55+):	37	
	Total:	146	
*Continue to edit and add components that are later recalled to : -The Creation Story -Ceremonies -Great Law -Kalihwi·yó	HIGHLIGHTS		
	* This past year through the grand Council, the Recital Committee was given another 5 year extensions to proceed on with the Great Law Recitals.		
*Continue working with Cliff Abbott on rewriting Kalihwi·yó into the format that will be recited.			
*Recite as many of the Wampum Belts as possible and have them transcribed for future use.			

ONEIDA LANGUAGE ARCHIVIST/TSI? NIYUKWALIHOT^ EDUCATOR

MISSION STATEMENT	FREQUENCY/ UTILIZATION		HIGHLIGHTS (CONT.)
<p>The mission of the Tsi? Niyukwalihó·tΛ initiative is to preserve, protect, maintain, and interpret the Oneida traditions, artifacts, language, customs, and history in a manner that shall promote the dignity and respect of the Oneida people and culture.</p>	# of Participants enrolled in Tsi? Niyukwalihó·tΛ:	14	*Tsi? Niyukwalihó·tΛ Participants (Cont.):
	# of Tsi? Niyukwalihó·tΛ Participants Actively Attending Weekly:	13	-Currently pounding black ash log to make enough splints for each student to make a Longhouse baskets.
	# of Days Classes were held:	88	
	# of SEOTS Presentations:	3	-Finished the fifteen forms of the A, I, E, and
	# of SEOTS Presentation Participants:	47	fake E stem past tense verbs.
	# of Off-Site Presentations:	14	
	# of Off-Site Presentation Participants:	380	*Other: -Gave monthly Cultural Awareness
	# of Hours worked on: Speak Oneida Part II, WPA Books, &/ or Archiving:	25	presentations at SEOTS and the Green Bay Correctional Institutes' Native American Pipe and Drum group.
	DEMOGRAPHICS		
	Youth (0-17):	120	-Finished the audio recording on the Speak
	Adult (18-54):	269	Oneida Part 2 APP.
Elder (55+):	53		
Total:	442		
ANNUAL GOALS	HIGHLIGHTS		
<p>1. Prepare the students to accomplish the two year intensive Tsi? Niyukwalihó·tΛ initiative.</p> <p>2. Offer a variety of experiential programs to preserve and increase the knowledge and understanding of the Oneida language, culture and history.</p> <p>3. Groom participants to serve as Oneida ambassadors, leaders, mentors, teachers, experts and possible entrepreneurs.</p>	<p>*Tsi? Niyukwalihó·tΛ Participants:</p> <p>-attended the Food Sovereignty Summit held at the Radisson October 3-5.</p> <p>-participated in the Harvest Ceremony held October 13-15.</p> <p>-smoked salmon donated by a student's brother.</p> <p>-made their own water drum, drum stick, drum tightener, and cow horn rattle.</p> <p>-fleshed 14 deer hides; scraped the hair off of five (5) that will be ready to make into leather in the spring, and the other nine (9) hides will be de-haired and made into leather in the spring as well.</p>		

1st Quarter Language Archivist Images



Smoked Salmon



Cow Horn Rattle



Black Ash Splints

Water Drum & Hand Carved Drum Stick

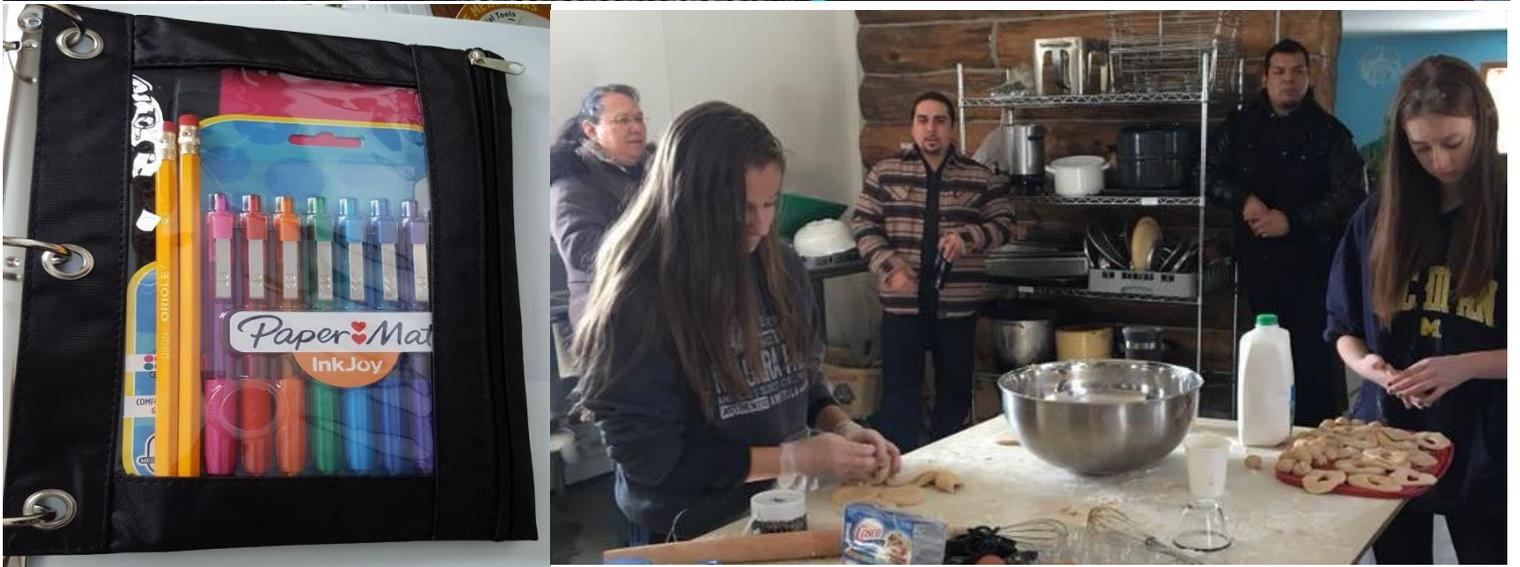
CULTURAL WELLNESS			
MISSION STATEMENT	FREQUENCY/ UTILIZATION		HIGHLIGHTS (CONT.)
<p>Promote a holistic cultural based approached to Wellness that encourages & strengthens Tsi? Niyukwalihó·ta (Our Ways)</p> <p>*The Oneida Cultural Wellness Program addresses the impacts/ traumas that have occurred to the mind, heart, spirit, body, environment, society, & primary relationships with a focus on the Lotinuhsu·níhe? Creation Story, Ceremonies, Medicine Societies, Great Law, Kalihwi·yó, & spirituality for the healing process in the reclamation of one's Oneida Identity.</p>	# of Walk-ins:	0	<p>*Note: Did not count walk-ins separate because I was not aware of the need to count them as such.</p> <p>*Reviewed AODA curriculum.</p> <p>*Attended 2 Social Services staff "cleaning off/ smudging"</p> <p>O-cademy</p> <p>*is a unique opportunity for the Nation's workforce that will develop skills that can provide professional and personal growth through monthly learning experiences and group mentoring opportunities.</p> <p>*Met with training and development staff members to review O'cademy intent and to present on the wellness sessions proposed. The Cultural Wellness Facilitator is offering small group or one-on-one sessions for participants that would like to gain a deeper understanding of how the material applies to their own experiences.</p> <p>*Attended O'cademy- Crucial Conversations and one mentoring session. Created vision, mission and guiding principles for program. As well as presentation list and feedback form.</p> <p>*TAP meetings had a presenter on Menominee how trauma informed care was implemented in to their organization. Signed up for subcommittees, met with Enough is Enough to discuss potential duplication of goals with their nonprofit.</p> <p>*Update on SAMSA teleconference, focus conversation, and subcommittee report outs.</p>
	# of Appointments Made:	123	
	# of Cancelations (including No Call/No Shows):	20	
	# of Presentations/ Workshops Provided:	2	
	# of Presentation/ Workshop Participants:	9	
	# of Tribal Action Plan Committee Meetings:	3	
	# of Tribal Action Plan Committee Mtg.'s Attended:	3	
	# of Domestic Violence Program Events/ Mtg.'s:	7	
	# of D.V. Program Events/ Mtg.'s Attended:	6	
	DEMOGRAPHICS		
Youth (0-17):	16		
Adult (18-54):	38		
Elder (55+):	12		
ANNUAL GOALS	HIGHLIGHTS		
<p>Goal 1: Facilitate community Cultural Wellness education through increased participation in groups.</p> <p>Goal 2: Update program framework by the end of the 3rd quarter of FY 2018</p> <p>I. Alignment review and development of outcomes</p> <p>II. Strategic workforce plan initiative</p> <p>a. Framework</p> <p>b. Training curriculum</p> <p>c. Cultural wellness curriculum</p>	<p>Women of the Phoenix</p> <p>*is an on-going, weekly support group for women that have completed the 18-week Education or Culture Group. Clients decide the topic for each session. Women learn about/ practice self-care and coping skills through experiential activities, group outings, and stress relief techniques</p> <p>*Cultural Wellness will assist with cultural activities such as the protocols around medicinal plant usage, indigenous diet, healing, roles and responsibilities, and other cultural topics. 1 group year planning session, 1 group outing on apple picking and nutrition about apples, 1 pie making class, 3 moccasin making, 1 cookie making class.</p>		

CULTURAL HEALING		
MISSION STATEMENT	FREQUENCY/ UTILIZATION	HIGHLIGHTS (CONT.)
<p>Promote a holistic cultural based approached to Wellness that encourages & strengthens Tsi? Niyukwalihó·ta (Our Ways)</p> <p>*The Oneida Cultural Wellness Program addresses the impacts/ traumas that have occurred to the mind, heart, spirit, body, environment, society, & primary relationships with a focus on the Lotinuhsu·níhe? Creation Story, Ceremonies, Medicine Societies, Great Law, Kalihwi·yó, & spirituality for the healing process in the reclamation of one's Oneida Identity.</p>	# of Walk-ins:	5
	# of Appointments Made:	35
	# of Cancelations (including No Call/No Shows):	6
	# of Presentations/ Workshops Provided:	5
	# of Presentation/ Workshop Participants:	215
	# of Oneida Nation Rites of Passage Meetings:	8
	# of Oneida Nation Rites of Passage Mtg.'s Attended:	8
	# of Domestic Violence Program Events/ Mtg.'s:	1
	DEMOGRAPHICS	
	Youth (0-17):	27
	Adult (18-54):	195
Elder (55+):	23	
Total:	245	
ANNUAL GOALS	HIGHLIGHTS	
<p>*Generate & implement survey to quantify clients feedback as I continue to meet with individuals and families to help guide them to a healthy path towards self-identification as Ukwehuwe/ Onnyote?a·ká/ Lotinuhuni</p> <p>*Recruit participants and organize program materials for Tetwatunhatényehse? (We are changing our lives) - the Oneida Nation Rites of Passage Program in order to safely and successfully complete this year's Ceremony here in our community set for the week of June 11th, 2018.</p> <p>*Attend Kalihwi·yó and Kay?lakowa and provide a report back in oral and documented forms to community upon return.</p>	<p>*Received grant funds from co-worker, Corina Williams; THPO for supplies and materials for Oneida Nation Rites of Passage.</p> <p>*Collected over 120 rocks for sweat lodge use for Oneida Nation Rites of Passage.</p> <p>*Made Hoyan donuts for elderly residing at Anna John Nursing Home with other Rites of Passage organizers.</p> <p>*Oneida Nation Rites of Passage organizers had good, productive, organizational meetings in planning for this year's ceremony due to members being better prepared.</p> <p>*Looking forward to working with our cultural leaders to help educate our youth and adults.</p>	<p>Presentations:</p> <p>10.21.17 - Oneida Nation Rites of Passage participants met at Tsyunhéhkwa for the harvesting of the Oneida heirloom white corn. Presented along with Kyle Wisneski on how to safely harvest the corn from snapping, husking, lopping, and braiding 65 ears of corn together.</p> <p>11.15.17 - Native Nurses Summit was held at the Radisson. Presented on how to incorporate culture into healing.</p> <p>11.17.17 - Oneida Elderly Caregivers Luncheon was held at the Radisson. Presented on cultural wellness and it led to a good discussion on the opiate epidemic within the community.</p> <p>12.27.17 - Two-spirited Workshop was held at the Social Services building. Was requested to welcome and greet participants.</p> <p>12.30.17 - Oneida Nation Rites of Passage participants met at the Oneida cookhouse to make Hoyan donuts which included a short language lesson.</p> <p>Looking Ahead:</p> <p>I want to develop a young men's group for sharing, helping each other and learning language and songs for longhouse doings.</p>

1st Quarter Cultural Healing Images



Some of the supplies & materials purchased with grant funds given by THPO - Corina Williams



Hoyan donut making with Oneida Nation Rites of Passage participants



HISTORY DEPARTMENT			
MISSION STATEMENT	FREQUENCY/ UTILIZATION		HIGHLIGHTS
The Oneida History Department collects, organizes, preserves, and makes available materials that pertain to the history and development of the Oneida Nation and its people.	# of History Presentations:	6	Presentations at Cottage II and/or SEOTS & # of Participants: 1) Witches, Superstition, and Supernatural: 4, 20 2) Canandaigua Treaty: 4, 12 3) Hoyan: 72 4) Old Oneida Photos: 15
	# of History Presentation Participants:	200	
	# of Genealogy Workshops/ Requests:	6	
	# of Genealogy Workshop/ Request Participants:	34	
ANNUAL GOALS	# of New Emp. Orientation	3	Kalihwisaks Articles: 1) Back in the Day - Halloween 2) Oneida Bands 3) Lumbering 4) We Got it Right Expanded Hours in the History Department starting January 2, 2018 to offer community members after work opportunities to attend and learn from the Presentation Series on various Oneida topics of History, Culture, and Genealogy. We are trying to bring our community back together with teachings of our culture and history.
GOAL 1: Offer a variety of experiential programs to preserve and increase the knowledge of the Oneida Culture. Currently, the History Dept. offers the presentation series and mini-series leading up to our 200 year anniversary. There are up to 5 -6 presentations and New Employee Orientation (NEO) every month. Sign in sheets track # of participants.	# of New Emp. Orientation Presentation Participants:	81	
	# of Log Home Tours:	7	
	# of Log Home Tour Participants:	216	
	# of Kalihwisaks Published:	3	
	# of History Articles Published in Kalihwisaks:	4	
	# of Sagoli Books Sold:	11	
	# of General History Books Sold:	13	
	# of Archive Researchers:	2	
	DEMOGRAPHICS		
	Youth (0-17):	142	
Adult (18-54):	156		
Elder (55+):	111		
Total:	409		
R&E's			
Sub Account: PRT 001 - History Dept. (All Lines)			
Budgeted:	46,945		
Spent:	46,165		
Remaining Balance:	780		
Over, Under, or On Target:	Under		
Variance Explanation:			
Figures based of R&E Report with period ending 11/30/2017. *According to report no mileage has been reported, employee incentive has not be distributed, funds from specials events has not been utilized, nothing has been taken out for Heat & Lights or Water & Sewer, and no I/T printing has been done yet.			
GOAL 2: Educate & communicate our cultural values/beliefs and history to other Tribes and the general public by submitting articles for publication in the Kalhwisaks, editing video records of meetings/ presentations for easier viewing on Facebook, Youtube, or eLearning.			
GOAL 3: Utilizing the log homes/long house for events throughout the calendar year for tours, presentations, meetings, etc. Log home tours are on request only. Tourism schedules paid tours to stop at the log homes and usually contacts the History Department to give the tour. The audience varies from elders to students and sometimes they are tourist from outside our area. At this time, the Longhouse is not completed.			

Olihwaka-yú - Oneida History Department
November 11, 2017

I'm looking for Oneida Tribal members who have won awards in Sports. If any one has any photos, news articles, or write up on tribal members that would be super! Message me if you do or email me eskenan1@oneidanation.org Thanks! These members will be presented in our presentation on Sat. Nov. 18th at the Oneida Community Library -Eliza Skenandore

PHOTOS: Pictures & History of the Oneida Scene

Series One: Sports
Saturday, November 18, 2017, 11 AM - 1 PM
 Oneida Community Library

History Department will share photos from their collection. We are requesting photos from the community to donate to the collection. Community members can sign up to be interviewed at a later date, on their time. This event will help the History Department and Library prepare for the Bicentennial celebrations and programming which will be accomplished in 2025.

Agenda:

- 11:00 AM: Food
- 11:30 AM: Slide presentation
- 12:00 PM: donations being accepted, appointments made for sports stories to be recorded, and story time with Kymberley
- 12:30ish PM: children's activities with Kymberley
- 1:00 PM: Door prizes

Like Comment Share

Olihwaka-yú - Oneida History Department
December 27, 2017 at 4:08pm



Witches By Loretta Metoxen - YouTube

Hoyan Donuts delight dozens

Olihwaka-yú - Oneida History Department is attending Photos: Pictures & History of the Oneida Scene with Yutyátashnolats Eliza Skenandore at Oneida Community Library--Oneida, Wisconsin
November 18, 2017 · Oneida

Thank you for everyone that came to our "PHOTOS" presentation. And thank you for those who have us names for our research.



Kali photos/Christopher Johnson

An Oneida New Year tradition continued on Friday, Dec. 29, at Cultural Heritage Cottage II. The annual cooking of Hoyan Donuts took place to the delight of dozens of visitors as they stopped in to enjoy the freshly made donuts and socialized. The History Department and museum staff cooked up the treats that were paid for by Tribal Historic Preservation Grant funds that were given to the Oneida Rites of Passage program. Above: Eliza Skenandore helps prepare dough for the Hoyan Donuts. Below: Numerous people stopped by Cottage II for some donuts, coffee, and great company.

ONEIDA NATION IN WISCONSIN
KALIHWI·SAKS 35¢
 P.O. BOX 71 ONEIDA, WISCONSIN 54755
 December 31, 1921

It is Time for Hoy-an!
Doughnut Making with History Department
 (HAPPY NEW YEAR!)

Dec. 29th 2017
9 AM - Noon

Cottage II
1240 Packerland Dr.
Green Bay, WI



ONEIDA COMMUNITY LIBRARY/ GREEN EARTH BRANCH

MISSION STATEMENT	FREQUENCY/ UTILIZATION		HIGHLIGHTS
<p>The Oneida Community Library/ Green Earth Branch provides the informational needs of the Oneida Community while building a collection that reflects our unique Oneida heritage. All persons will have access to current, balanced materials, services and programs that will enrich their informational, cultural and recreational needs.</p>	Circulation:	2,823	Events
	Lending/ Borrowing:	3,692	*Octechber, an event focused on Tech
	SAM/ Wireless Computer Use:	2,925	board games, including Coding and other
			tech devices which included tech learning
	DEMOGRAPHICS		applications; 35 attendees.
	Youth (0-17):	2,833	*Oneida Community Library participated in
	Adults (18-54):	1,672	the inaugural 'Light the Bridgeway' by
	Elder (55+):	315	decorating the large pine trees located on
	Programming & Outreach:	2,029	the corner of the Library's property.
	# of External Costumers Served:	3,692	Lighting ceremony took place on Thursday,
	Total	10,541	November 16, 2017.
ANNUAL GOALS	R&E's		
*Increase circulation by 5% from our	5225840 -Lib. Coll. Enhancement Grant		
Year End Baseline: 14,321.	Budgeted	\$7,000.00	*Event PHOTOS (Pictures and History of
*Increase patron count by 5% from	Spent	628.00	the Oneida Scene) teaming up with the
our Year End Baseline: 33,445.	Remaining Balance	\$7,628.00	History Department in developing
*Increase STEM concepts into	Over, Under, or On Target:	Under	materials for upcoming bicentennial.
children's program and cooperation	Variance Explanation:		Photo sharing by community members
with other department/entities. As	Grant funds recently posted.		of Oneida athletes in past years; about
of right now both libraries host:			15 community members attended.
-Tuesday TECH (Technology &	52255860 - Library Federated		*Just a start. These three months have
Engineering Can Happen.)	Budgeted	\$29,022.00	been trying with employee out on medical
- Wednesdays: Cyber Silvers	Spent	1,148.00	leave. Services/programming reduced along
And at Green Earth:	Remaining Balance	\$27,874.00	with some library hours plus prevented
-STEM Fridays	Over, Under, or On Target:	Under	staff from taking time off.
While at the Main Library:	Variance Explanation:		Clarifications:
-STEAMMY (Science, Technology,	Budget posted as of 12.11.17 on 01.08.18.		*Program numbers derived from
Engineering, Art, Music, Math for	Book orders pending about \$3,000. Training		participants, adults & youth, who attend
Youth) Saturdays	coming up for Kim C. about \$500. Funds will		programs hosted at the Library. While
*Address spaces issues in our	balance out as Brooke returns to staff.		outreach numbers are participants who
library. This includes appropriate			attend events that take place at other
meeting place, study rooms, staff	4225033 - Tribal Contribution		locations outside the library. Example: Boo
area and ADA accommodations as	Budgeted	\$376,681.00	Bash.
requested by the Library Board.	Spent	50,926.00	*Duplication of #: 3,692
Interest in moving into the	Remaining Balance	\$325,755.00	-The Lending/ Borrowing #'s are required
current space used by	Over, Under, or On Target:	Under	by the State of Wisconsin for their lending
Enrollments.	Variance Explanation:		and borrowing count.
	Staff member on sick leave with no ET to		-The external customers are the lending
	replace her - explains the variance with		and borrowing from other libraries.
	personnel line not being used during her time		Customer's orders we fill and received
	off = 3 months of vacant positon.		accordantly.

Green Earth Branch Library shared their event.
October 27, 2017 · 🌐



OCT 28 30th Anniversary of Green Earth Mobil...
Sat 11 AM · Green Earth Branch Library · De Pere Ernest, Yutyatashnolats Eliza and 2 friends
★ Interested

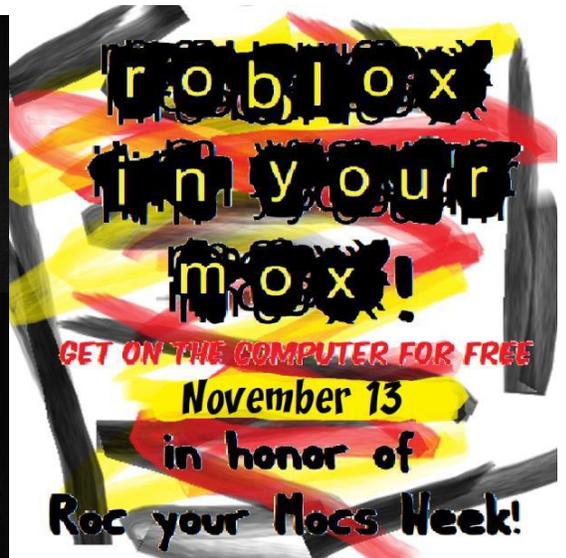
Oneida Nation
November 16, 2017 · 🌐

Tonight, Thursday, we light the Oneida Bridgeway at 7 p.m. on Hwy 54 in Oneida over Duck Creek. Everyone is welcome to join the community in this inaugural event. Parking and shuttles available from the VFW, Ballfield and Parish Hall. Vets selling chili, hotdog and drink for \$1, a sing along with Oneida Nation Arts, and beautiful lights on beautiful trees. DRESS WARM it will be cold and windy.



Green Earth Branch Library added 4 new photos.
December 8, 2017 · 🌐

Holiday Make and Takes Wed December 13th. 1pm
You can come in and make giftable crafts like these and more!!!



Looking Ahead ...



<https://www.facebook.com/YUKWAHYATUHE/YUKWAHYATUHE/> "WE ALL WRITE!"
Attend Oneida's Writers' Group meetings!!

Our Monthly Agenda:

- 2 pm: Critique one page of submissions
- 2:30 pm: Handout or website to improve writing skills, sharing sites accepting submissions, contests, etc.
- 6:45 pm: ImPrompTU Writing
- 8:00 pm: Sharing prompted writings
- 8:30 pm: Wrap Up, plan for next meeting (if anyone)

2017 Schedule: Saturdays @ 2 pm

☛ January 21	☛ July 22
☛ February 25	☛ August 12
☛ March 25	☛ September 30
☛ April 22	☛ October 28
☛ May 20	☛ November 18
☛ June 24	☛ December 16

And writers' retreats at 1 pm on Wednesdays! (Every Wednesday in the summer, Fall and winter: 9/6, 10/26 and 12/27.)

☛ November: Just Come write In! we're a CWL, Come Write In site for NaNoWriMo again!!

Community Library
201 Elm St
Oneida, WI 54981
Phone: 715-520-8658-2210
Fax: 715-520-8658-2210
Kymberley's Direct Dial
<https://www.facebook.com/yukwahyatuhe/>

1st Quarter Museum Images

STRAWBERRY POUCH CLASS
 WITH SANDRA GAUTHIER
 Wednesday, November 1, 2017
 5:30pm-7:30pm
 W892 Cty Hwy EE



All Material Provided
 Please Call to Reserve a Space

\$20 Contact the Museum to Sign Up
 speterso@oneidanation.org
 (920) 869-6539

Hosted by

ONEIDA
 Museum

Come listen and learn about
 the
CREATION STORY
 with
 RANDY CORNELIUS
 Enjoy Light Refreshments



Thursday, November 2, 2017
 5:30 - 7:30 PM
 W892 County HWY EE,
 De Pere, WI 54115
 (920) 869-6539

Hosted by

ONEIDA
 Museum

BEADED EARRING CLASS
 WITH ELIZA SKENANDORE
 Wednesday, Nov. 8, 2017
 5:30 - 7:30 PM
 W892 Cty Rd EE,
 De Pere, WI 54115



Limited space, Materials Provided.

\$20 Contact Sue Peterson to Sign Up
 speterso@oneidanation.org
 (920) 869-6539

Hosted by

ONEIDA
 Museum

Come listen and learn about
 the
History of Lacrosse
 with
 CURTIS SUMMERS
 Enjoy Light Refreshments



Thursday, November 9, 2017
 5:30 - 6:30 PM
 W892 County HWY EE,
 De Pere, WI 54115
 (920) 869-6539

Hosted by

ONEIDA
 Museum

BEADED BARRETTE WORKSHOP
 WITH NEVA CAHILL
 Wednesday, Nov. 15, 2017
 5:30 - 7:30 PM
 W892 Cty Hwy EE



12 Person Limit, Please call ahead to reserve your spot.
 Materials provided.

\$30 Contact the Museum to Sign Up
 speterso@oneidanation.org
 (920) 869-6539

Hosted by

ONEIDA
 Museum

Learn about
 the
Canandaigua Treaty
 with
 ELIZA SKENANDORE
 Enjoy Light Refreshments



Thursday, November 16, 2017
 Noon - 1:00 PM
 W892 County HWY EE,
 De Pere, WI 54115
 (920) 869-6539

Hosted by

ONEIDA
 Museum

Learn about
 the
White Corn Project
 with
 LAURA MANTHE
 Enjoy Light Refreshments

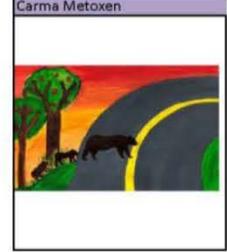
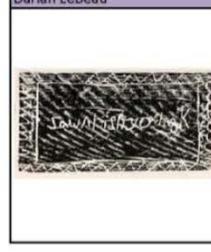
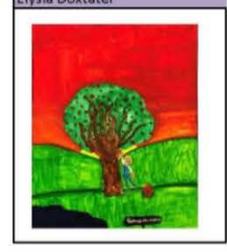
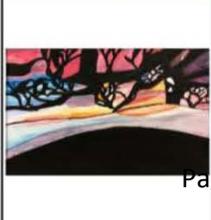


Friday, November 17, 2017
 Noon - 1:00 PM
 W892 County HWY EE,
 De Pere, WI 54115
 (920) 869-6539

Hosted by

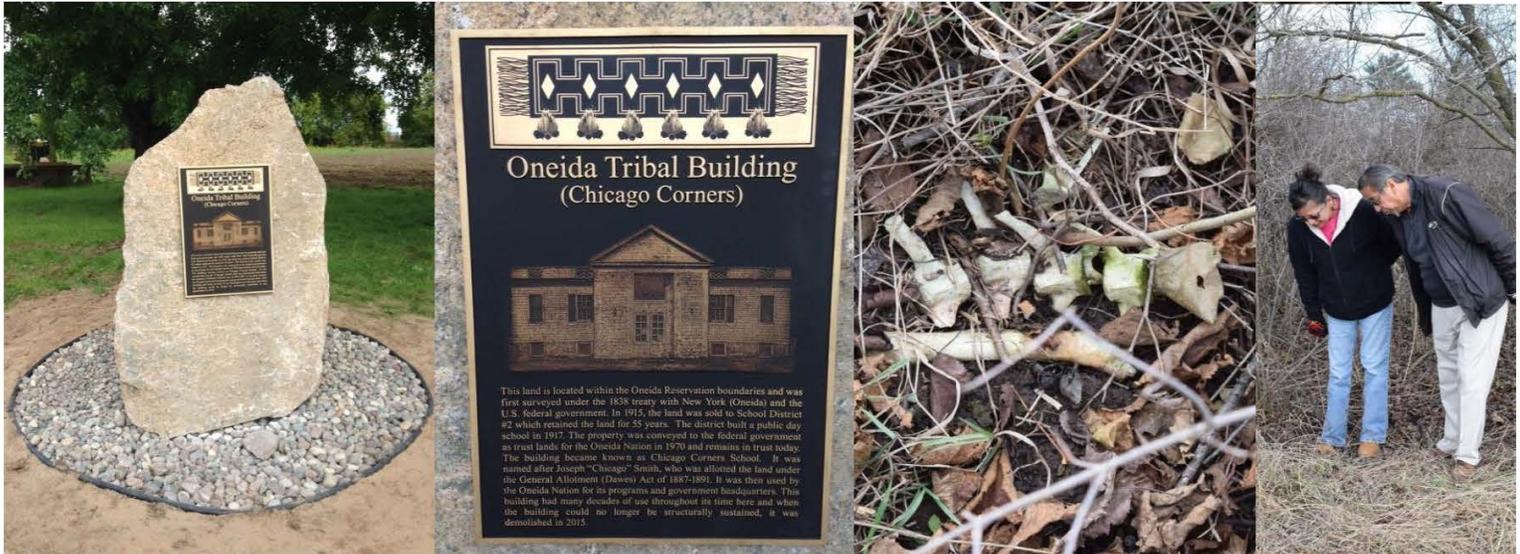
ONEIDA
 Museum

2018 Young Artist Auction

<p>Angeequay Schuyler</p> 	<p>Angelina House</p> 	<p>Ariana Mora</p> 	<p>Carma Metoxen</p> 
<p>Devin Johnson</p> 	<p>Conner Cornelius</p> 	<p>Darian LeBeau</p> 	<p>Elysia Duxtater</p> 
<p>Jesse Montoya</p> 	<p>Lexandria Metoxen</p> 	<p>Makaelyn Elm</p> 	<p>Experanza Cruz</p> 
<p>Miranda Reed</p> 	<p>Simone Gomeyosh</p> 	<p>Stephanie Shabow</p> 	<p>Xavier Webster</p> 

TRIBAL HISTORIC PRESERVATION OFFICE			
MISSION STATEMENT	FREQUENCY/ UTILIZATION		HIGHLIGHTS
To preserve, protect, maintain, and interpret the Oneida Traditions, artifacts, language, custom, and history in a manner that shall promote the dignity and respect of the Oneida people and cultural program; Tribal Historic Preservation Officer fulfills the grant with the National Park Service to protect preserve Oneida Cultural resources in compliance with the National Historic Preservation Act and the Oneida Tribal Laws.	# of Notification Reviews:	104	*Certificate of Completion received for: -"using the EAP in Supervision" -"Para-Professional Re-certification in Archaeology" *Sworn in to the WI Inter-Tribal Repatriation Committee as the Treasurer * Continue to sit on the State Historic Burial Preservation Board as a representative for the Nation * Provided by outreach from NWTC Surveyor course instructor to give education on process of THPO laws and site monitoring class in the field. * Contracted Ho-Chunk Nation to conduct ground penetrating radar within the Oneida Methodist Cemetery; where approximately 100 child-like additional graves were discovered
	# of Construction Consults:	35	
	# of Permit Reviews:	35	
	# of Research Projects:	80	
	# of Meetings Attended Related to THPO:	28	
	Meeting Updates:		
<p>ANNUAL GOALS</p> <p>*Provide protection & management of Archaeological & Historical resources. All earth moving projects will be approved or disapproved within the exterior & interior boundaries by local, federal, Tribal or state activities.</p> <p>*Survey Oneida Reservation using Phase I, II, & Phase III methods. Phase I requires shovel testing every 10-15 transactions, Phase II includes 4x4 grids sift in 3 cm down until no more material is found, and Phase III requires grid profile, soil samples, retrieve material/ artifacts/ remains if present.</p> <p>*Maintain Para-Professional Certification</p> <p>* Administer Tribal Historic Preservation grant</p> <p>*Add 1 historic structures listing on the Oneida and National Register of Historic Places.</p> <p>*Provide the Oneida Code 12 Law in Historic Preservation</p> <p>* Consult w/ individual parties as requested to provide site monitoring,</p>	DEMOGRAPHICS		<p>5225X03 - Historic Preservation Office</p> <p>Budgeted \$57,206.00</p> <p>Spent 0.00</p> <p>Remaining Balance \$57,206.00</p> <p>Over, Under, or On Target: Under</p> <p>Variance Explanation: Due to late receipt of THPO dollars from the federal government no money has been spent yet.</p> <p>5225518 - Language Culture Broadcast</p> <p>Budgeted \$10,000.00</p> <p>Spent \$10,000.00</p> <p>Remaining Balance \$0.00</p> <p>Over, Under, or On Target: On Target</p> <p>5225X20 - Capacity Grant</p> <p>Budgeted \$4,500.00</p> <p>Spent 2,100.00</p> <p>Remaining Balance \$2,400.00</p> <p>Over, Under, or On Target: Under</p> <p>Variance Explanation: No deadline on when the funds have to be spent for this grant. The remaining funds will be used to get gravel for the Methodist cemetery in the spring.</p>
	Local Agencies:	60	
	WI State Agencies:	19	
	Out of the State Agencies:	5	
	Federal Agencies:	20	
	Total:	104	
	R&E's		
	5225X03 - Historic Preservation Office		
	Budgeted	\$57,206.00	
	Spent	0.00	
Remaining Balance	\$57,206.00		
Over, Under, or On Target:	Under		
Variance Explanation:			
Due to late receipt of THPO dollars from the federal government no money has been spent yet.			
5225518 - Language Culture Broadcast			
Budgeted	\$10,000.00		
Spent	\$10,000.00		
Remaining Balance	\$0.00		
Over, Under, or On Target:	On Target		
5225X20 - Capacity Grant			
Budgeted	\$4,500.00		
Spent	2,100.00		
Remaining Balance	\$2,400.00		
Over, Under, or On Target:	Under		
Variance Explanation:			
No deadline on when the funds have to be spent for this grant. The remaining funds will be used to get gravel for the Methodist cemetery in the spring.			

1st Quarter THPO Images



Executive Summary



EDUCATION AND TRAINING AREA

Executive Summary

The Education and Training Area is comprised of seven (7) programs or departments:

- Arts Program
- Community Education Center
- Airport Road Child Care
- Early Intervention
- Higher Education
- Job Training (VR & WIOA)
- Youth Enrichment Services (YES)

This quarter, the Education and Training Area began to review the progress made in FY2017 and continues to work on enhancing organizational systems. Discussion began on strategic planning, alignment with Nation priorities and new ways to collaborate.

Highlights of the quarter include:

- Early Intervention and Head Start relationship building and process improvement
- Child Care Compliant Law implementation tasks
- Review of data and information available from AS400 and HRIS
- 6 month Management Follow up to Performance Audit
- E&T Leader meetings once a month
- Individual meetings with direct reports at least once a month
- Attended departmental staff meetings once a month
- Weekly GSD Area Manager's meetings and Strategic Workforce Plan
- Community Budget Information Meeting
- GSD Reorganization Meeting
- E &T Area Strategic Planning meeting
- Data Sharing Agreement with Achieve Brown County, United Way and Oneida approved
- Early Childhood Coordinated Action Network (CAN) Meeting

Partnerships

- Tribal Workforce Development Conference
- Achieve Brown County Mentoring Project YES Process Review
- Meeting with new Seymour Community Schools Superintendent, Laurie Asher
- Partners in Education Board Meeting
- NCAI education sessions participation
- NWTC Partnership meeting
- Financial Aid Access Guidance Troubleshooting with Legislative Affairs, NIEA and NCAI

ARTS

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
 <p>Vince Gant works with participant</p> <p><u>Art Classes:</u> <i>Sterling Rings</i>-10, class full <i>Strap Dress</i>-15, class full <i>Music Lessons with Jay</i>: 6, class full with wait list <i>Finger Weaving</i>-7</p> <p><u>Basket Guild:</u> The basket guild has outgrown our space; therefore, they moved their materials to the Parish Hall. We will continue to be a resource to the guild and we did receive a grant to help them with programming for FY18. Averages 16 clients/month.</p> <p><u>Dollars for Arts:</u> 5 applicants. This was the first year that requests were less than our total amount to award. All will be funded full amount.</p>	<p>3,660 total clients w/ approximately 1,220 clients per month</p> <ul style="list-style-type: none"> - 154 Tribal members/ employees - 1506 students SEEDS (<i>Planting Seeds of Knowledge</i>) & band - 1,000+/mo. listeners on WPNE Native Radio Hour <p>Exposure includes the weekly radio show on WPNE and the "Let's Be Frankly" monthly publication. These venues provide great exposure for Native artists.</p> 	<p>Classes, band program, and radio show weekly.</p> <p>The annual goal was to increase enrollment numbers and frequency of class participation. Arts classes, on average, are full and have a wait list.</p> <p>Community Education Center and Arts enabled clients to peruse and register for all classes online, with hopes of completing an online payment option in FY 2018.</p>	<ul style="list-style-type: none"> • Artists for Humanities have been working very hard to reach out and market specifically to Oneida vets. The organizer has set up appointments with Oneida Behavioral health and Veterans to offer this specifically for Oneida veterans. • No exercise @ work policy: Arts does not have the resources to spare employees for this activity during the school year. 

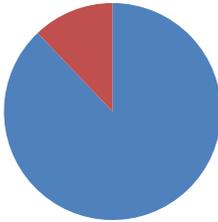
COMMUNITY EDUCATION

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
<p>The Community Education Center continues to develop community programming using existing resources.</p> <p>Services include:</p> <ul style="list-style-type: none"> • Tutoring • GED and HSED assistance • Computer classes • Computer usage for job searches and personal use. • Copies and faxes • Community enrichment classes • Chess Club • Astronomy Club • Facility used for various meetings 	<p>620 total clients in classes, meetings, and trainings. This number was derived from client sign-ins at front desk and class rosters</p> <p>Approximately 73% were tribal members or Tribal Employee, 7% were other tribes; 20% were non tribal.</p> <p>Partners:</p> <ul style="list-style-type: none"> • RAS Team, EHN: • Wisconsin Native Loan Fund • Valley Investment Solutions Estate Planning. • Center for Self Sufficiency • Oneida Film Society 	<p>An average of 450 clients per month</p> <p>690 sign-ins for computer use; 41 copies and faxes</p> <p>Tutoring:</p> <ul style="list-style-type: none"> • 22 students @ 71 sessions • 9 GED students; 10 HSED 5.09 students. • 15 classes held with 322 in attendance • 27 meetings held with 297 in attendance • 5 club meetings held with 1 in attendance 	<ul style="list-style-type: none"> • One HSED 5.09 student received their GED • Six RAS point classes were held at CEC with 259 participants. • 1st ACT prep class was held October 23 and 25. Five (5) high school students attended this class. • Overall customer satisfaction was 95% with 137 participants reported through Survey Monkey, RAS evaluations, and paper copy surveys • No Exercise @ work policy: CEC does not have the resources to spare employees for this activity during the school year. • The CEC hopes to complete the online payment option in 2018. • The Community Education Center has developed a quarterly Programming Guide, in collaboration with various departments, to offer the ability to peruse current class offerings, register for classes and events online, and promote another marketing venue.

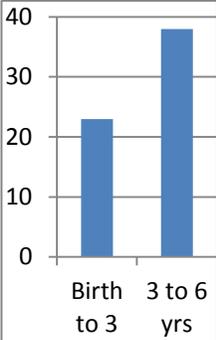
Oneida Film Society and the Community Education Center (CEC) welcomed Robert W. Wheeler, historical scholar and author of Jim Thorpe: World's Greatest Athlete, to the Oneida area on November 12-16, 2017. The events included "Define Your Future with Robert W. Wheeler," featuring life lessons from a career spent in marketing and public relations. The multimedia presentation, "Real Life vs. Reel Life of Jim Thorpe" treated students at Oneida Nation High School, UW-GB, and community members at the CEC, to this fascinating comparison between Thorpe's real life and his life as presented in the 1951 film "Jim Thorpe – All-American."



CHILD CARE

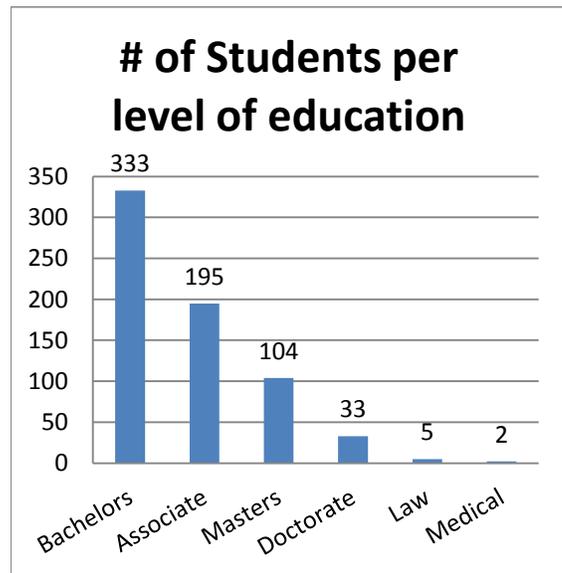
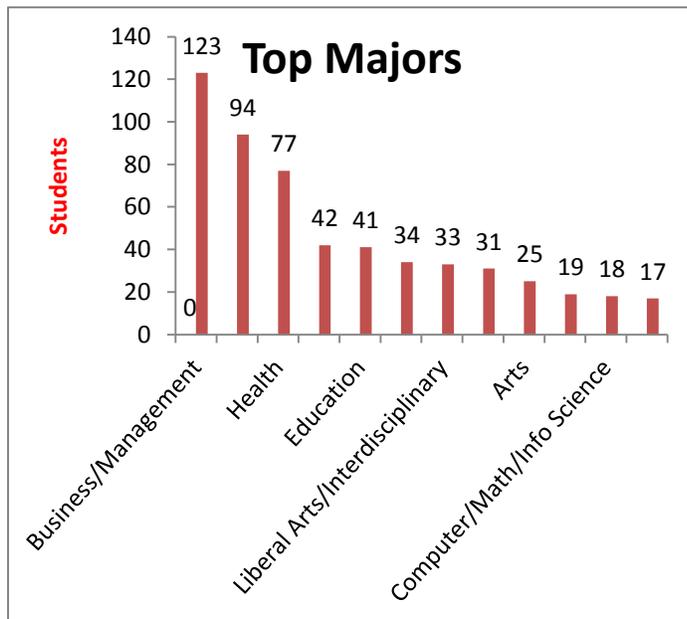
NARRATIVE		DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
<p>Since Sept. 1974, Child Care has serviced and continues to service the Oneida community. Children are taken off the wait list by the following priority:</p> <ul style="list-style-type: none"> • Siblings being the highest, • Oneida working for Oneida, • Oneida not working for Oneida, • Non-Oneidas working for Oneida and • Non-Oneida not working for the Oneida Nation  		<p>As of Nov 2017: Base Number: 66 (Average of first quarter)</p> <p>58 -Oneida Families 08- non-Oneida families 25 – Employees</p> <p>28 Full-time children 38 Part-time children</p> <p>19 short of our “Operating Max” of 85</p>	<p>Customers used the Child Care services: Oct. 1,452 times; Nov. 1,254 times; Dec. 1,320</p> <p>Customers’ satisfaction at 71% with 3 participants</p> <p>Five (5) children transitioned up to next classroom</p>  <p>Children Enrolled Oneida -58 Non Oneida – 8</p>	<ul style="list-style-type: none"> • Staff vacancies continue to be challenging to fill: 1 Supervisor, 2 teacher & 1 trainee position vacant. Continues to be average vacant positions per year. • Oneida culture and language opportunities in all classrooms • 75 parents and grandparents signed in at the Give Thanks feast • Child Care forwarded a business plan to increase fees which would decrease Tribal Contribution. • Grievance/Complaint Law approved and working on associated processes
Age	Wait list**	AGE GROUPS Enrolled	<p>■ 58- Oneida ■ 8-Non-Oneida</p>  <p>87% Oneida 13% Non-neida</p> <p>Goals: Update 75% of the policies & procedure by working with HRD</p> <p>Ensure teaching staff have clear expectations by updating 80% to go with their Job description.</p>	
0-1:	22	0-1: 6		
1-2:	21	1-2: 7		
2-3:	24	2-3: 20		
3-4:	19	3-4: 101		
4-5:	14	3-5: 10 (not in K) 4-5: 9		
Total: 103		Total Children = 66		

BIA EARLY INTERVENTION

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS						
<p>BIA Early Intervention provides services to infants, toddlers and young children with disabilities. These services are provided at several locations throughout the reservation and the following programs:</p> <ul style="list-style-type: none"> • FACE • Head Start • ARCC Childcare <p>All services to families and children are free, and services depend on the severity of the young child's disability. Children receive speech therapy, occupational and physical therapy and special education instruction. The program also offers advocacy services for children and parent education classes on early childhood topics throughout the year.</p>	<p>Number of children served (Oct – Dec): 61</p>  <table border="1" data-bbox="586 411 802 751"> <caption>Number of children served by age group</caption> <thead> <tr> <th>Age Group</th> <th>Number of Children Served</th> </tr> </thead> <tbody> <tr> <td>Birth to 3</td> <td>23</td> </tr> <tr> <td>3 to 6 yrs</td> <td>38</td> </tr> </tbody> </table> <p>Children in process of screens or evaluation: 24</p>	Age Group	Number of Children Served	Birth to 3	23	3 to 6 yrs	38	<p>New children receiving disability services: 11</p> <p>Meetings with Oneida or outside agencies: 19</p> <ul style="list-style-type: none"> 12 Oneida agencies 2 Brown County 1 Outagamie County 4 School Districts each month 	<p>No exercise @ work policy: Early Intervention does not have the resources to spare employees for this activity during the school year.</p>
Age Group	Number of Children Served								
Birth to 3	23								
3 to 6 yrs	38								

HIGHER EDUCATION

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
<p>Higher Education operates from GTC Resolution (8-12-96 A) and strives to promote higher education for all Oneida citizens.</p> <p>The Oneida Higher Education grant is funded through a combination of Tribal Contribution (96%) and BIA funding (4%).</p> <p>Oneida Higher Education is funding degrees from certificates through professional level degrees including doctoral degrees with a goal towards self-sufficiency.</p>	<p>1st quarter students funded: 198</p> <p>1st quarter students approved: 673</p> <p>1st quarter average amount: \$12,353</p> <p>Tribal employees: 105</p> <p>Average age: 29</p> <p>Most frequent age: 19</p>	<p>Phone Calls/Emails: 972</p> <p>Walk-in Clients: 126</p> <p>Applications created: 139</p> <p>Missing Letters Disbursed: 534</p> <p>Grades Processed: 247</p>	<p>Outreach events include Financial Aid Workshop, Booth at Oct. GTC Meeting, and High School Visits</p> <p>Working with MIS on data metrics and new reports.</p> <p>Working with Nathan King (Oneida Director Legislative Affairs on financial aid info. sharing restrictions from US Dept. of Ed. which is a major change to process.</p>

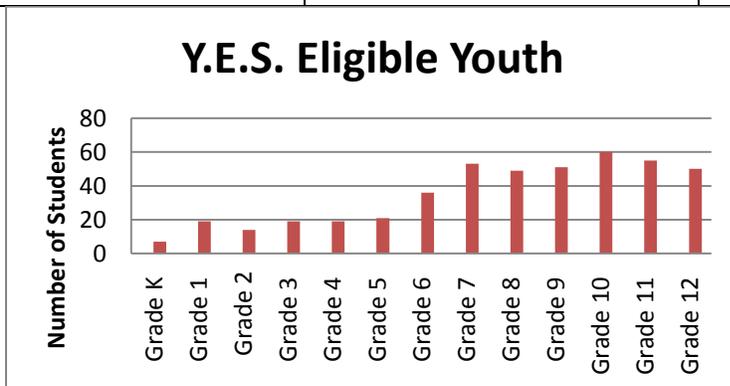


JOB TRAINING

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
<p>The Job Training Programs, the American Indian Vocational Rehabilitation (AIVR) and Workforce Innovation Opportunity Act (WIOA) are federally-funded pre-employment training activities that provide low-income, unemployed, under-employed and disabled Native Americans with services leading to achievement of a goal of entering, and successfully remaining in competitive, integrated workforce. The Job Training Program is the only programming available that provides dedicated employment and training services to these populations.</p> <p>The Job Training Department collaborates with:</p> <ul style="list-style-type: none"> • Behavioral Health/Mental Health Therapy • Oneida Higher Education • Community Education Center • Center for Self-Sufficiency • Indian Child Welfare • Child Support • MA/Food Stamps • State VR • Cultural Healing 	<p>October:</p> <ul style="list-style-type: none"> • 91 consumers • 6 New intakes • 4 determined eligible <p>November:</p> <ul style="list-style-type: none"> • 82 consumers • 3 New intakes • 2 determined eligible <p>December</p> <ul style="list-style-type: none"> • 72 Consumers • 7 New intakes • 3 determined eligible 	<p>Customers accessing Job Training services during first quarter:</p> <ul style="list-style-type: none"> • American Indian Vocational Rehabilitation = 736 • Workforce Innovation Opportunity Act = 167 • Job Center= 359 • Youth=207 <p>Most sought after services provided:</p> <ul style="list-style-type: none"> • Job search • Resume' development • Employment application assistance • Work clothing • Work tools • Guidance and counseling • Work experience • Skills training • Job shadowing • Mentoring • Education credentialing 	<ul style="list-style-type: none"> • Oct.: 80% of AIVR and 0% of WIOA program users who exited the program successfully entered employment. Goal: 50% • Nov.: 0% of AIVR and 100% of WIOA program users who exited the program successfully entered employment. Goal: 50% • Dec.: 40% of AIVR and 67% of WIOA program users who exited the program successfully entered employment. Goal: 50% • AIVR Administrator accepted interim Area Manager of Cultural Heritage position, AIVR Counselor serving as interim AIVR Administrator

YOUTH ENRICHMENT SERVICES (Y.E.S.) PROGRAM

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
<p>The Y.E.S. Program Staff provide academic enrichment, social support services, mentoring and promote college and career readiness to Y.E.S. Eligible children in the schools listed below:</p> <p>Green Bay’s King Elementary Green Bay’s Lombardi Middle Green Bay’s Southwest High Seymour Rock Ledge Seymour Middle School Seymour High School West De Pere Middle School West De Pere High School</p> <p>Funding for the Y.E.S. Program comes primarily from Tribal Contribution, at 92%, with Self-Governance at 8%. The majority of program funds are spent on wage related expenses to provide direct services to students.</p>	<p>430 Y.E.S. Eligible Youth (414 Oneida Enrolled). This number does not include the 204 American Indian youth served who are eligible for Title VII services or the 210 youth with incomplete paperwork.</p> <p>Y.E.S. youth are tribally enrolled or are 1/4 American Indian from a federally recognized nation(s)/tribe(s) and whose parents have complete Y.E.S. paperwork.</p>	<p>37% of referrals to YES were from teachers; 18% from Title VI staff</p> <p>Y.E.S. staff worked with students in various activities including:</p> <ul style="list-style-type: none"> • In school/after-school tutoring/academic reinforcement, development of organizational skills, mentoring and homework help. • Boys’/Girls’ Groups at Seymour’s Rock Ledge, Middle and High Schools and Lombardi Middle School. • After-School language classes at Lombardi, Rock Ledge, and West De Pere. • In-school Oneida Language and Culture Classes at Seymour Middle School. • Career Fairs & Native Nursing Summit 	<ul style="list-style-type: none"> • 55% of Client Profile & Development Plans Completed (of 430 YES students) • DPI Oneida Language Grants submitted • Partnership with Achieve Brown County continuing • Meeting with Laurie Asher, Seymour Superintendent • Community Partners Meeting with GBAPS, NWTC and UWGB • No Exercise @ work policy: YES does not have the resources to spare employees for this activity during the school year.



PARKS AND RECREATION AREA

EXECUTIVE SUMMARY

The Parks and Recreation Area had a great first quarter! There were several events available for the membership: Fitball and the Fall 500 challenge at the Fitness Center, Snow Shoe Tying classes and Mindful Walks with Experiential and had the annual Boo Bash and finally Breakfast with Santa to name a few.

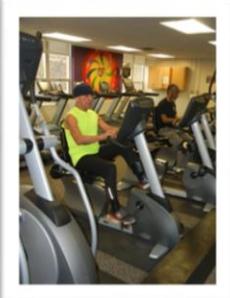
Fortunate to have a mild fall making the parks were available for several months for family activities as there are parks in most of the neighborhoods that are maintained by two (2) staff. During the fall, the staff is checking the playground equipment to see what may need to be decommissioned, pulling equipment and placing it into storage. Finally, the staff was doing their last landscaping cleanup and mow before the snowfall.

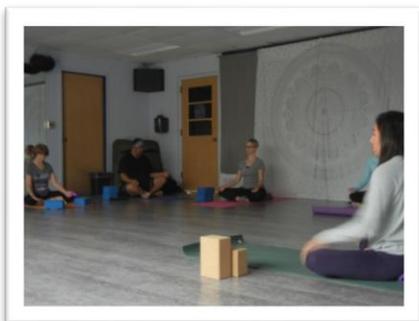
Experiential continues work within the school systems, either through group work or with the physical education classes. Mindfulness Walks are offered for the employee base to destress and get an Alternative Reasonable Standards (RAS) point for insurance needs. The Adventures Department also offered snowshoe tying classes and conducted indoor rock wall climbing for several different groups including local schools and Recreation.

Fitness had an increase in membership with the cooler weather and the need for employees to get a few more RAS insurance points. Fitness had the annual Fitball challenge for the members and raised funds for presents for the Annual Breakfast with Santa at Recreation. Fitness also provided swim lessons, worked with Diabetic Clients, Martial Arts Classes, Personal Training, and Group Fitness classes. In addition to the regular packed schedule with personal training, classes, and noon basketball, Fitness partnered with Employee Health Nursing for two (2) blood drives in October and December. Thank you to all who donated or those who attempted but were unable. The blood donations are greatly needed and appreciated.

Recreation was busy helping youth with tutoring, homework help, and ensuring they get their 60 minutes of moving in each day. The youth were also exposed to new art mediums and also participated in Character Club. The Recreation facility was also host to the Annual Boo Bash with 1,220 participants, and 730 people attended the annual Breakfast with Santa.

ONEIDA FAMILY FITNESS

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION	BULLET POINTS
<p>Oneida Family Fitness provides health and wellness opportunities for all ages and abilities, to include physical activities and preventative health education to encourage total well-being. This quarter we continued to focus on maximizing fitness and wellness programs to increase engagement and participation.</p>	<p>Base Number: 4,399 members</p> <p>AGE GROUPS</p> <p>0-3: 4-12: 13-17: 18-35: 36-54: 55-64: 65+:</p>	<p>Customers used Oneida Family Fitness services 21,259 times in the 1st quarter of FY18</p> <p>15 members; 85 visits 161 members; 1,511 visits 149 members; 1,491 visits 277 members; 4,053 visits 314 members; 5,896 visits 131 members; 2,846 visits 144 members; 3,601 visits</p>	<ul style="list-style-type: none"> • Fitball incentive challenge; fun challenge to increase facility participation during holiday season • Provided Swim Lessons; 27 participants • Provided 499 fitness classes (4,726 attendees) • Aquatic attendance (4,498 attendees) • Provided 148 Martial Art classes (1,322 attendees) • 97% customer satisfaction rating
<p>Collaborate with Oneida Programs to provide wellness opportunities.</p>		<ul style="list-style-type: none"> • Provide programming for Diabetic clients; working with Health Center to improve program • Provide exercise class for elders at Elder Services 1x week (72 participants) • Participated in the Community Boo Bash (1000+) • Assist Employee Health Nursing with Oneida Blood Drive in October & December (46 donors) • Ran a Fall 500 Week of Giving to raise money for the Breakfast with Santa event (77.4 miles obtained with \$75 raised) • Offer outreach fitness programming for headstart kids; Fit Kidz program (average of 80 kids for 1st qtr) 	
<p>Increase participant's KSA's of physical fitness and healthy lifestyles to reduce health care costs.</p>		<ul style="list-style-type: none"> • Offered RAS programs to finish up the 2017 year <ol style="list-style-type: none"> 1. Stress Management (15 participants) 2. Weigh of Life weight management (15 participants) • Provided 10 exercise demonstrations for the new Exercise at Work Policy training that was initiated on December 1 	



EXPERIENTIAL & ADVENTURE

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
Oneida Experiential & Adventures uses hands on interactive activities to help individuals and groups develop themselves to help them be their best selves.	Base number:740	Customers used Oneida Adventures services 2,013 times in the 1st quarter of FY18	Provided classes for a Diabetic Grant, Elder Services, Provided winter activities and sports training as well as activities for Reasonable Alternative Standard (RAS) Points for employees.
Provided healthy options for the RAS point system to help employees improve their health by making real behavior changes and discovering and overcoming road blockss preventing them from making these changes previously.	AGE GROUPS 18 -70	374	Provided mindful walks, bikes, and exercises for employees for RAS points in conjunction with Diabetic walks, hikes, and caving. The RAS Participants increased stress reduction awareness by 82% on post evaluations.
Conducted programs for: Health Center Diabetic Prevention Depression prevention Family Enrichment Programs Domestic Violence Support AODA Parenting program	18 -81	1723	Diabetic prevention participants increased their understanding and awareness on how to prevent and control diabetes. Our Elders self-reported significant Increase in morale 73% With 84% reporting a desire to try new (more physical) programs with us.
Youth program: Behavior Intervention, Character Development, Environmental, After school, Survival, Outdoor skills, High School Adventure, Archery, Youth Healthy Relationships	7-18	482	Provided Adventure curriculum for youth to connect to the natural world, each other and themselves.



RECREATION

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
The Oneida Recreation Department provides a quality after-school program for youth ages 7-18. During the after-school program, we try to accomplish the following outcomes:	Current Recreation Members = 736	Customers used services 8,467 times during the First Quarter.	October = 3383 November = 2359 December = 2725
1. Enhance the educational development of each participant - complete homework assignments and increase GPA.	AGE GROUPS		Homework Completion Rate: School Age Civic 54% CW 70% Adolescent Civic 9% CW 25% School Age GPA: CW = 2.82 (3) Adolescent GPA: CW = 2.69 (3)
2. Increase the physical activity of each participant - each member completes 60 minutes of activity daily.	0-5: 22	0	60 minutes of daily activity School Age Civic 25% CW 21% Adolescent Civic 14% CW 9%
3. Introduce the youth to various art mediums to encourage creative expression.	6-12: 400	2544	Exposed to new art mediums School Age Civic 54% CW 44% Adolescent Civic 30% CW 18%
4. Increase participant's awareness of the Six Pillars of Character Development.	13-18: 164	1312	Participate in Character Club School Age Civic 40% CW 47% Adolescent Civic 17% CW 17%
	19-35: 21	14	
	36-64: 41	64	
Elder Bingo	65 +: 88	482	* Average/Bingo Session = 47.
Youth team practices: (Baseball, Softball, Lacrosse, Basketball) and Men's Basketball	Varies	776	
Weekend rentals for the Cliff Webster Building	Varies	1186	Boo Bash Attendance = 1220
Guests - Boo Bash & Breakfast w/Santa	Varies	2089	Breakfast with Santa Attendance = 730



SOCIAL SERVICES AREA

EXECUTIVE SUMMARY

The Oneida Nation Social Service (ONSS) programs:

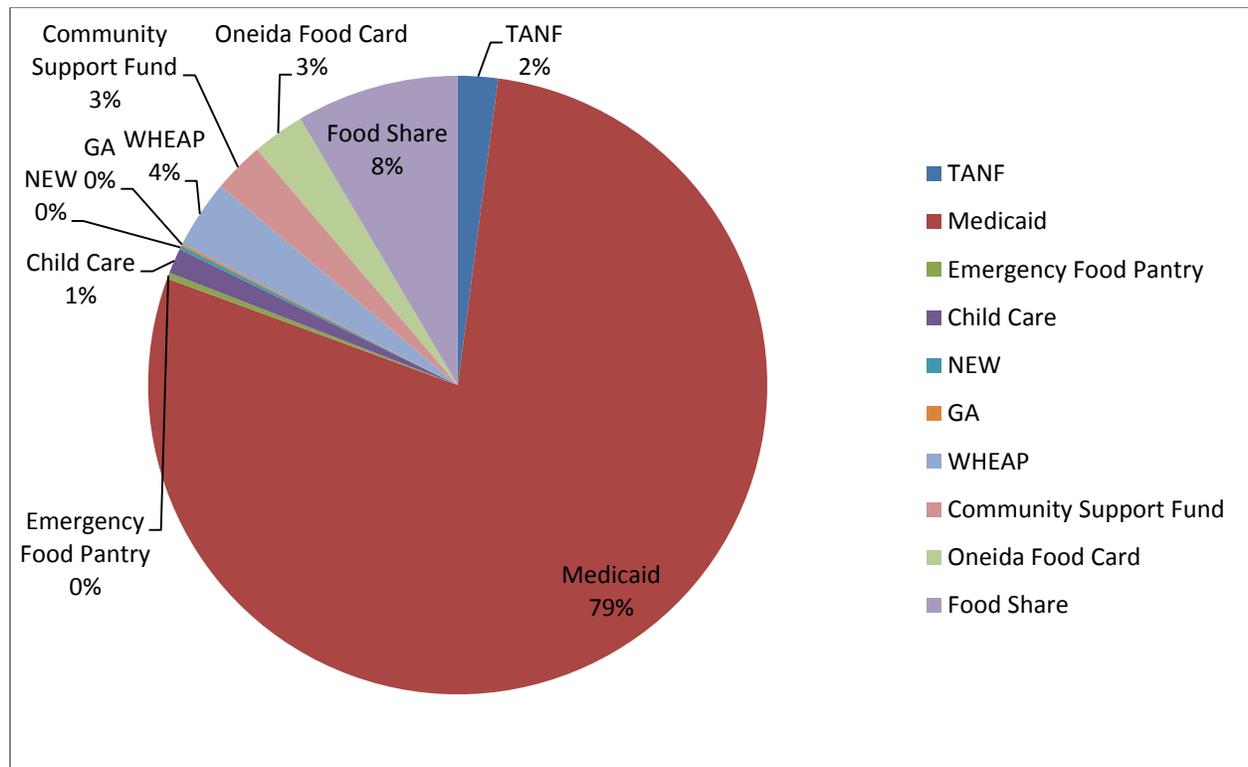
- Continues to serve the Oneida Nation population, meeting its diverse and challenging needs on and off the reservation
- Offers a variety of services which are listed below with multiple funding sources originating from the Oneida Nation, BIA, State and Federal agencies
- Supplies basic support and emergency assistance to families who meet eligibility requirements, and have a need
- Serves as an assistance unit and continues to be an important safety net for the membership
- Reflects the Oneida Nation's successes, through the services we provide

CHILD SUPPORT AGENCY

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
<p>The Oneida Tribe Child Support Agency establishes paternity and establishes and enforces child support court orders for non-custodial parents to pay support for food, clothing, basic necessities, as well as health insurance for the child/children. These needs being met provide financial as well as emotional well-being for this/these child/children.</p>	<p>Current cases as of 12/30/17: 2,913</p> <p>325-400 cases/case manager</p>	<p>10,728 customer contacts. This includes customer appointments, phone calls, and walk-ins.</p>	<p>Stipulation - 39 Hearings - 30</p> <p>This quarter the director attended the National Child Support Tribal Director's meeting as well as the Administration for Children & Families Native Grantee Meeting. We had one new case manager start in November. We still need to fill 1 Case Manager, 1 Paralegal, and 1 Finance Specialist positions.</p>

ECONOMIC SUPPORT SERVICES			
NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
Economic Support Department administers several public assistance programs. One of those is the TANF (Temporary Assistance for Needy Families) program. The TANF program promotes employment and personal responsibility to financially strengthen families. This is done by providing parents or caretakers with employment preparation and/or supportive services that promote family self-sufficiency and financial responsibility.	Agency TANF Cases: Cash Assistance: Oct 9, Nov 10, Dec 10, Total cases: 29 Crisis Assistance: Oct 2, Nov. 2, Dec 2, Total cases: 6 Diversion Assistance: Oct. 60, Nov. 21, Dec. 21, Total cases: 102	Oct. appts: 67 Nov. appts: 71 Dec. appts: 79 Oct. calls: 780 Nov. calls: 750 Dec. calls: 670 Oct. NS/NC: 18 Nov. NS/NC: 26 Dec. NS/NC: 26 Total Appts: 217 Total Calls: 2200 Total NC/NC: 70 Agency Appointments of IM and TANF	The program is currently in the process of getting their new three year plan approved by ACF. The Oneida Resolution should be signed after 2/14 and then can be sent on with the new plan (2018-2021). The program also has responded to their first program penalty for FY 2016. A response has been sent to ACF. The program is looking at ways to increase TANF participation and deliver better community education. There is tentative meeting to meet with Early Head Start, we also looks forward to meeting with Child Support, Job Training, and Family Services to do more collaboration with community activities.
Food Share and Medicaid Assistance is another program that assists low-income families by providing support in the form of food and medical assistance.	Agency Medicaid: Oct: 2261, Nov: 2269, Dec: 2226 Total: 6756 Agency Food Share: Oct: 570, Nov: 559, Dec. 542 Total: 1671		Oneida hosted the quarterly WI TANF/IM meeting in October.
Child Care provides assistance to low-income families through two separate sources. Wisconsin Shares is the state child care assistance program and is processed through the State Child Care system. CCDF (Child Care Development Fund) is a federal grant that is utilized to assist families whose income exceeds the State income guideline. CCDF child care subsidies also assist with some child care registration fees and other community initiatives. Family	Child Care Case Averages: WI Shares cases: Oct.- 65 Nov.- 50 Dec.- 50 Total- 165 CCDF Cases: Oct.-21 Nov.-20 Dec.-20	On-site Child Care center utilized: Oct. 114 Nov. -97 Dec.-82 Total - 293	Various Social Services clinics are held after hours that utilized the on-site center. Decrease in CCDF numbers due to change in eligibility for those who were utilizing both WI Shares and CCDF. Cold weather and the start of school may have affected the decreased use of the

Services Program grant assists with Respite care services.	Total- 61 FSP(Respite) Cases: Oct.-5 Nov.-5 Dec. 5 Total- 15		center. All ES staff received State Child Care Integrity Training on 11/29. Oneida hosted the quarterly WI Tribal Child Care Meeting in October.
Native American Employment Works (NEW) is a program to assist single individuals without minor children with work related expenses when starting new employment or retaining employment.	Oct. Applications: 12 Nov. Applications: 20 Dec. Applications 13 Total Applications: 45	65 phone calls in/out	N.E.W. support services consist of auto insurance, car repair, work clothing, and tools for employment.
General Assistance is a program designed to financially assist those with shelter costs for those living on the reservation, without minor child. This program assists those who are awaiting their SSD determination.	Oct Cases: 6 Nov Cases: 8 Dec Cases:8 Total Cases: 22	20 phone calls in/out and client contact.	Cash payment given to those for housing related costs including rent, mortgage and/or utilities.
WHEAP (Wisconsin Home Energy Assistance Program) is administered to low-income individuals or families in need of heat and electric assistance.	Oct Apps: 334 Nov Apps:216 Dec Apps 149 Total Apps: 504	Monthly Calls: Oct -75 Nov.80 Dec. 72 phone calls received for Energy Assistance/ Food Card/ Com Support and WHEAP programs.	The program had an onsite review 11/31-12/1. With new agency outreach efforts there has been an increase in program use with 32.29% to families served, in comparison to 2017.
Oneida Food Card	Oct New Users: 18 Nov New users: 30 Dec. New Users: 20 Total New users: 68	Walk-ins for food cards are steadily increasing.	The food card use continues to increase, this is likely to continue.
Oneida Food Pantry was established to address an emergency food assistance need in the community.	Oct New Users: 18 Nov New users: 30 Dec. New Users: 20 Total New users: 68	The pantry refers their walk-in customers to our agency; however, they will assist clients who are in need.	ES and the food pantry met on 12/29 to review possible options for ES staff to be at the Pantry to process both Pantry and Food Card apps.
Other: There were some changes made with staff. Stephanie Smith transferred to child support. Internally, Margo Kruse moved into the role of Community Support Case Manager and Wendy Haack moved into the role of Intake Coordinator. Due to the hiring freeze, filling our admin position was held off until we could reassign Crystal Hill from gaming as of 12/24/2017.	Director attended the Tribal ACF conference in Alexandria, VA in November. Review included several grant topics including; TANF, CCDF, and CSBG and budget integrity sessions. Director attended Child Care new worker training in October and WHEAP training in November.	Oct Walk ins: 138 Nov Walk ins: 137 Dec walk ins: 150 Oct Ph. C: 976 Nov P.C: 559 Dec P. C : 596 Total Walk ins: 425 Total Calls: 2131	



FOOD DISTRIBUTION

Executive Summary

The Food Distribution Program is a federally funded food assistance program to low income families. We service anyone within the Reservation boundaries that is within the income limits set by USDA. USDA is the funding source of our grant. Our grant is 75% funded by USDA and 25% funded by tribal contribution. We also service Brown, Outagamie, Door, Manitowoc, and Kewaunee Counties to households that have a member of a federally recognized tribe. They must also qualify according to their income. Our numbers are lower this quarter due to the fact that in October Oneida Tribal Members received a percapita and choose not to come in to pick up their food in that month.

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
Each month, participating households receive a food package to help them maintain a nutritionally balanced diet. Participants may select from over 70 products in the warehouse.	Total Base numbers for the quarter: Clients: 2,022 Families: 1,012	Customers utilizing program totaled 1,012 families Oct - 351 Nov - 300 Dec - 361	A total of 263 food deliveries to the elderly and disabled for the quarter.

	<p>AGE GROUPS 0-3: 36 4-9: 59 10-17: 59 18-30: 54 31-55: 90 56-70: 29 70+: 16</p>	<p>Phone calls forr the quarter: Outgoing: 324 Received: 832 Total calls: 1,156</p>	
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ELDER SERVICES

Elder Services has had some interesting changes happening over this 1st quarter of this fiscal year. First off, the elder apartments have been transferred underneath the new Comprehensive Housing Division. There has also been a variety of staffing changes that occurred which has given new life to the department and excitement grows to see what the new change will bring. Along with the staffing change, there have been updates made to the gift shop and library areas. The gift shop continues to do well and allows the elders to display their crafts and creativity. The Elder library has had some updates to include new material accessible to all elders. Another exciting update for is being approved for a mobility grant in the amount of \$16,300 which allowed for the installation of ramps for three (3) elders. And lastly, with the season change came the start of the snow plowing services for the elders and happy to announce that even though it has been a mild winter as far as snow fall is concerned salting duties were also added to the list of elder services. This means that the department will supply and also distribute the salt to all walkways and driveways for the elders. We thank you for your continued support and allowing us to provide services, attention, and assistance to the elder population.

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
Elder Services Mission: To assist our elders to maintain an independent, healthy, productive & quality lifestyle through love, caring & respect by services we provide. Vision: We provide quality home & community based programs for elders & are a model for other aging entities.	Brown & Outagamie Counties within Reservation Boundaries. Priority is given to elders age 70+ and age 55 to 69 with proof of disability. Base number: 1106		Twa wah tsile (We are all family) Elder Services provides home & community base services to assist elder to remain in their homes.
	AGE GROUPS		
Congregate Meals	Native American 55+ & Non-Native 60+	467 Unduplicated Clients for 3 months & 3432 Duplicated Services for 1 st QTR	Meals provides 1/3 of daily nutritional value
Home Delivered Meals	Native American 55+ & Non-Native 60+	212 Unduplicated Clients for 3 months & 4803 Duplicated Services for 1 st QTR	Meals provides 1/3 of daily nutritional value

Native American Family Care Giver	Native American 55+	68 Unduplicated Clients for 3 months & 432 Duplicated Services for 1 st QTR	Support groups, Respite Care & Voucher program
Outreach Services	Priority 70+ and disabled, Native American 55+ Non- Native 60+	39 Unduplicated Clients for 3 months & 272 Duplicated Services for 1 st QTR	Assessments & Monitor ERS
Elder Abuse	Native American 55+	0 Clients & 0 Services	Case Management *position vacant- waiting to be posted. All calls go to ASST. Program MGR
Home Repair	Priority 70+ and disabled, Native American 55+ Non- Native 60+	85 Unduplicated Clients for 3 months & 125 Duplicated Services for 1 st QTR	Minor handy man repairs
Home-chore	Priority 70+ & 55 - 69 disabled, Native American	211 Unduplicated Clients for 3 months & 433 Duplicated Services for 1 st QTR	Snow plowing & lawn services
Transportation	Native American 55+ & Non-Native 60 +	89 Unduplicated Clients for 3 months & 1186 Duplicated Services for 1 st QTR	Transportation to meal-site & bus passes for working elders
Information & Referral (I&R) & DRUMS	55+	1155 elders - DRUMS 13 elders called for information and 9 referrals were sent out for 1 st QTR	DRUMS articles posted monthly in Kalihwisaks, Elder Services Facebook page and A-Z email communications; Information & Referral varies from dangerous trees needing to be cut to financial assistance to looking for work

<p>The Aging & Disability Resource Specialist offers information and referrals on community and county resources to Oneida community members and functionally assesses members for Medicaid programs found through the Community Option Program Family Care, IRIS and Partnership programs through Brown and Outagamie Counties.</p>	<p>First Quarter number of phone calls per age group:</p> <p>22-59: 4 calls 60-99: 9 calls</p>	<p>Long Term (LT) Function Screens: 0 Brief/Short Term Service Coordination: 0 Follow-up: 9 Information & Assistance (I&A): 0 Options Counseling: 0</p>	<p>Topic categories discussed during calls in last three months: abuse/neglect, adaptive equipment, Alzheimer's and other Dementia, ancillary services, end of life, food, health, home services, housing, income maintenance, legal services, medial home care, mental health, nursing home, public benefits, financial-related needs, taxes, transportation, veteran services</p>
<p>Major Home Repair</p>	<p>Priority 70+ & 55 - 69 disabled, Native American</p>	<p>4 clients completed for 1st QTR</p>	<p>Repairs regarding health & safety *program on hold due to not being able to fill vacant position & not being able to get any scope of works done for elders on wait list</p>

FAMILY SUPPORT SERVICES

Executive Summary

Indian Child Welfare (ICW): The department came into contact with 469 children/families through on-going case management, intake/investigation or referrals. We continue to see success with Title IV-E claiming and a steady increase each claiming quarter in the reimbursement we are receiving which is helping offset expense for the department. State's FY Quarter 3 which ended September 30, 2017, we received notice November 15, 2017 that our reimbursement was \$42,658.36. The department began implantation efforts towards the Children's Code once the budget was adopted in October. The ICW department has completed identifying space and ordering additional office equipment in order to prepare for additional staff, job descriptions were updated; positions began to be filled as well as continued work on MOUs. Department will continue to move through the implementation phase. Department attended LOC meeting 12-22-17 where the quarterly report was provided on the implementation plan. The department continues to struggle with the level of cases (63% of On-going cases) impacted by substance abuse, mainly opioid and methamphetamines. Efforts continue by identifying community resources to better meet the needs of the families impacted. The department has begun to meet with Oneida Behavioral Health bi-monthly to receive updates on resources as well as process. The department has reached out to NEW Community shelter for resources on drug testing and continues to work with Darjune Recovery Café as a resource for the families we serve.

Foster Care: Program continues to recruit and license new foster homes, some child specific and others open to foster placements. Department staff attended Breakfast with Santa on Saturday December 2nd at NWTC to work towards recruitment. Two foster homes were licensed and three are in process of becoming licensed during the 1st quarter. Program continues to work in collaboration with the State, Local County, and community on recruitment initiatives as lack of foster homes is a trend across the county.

Parenting: Session 3 of the Parenting Education Class (PEC) began in September and concluded in November, with 14 starting and 9 graduating. Trauma Informed Parenting (TIP) offered during this quarter concluded November 28th with a total of 21 participants who attended and completed the series of sessions. Community, Tribal and State wide interest increases in our Parenting programs offered and requests for services continue to increase. Trauma Informed Parenting Presentations/Trainings continue to be provided to: Oneida Nation Schools in a series of trainings (9 hours of training provided). The program continues to offer education to other Tribal departments on the curriculums offered. The additional Parenting Program Coordinator was hired during this quarter and will begin transitioning the next quarter which will allow the program to meet the needs.

Prevention: Services for youth resumed in the schools as the school year began during this quarter. The program was able to fill the second Community Advocate-Prevention position during this quarter and continues to work toward providing youth education on substance abuse, self-esteem and overall wellness. Community education planning also continues now that the program is fully staffed.

Domestic Abuse: Program continues to offer group and individual services to individuals and families who are experiencing domestic abuse or are survivors of sexual assault. Services are offered in the office, in the home and school/community setting. Vacancies in our Community Advocate Youth Female & Male positions have been vacant this quarter which has limited services offered to youth who are impacted by Domestic Abuse. The program hosted a community event for Domestic Abuse awareness on October 14th which involved speakers, a walk and meal. The program was also able to host another community event on education and awareness on the 2 Spirited Community December 27th.



Annual Domestic Abuse Awareness Event

NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
<p>Indian Child Welfare: Program area provides child protection services, parenting services and foster care services to Oneida children and families in accordance with the Indian Child Welfare Act and the Children and Family Services Department Mission. Program goal is to assist/support families in their effort and ability to provide a safe, nurturing and stable home environment for their children.</p>	<p>469 quarter total</p> <p><u>On-going (open cases-duplicated):</u> October:101 November: 105 December:105</p> <p><u>Intake:</u> October: 61 November:43 December: 54</p>	<p>1554 quarter total</p> <p><u>Contacts per month:</u> October: 642 November: 710 December: 676</p> <p>(Client contacts; home visits and all correspondences during the quarter.)</p>	<p>* Break out included in Demographics section</p>
<p>Foster Care: License foster homes and kinship providers to offer placements for youth in out of home care (voluntary and involuntary) that follow the placement preferences set forth by the Tribe.</p> <p><u>Number of Licensed Foster Homes:</u> 9 General homes 2 Child Specific</p>	<p>201 children in placement</p> <p><u>Kinship Care:</u> October: 52 November: 52 December: 53</p> <p><u>Foster Placements:</u> October: 12 November: 12 December: 13</p> <p><u>Respite:</u> October: 1 November: 1 December: 5</p>	<p>2,559 quarter total of contacts</p> <p>(Client contacts; home visits, phone calls, emails, letters, text messages during the quarter)</p>	<p>* Breakout included in Demographics section</p>

<p>Parenting: Provide parenting education & support to families in the community who are either mandated to meet conditions or voluntarily participating.</p>	<p>98 quarter total voluntary: 70 mandated: 21 teens: 7 *duplicated-program may have served same individuals from Oct.-Dec.</p>	<p>732 total of client contacts for the quarter Client contacts are: Client/participant contacts; group session, individual sessions, home visits and all correspondences during the quarter.</p>	<p>*35 participants in Parent Education Class (PEC) . * 63 participants in Trauma Informed Parenting (TIP)</p>
<p>Prevention: Services provided to youth K-8th grade as well as families designed to support them in healthy and safe lifestyles.</p>	<p>277 base number for the quarter *Youth group session's attendee totals for the quarter. *27 different youth groups offered. Most of them over a series of weeks.</p>	<p>722 attendees during the quarter *may have duplication or cross over from each group-total attendees for all youth group sessions offered during the quarter. *Reflects number of individuals who attended each time it was offered during the quarter.</p>	<p>*youth groups offered in school *community education events</p>
<p>Domestic Violence: Education on healthy relationships, crisis and on-going support to families who are experiencing or who have experienced domestic violence.</p>	<p>327 base number of attendees for the quarter *5 different adult groups offered weekly through the quarter.</p>	<p>529 attendees during the quarter *Individual sessions/crisis response/correspondences such as; letter, emails, phone calls, text messages etc. *Numbers may be duplicated over the course of the quarter due to same attendees attending sessions that are offered over a series of week.</p>	<p>*Women's Group *Men's Group *Individual and crisis support offered</p>

HEAD START/EARLY HEAD START

Executive Summary

The Oneida Head Start Program serves low-income children and families living on and off the reservation in the service area of Brown and Outagamie Counties.

Head Start funding and participation for the 2017/2018 program year:

- Federal funding received to serve one hundred and eight (108) children.
- State of Wisconsin funding received to serve an additional 12 children.
- Oneida Tribe provided funds for 32 children for Head.
- Total of 152 Head Start children slots available in Head Start.
- Head Start has two (2) program sites with eight (8) classrooms currently serving 144 children.
- Hours of operation are 9:00-1:00, Monday – Friday with 160 contact days.
- There are 2 Duration (extended day) classrooms that operate from 9AM to 3PM and 170 contact days.

Early Head Start Home Based Program participation:

- 60 slots available in Early Head Start.
- Serves fifty-two (52) infants and toddlers and eight (8) pregnant women, for a total of 60 participants.
- Hours of operation will be 8:00 A.M. – 6:30 P.M., Monday – Friday.
- The program will offer 48 weeks of home visiting.
- The service area is the Oneida Reservation and a ten (10) mile radius around the reservation. This service area includes both Brown and Outagamie Counties in Wisconsin.

New Changes:

HS Extended Duration: As of September 2017 the HS program began operating two (2) extended duration classrooms, one (1) at each site serving 40 of the HS children. The hours of operation will be 9:00-3:00, Monday-Friday with 170 contact days. These extended duration classrooms primarily serve income-eligible, four (4) year old children, within single-parent working families. The program continues to assess and determine potential opportunities in the fall to offer this type of programming for additional classrooms.

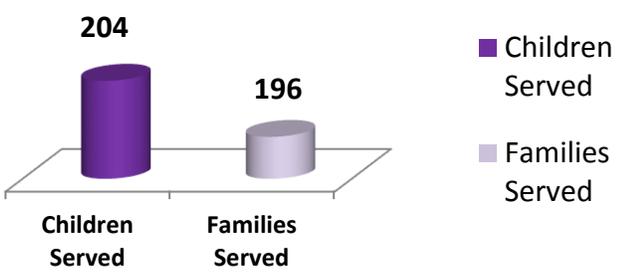
The Norbert Hill Center re-located new space renovated for use by the Head Start program has been working well, there were minor changes that needed to be made such as the parent entryway for pick-up and drop-off, but overall the site has been a positive change.

The Early Head Start building, an addition on to Three Sisters HS building, is on schedule and is to be completed in May. EHS staff will be moving in June.

HS/EHS Team building activities were incorporated during staff in-service day and to introduce the new Director.

EHS has exceeded in the performance requirements compared to state and national programs using the Parents As Teachers (PAT) model to provide home visiting services to the Nation’s families.

The HS/EHS Policy Council elected new officers for the program year and include, Tamar Ramirez, Chair; Amber Denny, Vice-Chair; Crystal Wozniak, Secretary and Cassandra Metoxen, Treasurer;

NARRATIVE	DEMOGRAPHICS	FREQUENCY/UTILIZATION
<p>HS Enrollment:</p> <p>There was a Wait list of 8 children.</p> <p>The Extended Duration classrooms operating 6 hrs. Per day at Three Sisters and NHC sites was fully enrolled with 40 children.</p>	<p>HS Children Served: 144</p> <p>HS Families Served: 140</p> <p>EHS Children Served: 60</p> <p>EHS Families Served: 56 Families</p> <p style="text-align: center;">Total HS/EHS Children & Families Served</p> 	<p>Hs enrolled and served 144 children during the quarter</p> <p>EHS served 60 children during the quarter</p>

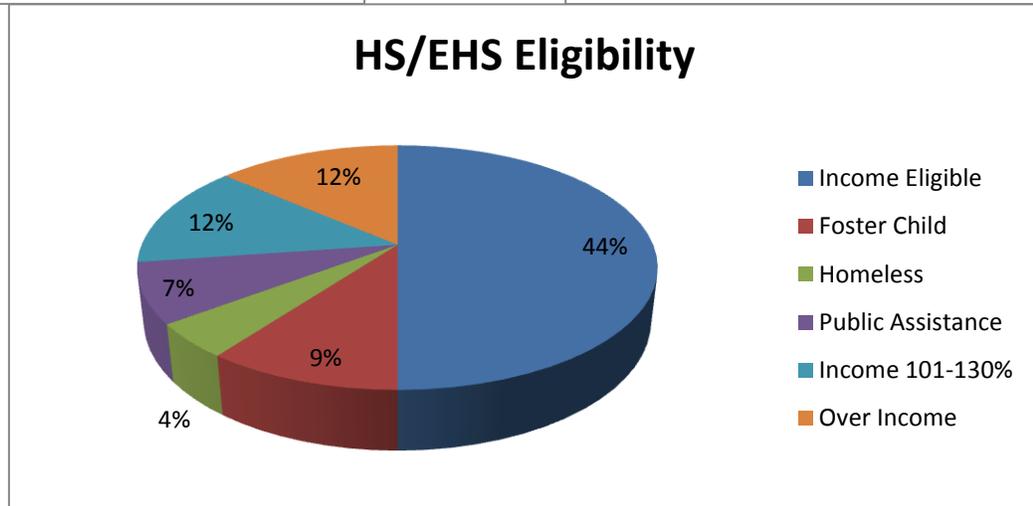
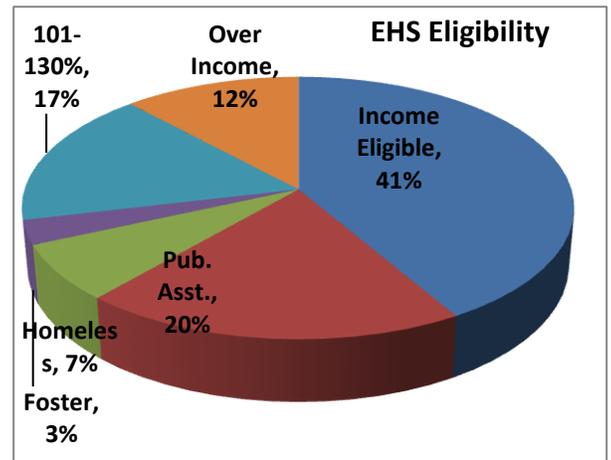
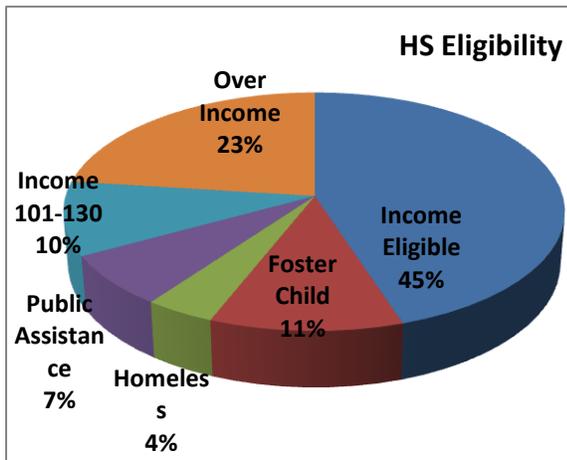
<p>Head Start</p> <p>Monthly Attendance: Children monthly attendance required to be at least 85%</p> <p>Average Daily Attendance: HS served up to 127 children daily</p> <p>Early Head Start</p> <p>Home Visiting: there were 291 home visits provided to children and their families during the quarter.</p>	<p style="text-align: center;">HS Attendance</p> <table border="1"> <caption>HS Attendance Data</caption> <thead> <tr> <th>Category</th> <th>Oct. 2017</th> <th>Nov. 2017</th> <th>Dec. 2017</th> <th>Overall</th> </tr> </thead> <tbody> <tr> <td>Monthly Attendance</td> <td>91%</td> <td>91%</td> <td>88%</td> <td>90%</td> </tr> <tr> <td>Average Daily Attendance</td> <td>127</td> <td>126</td> <td>120</td> <td>125</td> </tr> </tbody> </table>	Category	Oct. 2017	Nov. 2017	Dec. 2017	Overall	Monthly Attendance	91%	91%	88%	90%	Average Daily Attendance	127	126	120	125	<p>Head Start: Monthly & Average Daily Attendance (ADA).</p> <p>Early HS: 291 EHS Home Visits provided</p> <p>24 Pregnant Woman Visits Provided</p> <p>55 Children served through Socialization Experiences (Group) held 2 times per month</p>
Category	Oct. 2017	Nov. 2017	Dec. 2017	Overall													
Monthly Attendance	91%	91%	88%	90%													
Average Daily Attendance	127	126	120	125													
<p>Socialization Experiences:</p> <p>Attendance for group experiences was 55 children and their families.</p>	<p style="text-align: center;">EHS</p> <table border="1"> <caption>EHS Data</caption> <thead> <tr> <th>Category</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Home Visits</td> <td>291</td> </tr> <tr> <td>Pregnant Women Visits</td> <td>24</td> </tr> <tr> <td>Children/Families Served Socialization Experiences</td> <td>55</td> </tr> </tbody> </table>	Category	Value	Home Visits	291	Pregnant Women Visits	24	Children/Families Served Socialization Experiences	55								
Category	Value																
Home Visits	291																
Pregnant Women Visits	24																
Children/Families Served Socialization Experiences	55																

Head Start/EHS Eligibility Determination: The family’s income is equal to or below the poverty line; or,

The family is eligible for or, in the absence of child care, would be potentially eligible for public assistance; including TANF child-only payment, or, the child is homeless, or the child is in foster care.

Additional allowances for Indian tribes. A tribal program may fill more than 10 percent of its enrollment with participants who are not eligible under the criteria if: The tribal program has served all eligible pregnant women or children who wish to be enrolled from Indian and non-Indian families living within the approved service area of the tribal agency; At least 51% of the program’s participants meet

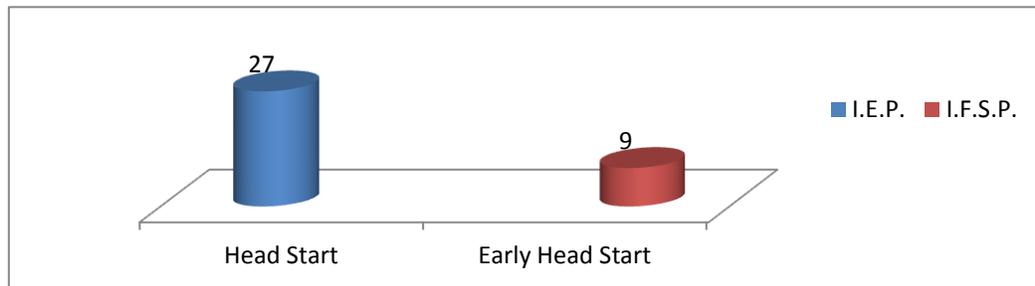
HS Eligibility-HS Standard: §1302 Subpart A -Eligibility, Recruitment, Selection, Enrollment, and Attendance; §1302.12 Determining, verifying, and documenting eligibility.



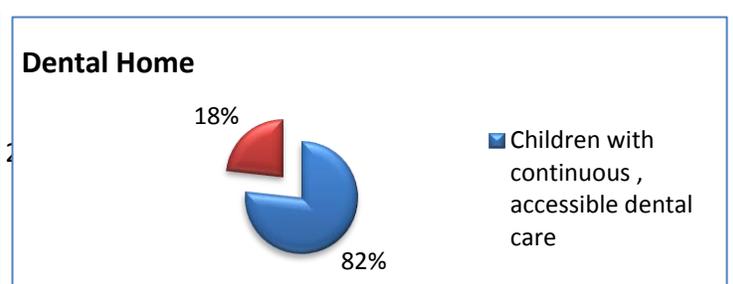
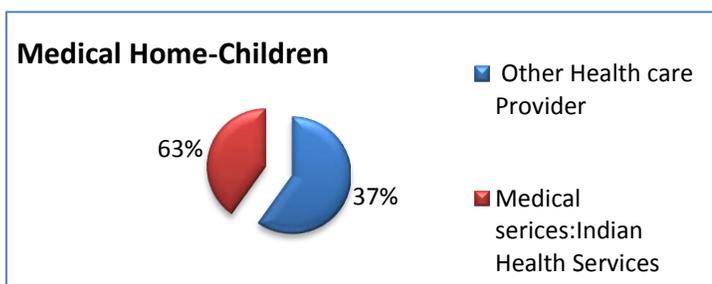
HS/EHS Health and Disabilities

Disabilities:

- 27 Head Start children are on an Individualized Education Plan (IEP) for speech/language.
- 9 Early Head Start children on an I.F.S.P.



Health:

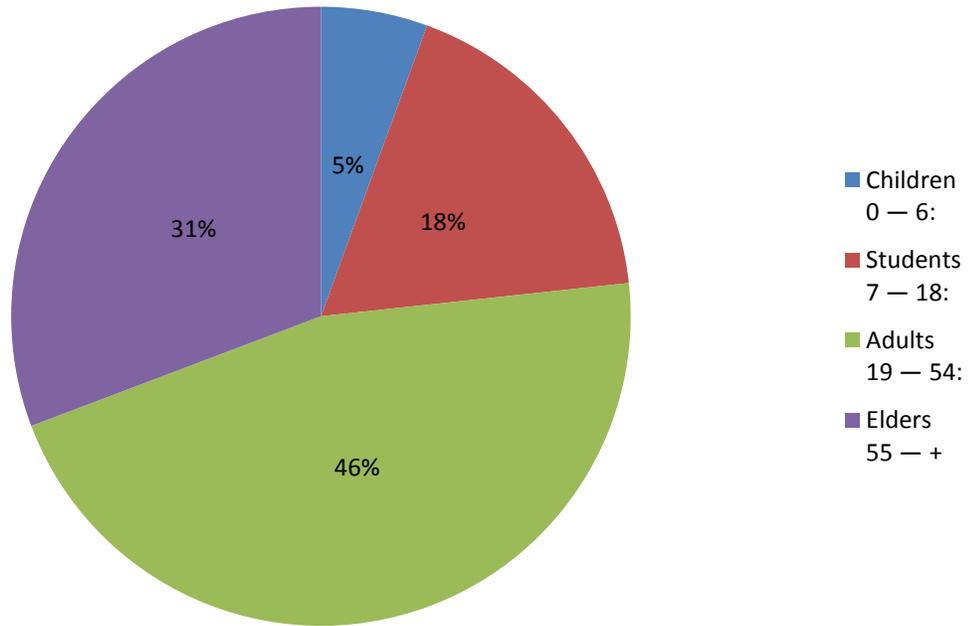


<p>Education & Child Development</p> <p>Progress of children and the program towards achieving school readiness in each of the seven domains</p> <p>HS children served=135</p> <p><i>EHS children served = 53</i> <i>Those not assessed were due to children entering or exiting during that quarter and were not eligible for reporting, or were under the age of 1</i></p>	<p>National Indian DHSA - Oneida HS/EHS</p> <p>Fall 2017/2018- Combined EHS & HS</p> <table border="1"> <thead> <tr> <th></th> <th>Below</th> <th>Meeting</th> <th>Exceeding</th> </tr> </thead> <tbody> <tr> <td>Social-Emotional</td> <td>67/35.64%</td> <td>94/50%</td> <td>27/14.36%</td> </tr> <tr> <td>Physical</td> <td>38/20.21%</td> <td>116/61.7%</td> <td>34/18.09%</td> </tr> <tr> <td>Language</td> <td>54/28.72%</td> <td>113/60.11%</td> <td>21/11.17%</td> </tr> <tr> <td>Cognitive</td> <td>56/29.79%</td> <td>100/53.19%</td> <td>32/17.02%</td> </tr> <tr> <td>Literacy</td> <td>65/34.57%</td> <td>95/50.53%</td> <td>28/14.89%</td> </tr> <tr> <td>Mathematics</td> <td>87/46.52%</td> <td>75/40.11%</td> <td>25/13.37%</td> </tr> <tr> <td>Spanish Language</td> <td>0/0%</td> <td>0/0%</td> <td>0/0%</td> </tr> </tbody> </table> <p><i>**Mathematics-1 report not finalized</i></p> <p>The data for the first assessment for the 2017-2018 school years has been completed in each of the Teaching Strategies – Gold domains. The scores reflect the Head Start and Early Head Start children. The goal is for children to meet or exceed the expectation in each area with 85% or above. The teaching staff uses this data to plan their lessons, individualize for each child and work with parents to set goals to prepare their child for Kindergarten.</p>		Below	Meeting	Exceeding	Social-Emotional	67/35.64%	94/50%	27/14.36%	Physical	38/20.21%	116/61.7%	34/18.09%	Language	54/28.72%	113/60.11%	21/11.17%	Cognitive	56/29.79%	100/53.19%	32/17.02%	Literacy	65/34.57%	95/50.53%	28/14.89%	Mathematics	87/46.52%	75/40.11%	25/13.37%	Spanish Language	0/0%	0/0%	0/0%
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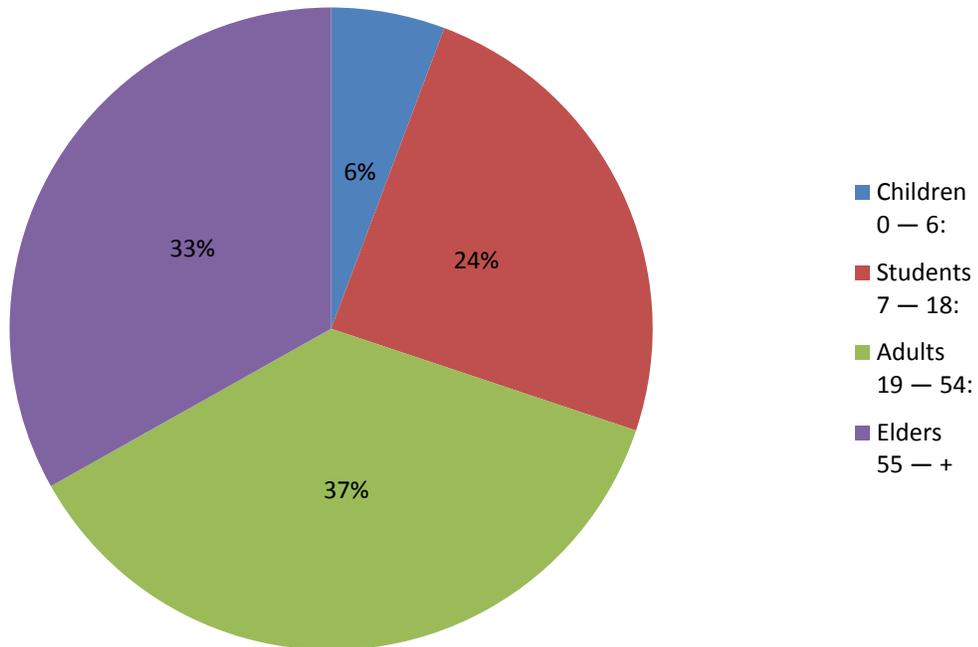
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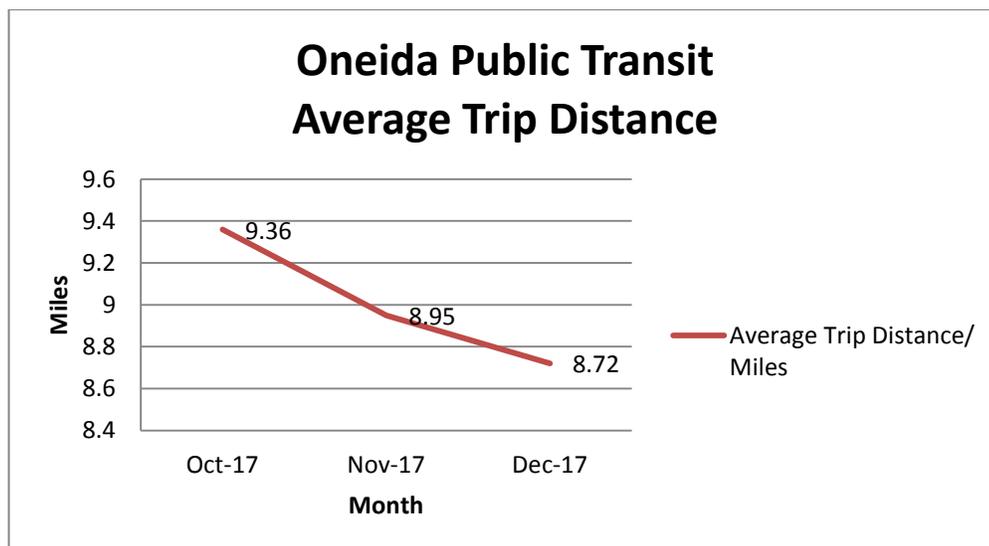
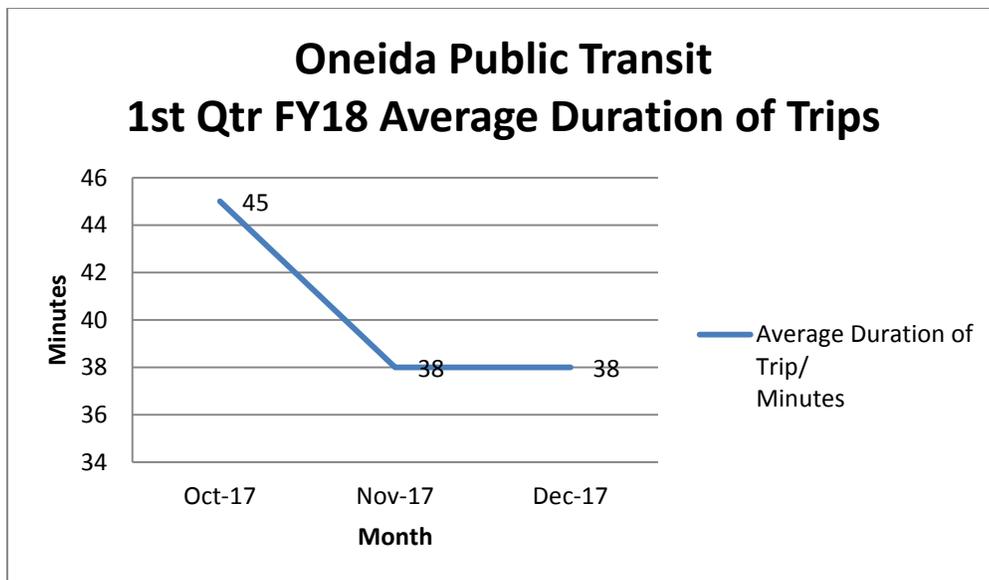
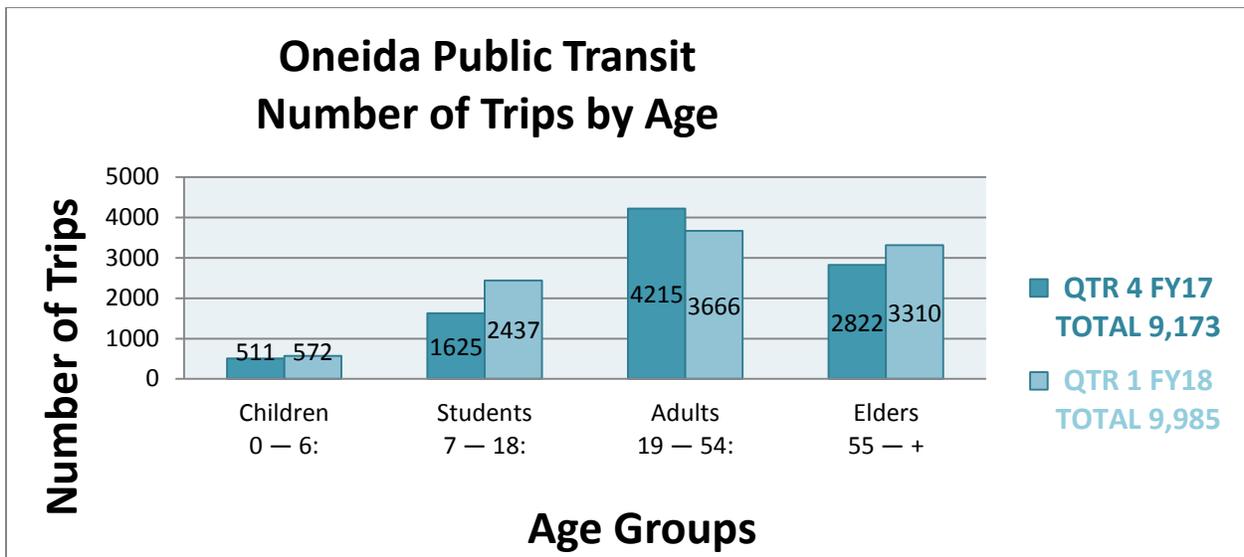
NARRATIVE	DEMOGRAPHICS	FREQUENCY/ UTILIZATION	BULLET POINTS
<p>Oneida Public Transit provides secure-reliable transportation at a reasonable cost to our passengers of the Oneida community and surrounding communities and is paid for with grants from Wisconsin Department of Transportation (WisDOT), Federal Transportation Administration (FTA), and Tribal Contribution.</p> <p>Oneida Public Transit implemented the Ecolane Automatic Dispatch Software System for 10 months.</p>	YTD Total Number of Clients: 1722	YTD Total Number of completed Trips: 9985	<p><u>Total Number of clients increased 14.4% from Quarter 4 FY17. This is a 217 client increase.</u> Overall, seasonal increase as Youth 7—18 are back to school and attending after school activities such as the Recreation Program, sports, etc. Elder Trips show a significant increase compared to Qtr 4 FY17 possibly because the Elder Activity Trips weren't counted in previous report.</p> <p>To Date: On-Time Performance is currently at 82%. Factors to be considered: Increase in clients, decrease in staff, reorganization, weather, and training. Target Goal: 95%</p>
	AGE GROUPS		
	Children Ages 0 — 6:	572	11.9% increase compared to Qtr4 FY2017
	Students Ages 7 — 18:	2,437	50.0% increase compared to Qtr4 FY2017
	Adults Ages: 19 — 54:	3,666	13% decrease compared to Qtr4 FY2017
	Elders Ages: 55 — +	3,310	17.2% increase as compared to Qtr4 FY2017
	Total Number of Completed Wheelchair Trips	455	26.7 % decrease compared to Qtr4 FY2017
	Total Miles	78,298	5.0 % Increase compared to Qtr4 FY2017

Oneida Public Transit FY 2017 QTR 4 TOTAL TRIPS 9,173



Oneida Public Transit FY 2018 QTR 1 TOTAL TRIPS 9,985





Oneida Business Committee Agenda Request

1. Meeting Date Requested: 1 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

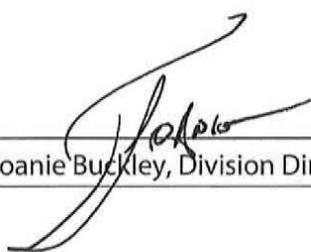
Budgeted - Tribal Contribution

Budgeted - Grant Funded

Unbudgeted

5. Submission

Authorized Sponsor / Liaison:



Primary Requestor/Submitter:

Your Name, Title / Dept. or Tribal Member

Additional Requestor:

Name, Title / Dept.

Additional Requestor:

Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

The attached documentation is the FY18 Quarterly Report (October 2017 - December 2017) from departments and programs within the Internal Service Division. Areas include Management Information Systems (MIS), Grants Office, Tsyunhehkwa, Oneida Community Integrated Food System (OCIFS), Oneida Emergency Food Pantry, Veteran Department, Big Bear Media, Kalihwisaks, and Tourism.

BC approval of the ISD First Quarter Report for FY18 as information only is requested.

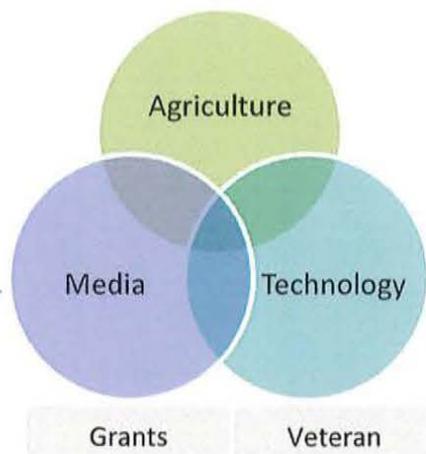
1) Save a copy of this form for your records.

2) Print this form as a *.pdf OR print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org

INTERNAL SERVICES DIVISION

First Quarter Report FY18 (Oct - Dec 2017)



The beginning of FY18, kept many departments in high gear and engaged with the community, especially for those departments related to agriculture and tourism. Just after they finished a large event with the Apple Fest late September; they pulled together to display Oneida through the Food Sovereignty Summit October 2-5. On the heels of the Food Sovereignty, the Tsyunhehkwa team moved into the Harvest Fest for the community and the Husking Bee for school age youth. We offer our appreciation for the many volunteers, to those who participated in the corn soup cook-off, and those who brought their families to the events.

Before the team could catch their breaths, they were working with the pantry to process applesauce; and then right into processing Thanksgiving Corn Bread orders. Meanwhile, the rest of the team was working on harvesting the white corn through November, educational sessions, and food films. While the aquaponics team was harvesting their lettuce for the school.



The Print & Mail Shop, worked through some stressful operational issues –late nights and on weekends to get the GTC packets designed, printed, and mailed; and continuing to look for cost savings for the 7,000 plus packets that go out per mailer. Teamwork was a primary focus, both within the department, as well as with other departments to help stuff the packets.

The Kalihwisaks was constantly in and out in the field, covering the various events; and the royalty were busy with their engagements. Grants continued to seek new funding, even as federal budgets are reduced, and grants become more competitive.

In addition, the Departments are working on their strategic goals to align with the new Business Committee's goals and work to create measureable outcomes, with value-based considerations.

The departments will begin to transition to three initial common goals:

- Advancing On^yote?aka Principles through **Community Engagement**
- Improving Organizational Changes toward **Operational Sustainability**
- Inspiring Yukwatsístayλ (Our Fire our Spirit Within) through value-based **Development**

Management Information Systems

ISD - Fourth Quarter Report FY17



Strategy #1 Deliver Business Technology Solutions

Planning, preparation and execution of the IT services for the new Retail outlet, Four Paths was completed. The activities included infrastructure (voice/data cabling, time and attendance, telecommunications, surveillance and point of sale. This was a significant team effort that was completed on time and within budget.



The MIS team continues to work with the Oneida Museum to provide a POS capability that meets their unique needs. That effort has resulted in a design that utilizes Oracle/Micros point of sale system that is used within the Gaming food & beverage environment and a back office solution (Yellow Dog) that can support the Museum's product tracking and inventory control needs. The system has been acquired and installed however challenges with device interfaces have delayed the production date. The original system was targeted for a go-live in 1st quarter FY'18 however that has been pushed to 2nd quarter FY'18.



Strategy #2 Promote Information Sharing & Collaboration

The OnBase solution continues to be introduced in to new areas. During this past quarter several Oneida business units were added to the growing list of OnBase customers. The newly passed Nation's Children's Code (OBC Resolution #07-26-17-J) created a significant need for better document and information management within the ICW department. While the Oneida Gaming Commission was anxious to improve their monitoring and incident response activities. In addition, planning for the OnBase system upgrade continued. The upgrade is expected to resolve several issues and will include a feature required for the OBC Agenda Management project. Tentative schedule for the upgrade is 2nd quarter FY'18.



Strategy #3 Optimize Use of Resources

During this quarter MIS finalized the planning and secured quotes for the replacement/upgrade to three of the Nation's IT infrastructure environments. The areas affected include the storage area network (SAN), mid-range platform (iSeries) and backup solution. The project will provide the Nation with state of the art solutions at a lower cost than the current solutions. More information regarding this will be provided in upcoming reports.

The MIS team has begun organizing and preparing for the introduction of Talent Management software. The project is in its early stages and includes defining expectations and outcomes. Elements of the Talent Management software include On-boarding, Skills Bank, Employee Performance Management, Succession Planning, and so much more. Proper planning and preparation will be essential for a successful project. As of this writing it is too early to provide any timetable but will continue to provide updates as the project unfolds.

MIS Goals for FY'17 -18

Deliver Business Technology Solutions

Develop mobile app's to support the goals and objectives associated with Oneida Language Preservation and On^yote?a.ka principles.

Promote Information Sharing & Collaboration

Leverage the recent deployment of Passport (POS) solution within the Retail environment. This activity is in alignment with the Nation's 4 Strategic Directions, specifically a commitment to building a responsible Nation.

Optimize Use of Resources

Phase I of the Surveillance project will be completed. The outcome will support the standardization of the Nation's surveillance environment while enhancing the Nation's overall security posture.



GRANTS OFFICE

ISD First Quarter Report FY18

Strategy 1: Enhance tribal services with external funding.

Goal: \$7 million in funded grants

Our goal is \$7 million in grant funding thru the Grants Office assistance. In FY 2017 we had a total of \$6.98 million in external funding. Due to federal budget cuts, grant dollars are harder to obtain as funding agencies want to see their funding distributed more. However, there is always a positive impact as grant funding provides additional services, programming, and jobs for our membership and community.

- Currently we have a total of \$1,235,275 in funded grants in FY 2018, with \$392,115 pending.

Strategy 2: Become a resource for a 1-stop shop for funding/grant data and services.

Goal: Grants resource center

- Provide assistance for various programs and enhanced their ability to obtain external funding.
- Maintaining tribe-to-tribe, grantor-to-grantee, and other internal and external relationships to increase our opportunities.
- Maintaining a database that includes all funded, denied, and pending grants; and grant opportunities sent out and responses.
- We will be reaching out to programs within the Oneida Nation once again in an effort to collect and maintain overall data and statistics on an on-going basis.

Strategy 3: Enhance tribal and community efforts in fundraising thru the development of a 7871 fund unit.

Goal: Oneida Youth Leadership Institute – a tax exempt fundraising tool.



- The Grants Manager also acts as Executive Manager of the OYLI, as the entity is within the overall authority of the Oneida Nation.
- Working SOPs and processes/policies are being developed with Accounting and Purchasing. All disbursements are on hold until the Disbursement Policies and Procedures are approved per our Charter. Listed below is information regarding our account at Bay Bank.
- The OYLI Board will be going through goal setting exercises to help move forward with planning.
- Once we get OYLI policies & procedures approved the Website will be launched. Our goal is by end of the Second Quarter.

-WPS donation to LPGA Youth Gold Clinic	restricted	\$10,000
-Private donation	unrestricted	\$100
-Packer ticket sales	unrestricted	\$1,010
-Deposit for Team WI	restricted	\$400
-LPGA Volunteer Fundraiser	restricted	\$8,145
-Deposit for Lacrosse team	restricted	\$2800

TOTAL \$22,455

TSYUNHEHKWA

ISD First Quarter Report FY18



Farm

Summary

Harvest time is always very exciting and busy for Tsyunhehkwa. There are several large events that occur in the first quarter including the Husking Bee, Harvest Fest, Education Days, and this year, the Food Sovereignty Summit. At each event the staff and volunteers work together educate participants and share different aspects of our farm. This year's white corn harvest was completed the last week in November with volunteer support throughout. We are pleased with the amount of braids and the size of corn for seed saving. Also the moisture levels of the corn indicated that we could begin processing. The cold weather delayed the setup of our winter feeding system, however we were able to make it functions. We continue to track production levels and get support from departments and staff.

Equipment and Improvements

Tractor added a heating element to help start in cold weather. Greenhouse Roof Fixed.

Cannery

Production & External Orders

Hulled White Corn 100 lbs., Corn Bread Flour 350 lbs., Corn Bread – ground weight 50 lbs., Fresh Hull Corn 25oz. pkg. 117, Corn Bread loaf 244 lbs., Applesauce 244 pints, Apple Butter 152 ½ pint, Raspberry Jam 65 ½ pint, Strawberry Jam 76 ½ pint, Tripleberry Jam 87 ½ pint, Smoked Turkey Legs 50 lbs.

Community Food Processing

14 Community members use the cannery facility and equipment to process: Applesauce 62 quarts, 39 pints, & 19 ½ pints, Strawberry Cornbread 100, Venison to Hamburger 21 lbs., Dehy Corn 119 lbs., Raspberry Jam 16 pints, Blackberry Jam 13 pints, Cherry Jam 14 pints, Ground Elk 13 lbs.

Holiday Orders

The Cannery made 576 corn bread for Thanksgiving! ONHS students help to make and package the corn bread to help complete the order. We save 400 lbs. of white corn for holiday orders and will resume supplying the Oneida Market with white corn products in mid-January.



Workshops, Events, Tours,

6 Workshops included corn husk doll making by Maxine Thomas, corn husk mat demo by Kenny Metoxen, berry corn mush by Jamie Betters, for Harvest Fest. Dried apple slices and seed selection, corn mush making and corn husk dolls for the Food Sovereignty Summit. Tours: 2 Food Sovereignty Summit Tours 61 participants each. Events: Education Days – 12 Schools 587 Students. Harvest Fest – 300 participants, memorial for Jeff Metoxen and successful soup challenge with 10 entries.



Other

- Tracking winter feeding through managed grazing program
- Planning Seed and Plant Event & Tilling Services for Spring
- Met with FSA Insurance agent for crop insurance

ONEIDA COMMUNITY INTEGRATED FOOD SYSTEM

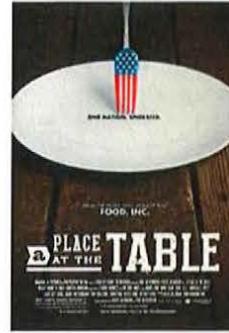
ISD Fourth Quarter Report FY18



48 vendors in attendance



28 attendees at food film



16 attendees at this film

Strategy #1 Educate the Oneida community about food, agricultural opportunities, nutrition and health risks

- Assisted in the trainings on Monday & Tuesday taking place at the Tsyunh#hkw< Farm for the Education Days with area youth from numerous schools in North East Wisconsin.
- Put together promotional posters/fliers for our **Dark Secrets of our Food System** food film showings and promoted them through: Update Oneida, OFM List Serve, Kalihwisaks, LIVE54218, OFM Facebook, Explore Oneida, WPR Radio & more.
- Saturday, Nov. 4 facilitated the 'Sustainable' food film screening at the Veterans Building where we had 28 attendees. This is the first of 9 food films we will be showing to the community.
- Saturday, Nov. 18 facilitated the 'A Place at the Table' food film screening at Ridgeview Plaza where we had 16 community members attendee.
- Saturday, Dec. 16 facilitated the "DIRT! The Movie" food film screening at Ridgeview Plaza where we had 11 community members attendee.

Promote education through Agri-Tourism efforts

- Coordinated and assisted with the **Experiential Learning sessions for the Food Summit**.
- Put together 20 informational packets for Crystal Meltz and I to use when we give our Agri-Tourism presentation to the 18 students in the ONES 6th grade class on December 12.

Share through educational forums

- Coordinated the presences of the Oneida Farmers' Market at Harvest Fest, delivered canopies, set up all the canopies & managed the 4 Oneida Farmers Market vendors at TsyunhéhkwΛ which had a record turnout of community.
- Completed writing up a draft Project Letter for the 4-H Land that will be sent to FVTC, NWTC, and UW-Extension Brown & Outagamie Counties to see if they can assist in making the County H 4-H land and barn into a 'hands on' learning center for the community.

Strategy #2 Integrate Oneida and locally produced foods into the Oneida community and institutions

- Facilitated the End of Year Oneida Farmers Market vendor meeting where we discussed the advancements we made in 2017 and had a historical presentation of the progress of the Farmers Market from 2002-2017. (48 vendors attended).
- Attended the CHIP group meeting where the three Green Bay Farmers Markets, LIVE54218 and Oneida Farmers' Market in collaborating on various grant projects.

ONEIDA EMERGENCY FOOD PANTRY

ISD First Quarter Report FY18



The 1st Quarter completes the Oneida Emergency Food Pantry's first full year in operation. We served 1,362 clients (Including repeats) and distributed 14,634 pounds of food during the 25 days available for food pick up during the quarter. We processed 126 bulk donations and continue to stay adamant about our food inventory process. Working with Economic Support we've made improvements to the intake process and have planned for an intake worker to the pantry Tuesday and Thursday starting in February. Some of our activities for the 1st quarter include the Bingo Food Drive, new connections with the Radisson, main Casino, and Wingate hotel, and increased volunteerism at 141.75 hours. We met goals from the 4th quarter which include increasing internal food network, increasing food storage capacity, increasing volunteerism, and identifying program needs to apply for grant funding.

Q4 Donations Collected

20,217 Lbs. + 41.7%

Q4 Food Purchased

\$3,516.89 -64.4%

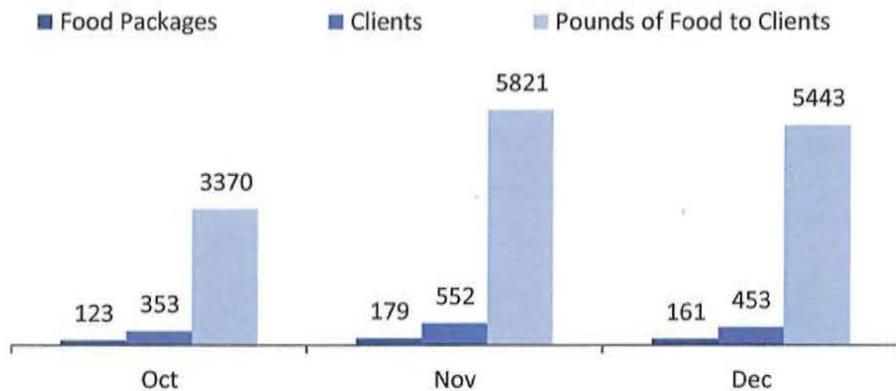
3,181 Lbs. -27.5%

Q4 Food Waste

716.7 Lbs. -62.4%

Q4 Food Re-Donated

4,936.3 Lbs. +39%



In the 1st Quarter the pantry saw an increase in families, packages, and food being dispersed. Out of the 463 packages dispersed 254 of those were to repeat clients. Out of the 209 families served, 53 were new clients. We help to feed 666 individuals in our community during Q1.

Strategic Goals

Development

- Strengthen Food Network
- Increase for Grant Funding

Improve Operational Change

- Improve Intake Process
- Create informational material

Increase Community Engagement

- Increase Volunteerism
- Plan Q3 School Drives



VETERAN DEPARTMENT

ISD First Quarter Report FY18

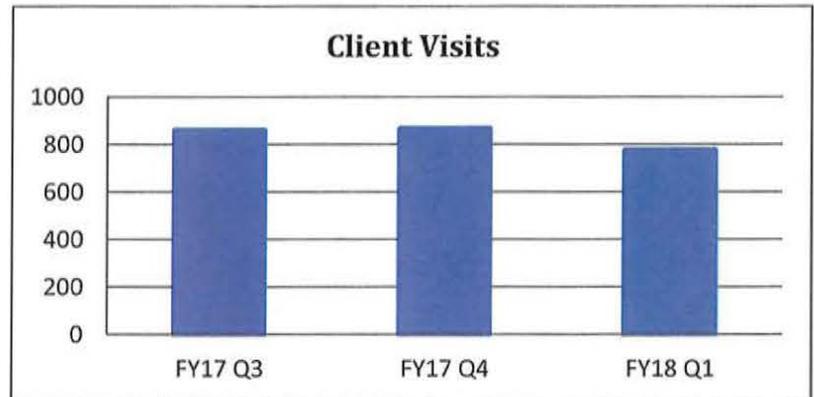
Mission: *Provide Quality Services and Assistance in the Delivery of Entitlements and Benefits due our Oneida Nation Veterans and their Families.*

One of Oneida's Veteran Departments Major Initiative is Improving Customer Service and our Clientele numbers maintain approx. 258 visits per month.

Another major initiative that we, the Oneida Veteran Dept. are working on is an end for Homeless Veterans in Oneida. Currently working with the Dept. of Veteran Affairs HUD/VASH Case Manager and OHA. 19 veterans have met the VA criteria and 12 have been awarded Rent Vouchers. 11 veterans have exited the program. Oneida was awarded 20 Vouchers in 01/2016.

Oneida Nation Veteran Dept. supports the Nation's Initiative Alignments, specifically Community Development. Our Dept. was a co-host with Native American Center for Health Professions for a meet and greet with Dr. Jon Kerstetter, the Dept. sponsored a Wild Game Feast during deer hunting season and the turnout was great.

The Oneida Nation Veterans Department main service is VA Disability Compensation/Pension claims. Awards this quarter total, in Retro payments the sum of \$119,322, last quarter was \$152,023. Monthly VA disability/pension checks, which total \$3,792, last quarter was \$11,782.



1st Quarter Highlights

Calls Received	1008
New Clients	0
Other Tribes	9
VA Disability Claims	15
Community Utilization of Veterans Building	45 Days

Aquaponics

Our October Food Sovereignty Summit drew a full house for the Aquaponics Breakout session and our neighbors the Menominee's, sent a team of Educators in early November to tour our facility. We developed a volunteer training manual and have begun building a volunteer base for the weekend maintenance. The Oneida Nation School has enjoyed fresh lettuce and herbs from our system and we look forward to a consistent production schedule in the near future. On December 14, 2017 the Aquaponics hosted a Thank You Lunch and Training for the Department of Public Works as they continue to offer support to makes sure the building and equipment are working properly. A purge tank has been added to help transition fish in and out of the system. With the help of Vanessa Miller we were able to test harvest the tilapia to ensure the proper food handling and safety measures are being followed when we harvest fish.



Nelson  Pade
The Most Trusted Name in Aquaponics®

1st Place Winner

**Show Us Your System
Nelson and Pade
Photo Contest**

December 2017

KALIHWISAKS

ISD First Quarter Report FY18



Achievements

- Printed six issues – October 5, October 19, November 2, November 16, December 7, and December 21. (Advancing Oneyote?aka Principles)
- Covered events such as the Three Sisters Powwow, Tribal Action Plan, and Bridge Lighting (Advancing Oneyote?aka Principles).
- Printed Oneida Business Committee meeting minutes, board postings, public hearing notices, and legal notices. (Implementing Good Governance Process)
- Worked with other departments such as SEOTS, OCIFS, Adventures, Culture, ONAP, OCEC, and OFF to create monthly pages to share their news and events. (Advancing Oneyote?aka Principles)

Goals for FY2018

- New photo contest
- Expand our media platforms to include phone apps, online payments, more online content
- Create a portfolio to attract advertisers
- Complete SOP's and other suggestions made by 2017 department audit

Photos: Bridge Lighting and Breakfast with Santa



Tourism Quarterly Report

ISD First Quarter Report FY18

Strategy 1: Community Engagement

- Dancer Performances – 10 (including Ag Summit/1/2 Time Show)
- Royalty 11 appearances
- Tourism assisted with the TSY Harvest Fest
- Tourism assisted with the UWGB Pep Rally with the donation of buffalo, coordination of Veterans and ½ Time Smoke Dancers
- Developing the 2018 event calendar of events. Teaming up with CEC for summer film series.

Strategy 2: Improving Organizational Changes

- Bus Tours
 - Update all bus SOPs, literature, website listing and create new bus data base for better follow up with tour operators
 - Development of Bus Trade Show follow up materials
 - Reservation Tours

2018 Q1	267 people/10 Tours
2017	834 people
2016	2883 people
- Tourism Reporting Systems – there are currently 7 Tourism established reporting systems that have been updated and stored on the Tourism shared drive for easy access for all employees.
- Employee Assistance – Tourism staff assisted in the stuffing of GTC mailers with the Mail Center/Print staff



Strategy 3: Advancing On^yote?a.lka Principles

- Long House – Architecture Structures did final roof installation. OTIE allowed a couple of workers to help finish the plywood shell ends and tveck the outside. Looking into solar/security for the long house. Final phase will begin in the spring 2018.
- Begin to develop a business plan for a visitor center
- Facebook 63 posts, Reached 192,427 YTD, Likes/Reaction 20,586, Following 4,475 up 360 since Sep. 30, 2017



Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 23 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Community Economic Development Division 1st Quarter Report.

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution Budgeted - Grant Funded Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: Submitted by: Grace Koehler, Executive Assistant
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

Describe the purpose, background/history, and action requested:

FY18 1st Quarter Report for Community & Economic Development Division.

1) Save a copy of this form for your records.

2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.

3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org



Community & Economic Development Division

Troy D. Parr, AIA
Division Director

FY` 18, 1st Quarter Report
October, November & December 2017

Revised: 01/16/18

Community & Economic Development Division (C&EDD)

Below are some highlights of FY'18, First Quarter C&EDD work efforts:

The Community & Economic Development Division

During the First Quarter of FY'18, the paperwork to complete the Divisional reorganization with HRD was completed. This allowed for the full implementation of the new organizations structure to support future economic development staffing and program implementation. The approved, implemented new organizational structure for the Division can be found on the next page.

Updated Economic Development Strategic Planning is underway

On December 13, 2017 TIP Strategies, Oneida Nation's consultant for the Economic Development Strategic Plan, held a meeting to kick-off the effort to develop the new plan. The kick-off meeting was well attended by organizational staff as well as Oneida external corporations representatives. Feedback from the kick-off was very positive from those in attendance.

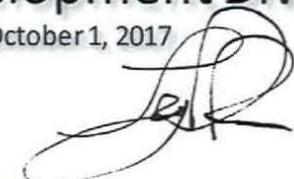
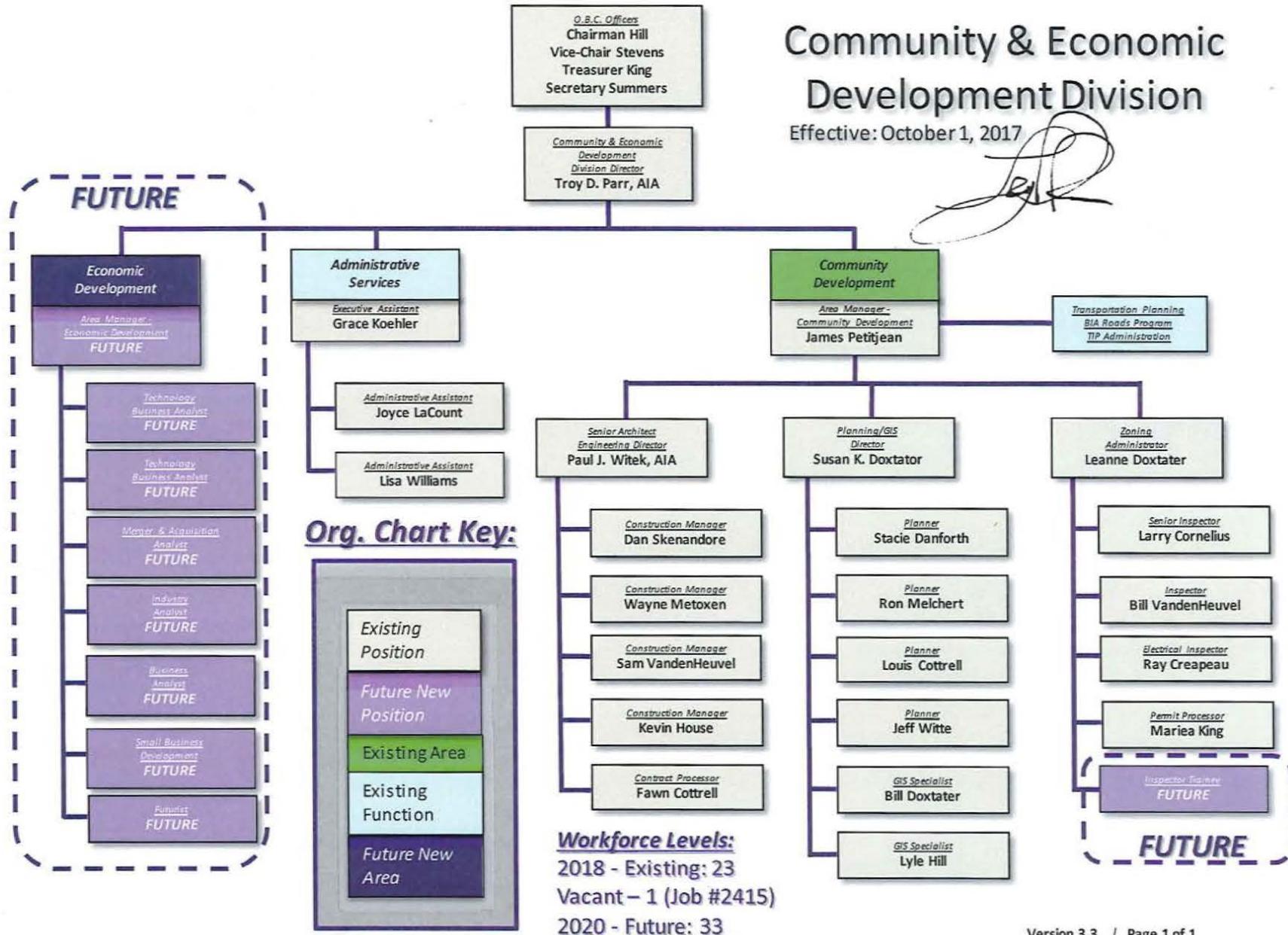
This new strategy represents a significant advancement by the Oneida Nation to embrace the emerging new economy (digital evolution, internet of things and advanced manufacturing). Our strategy will better align us to accelerate growth locally, regionally, nationally and potentially on a global scale through strategy to become engaged participant in business opportunity activities of the Oneida Nation.

Yaw^ko,
Troy D. Parr, AIA
Oneida Architect/Division Director



Community & Economic Development Division

Effective: October 1, 2017

Community & Economic Development Division

This information reported is for the 1st Quarter of the Fiscal Year 2018 October & November (December was not closed as of this report).



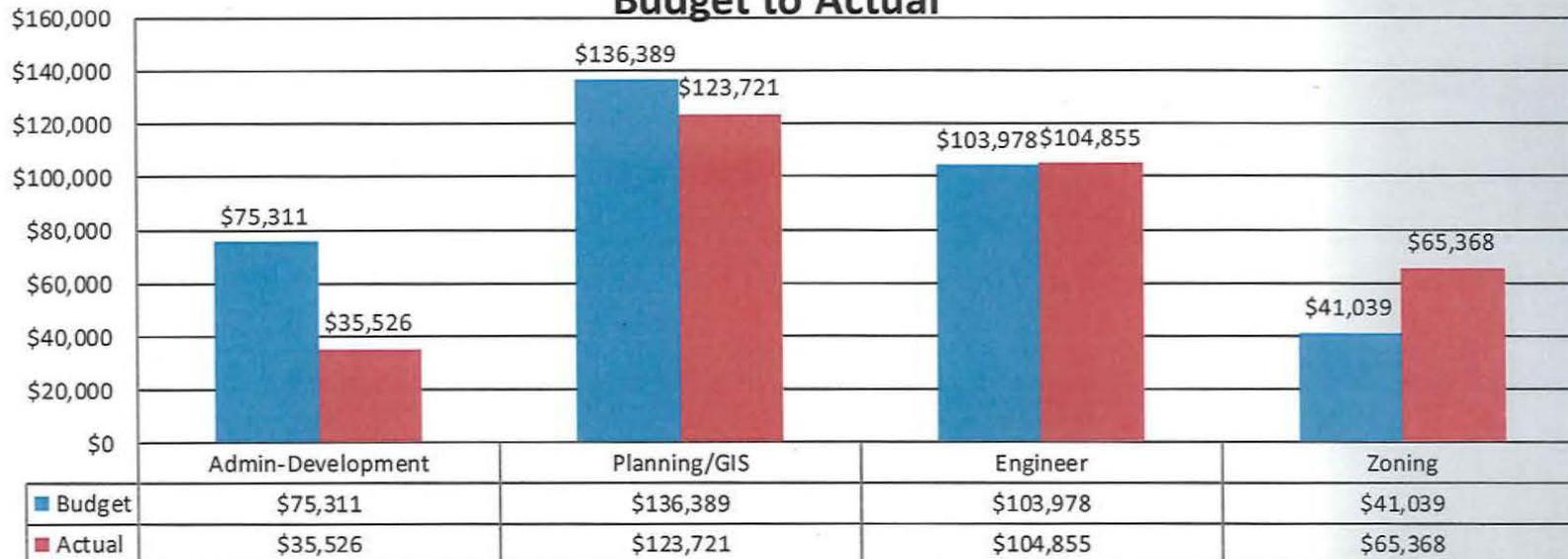
Department	Budget	Actual	Variance	%
Administration-Dev.	\$75,311	\$35,526	\$39,785	52.83%
Planning	\$136,389	\$123,721	\$12,668	9.29%
Engineering	\$103,978	\$104,855	-\$877	-0.84%
Zoning	\$41,039	\$65,368	-\$24,329	-59.28%
Total FY18	\$356,717	\$329,470	\$27,247	8.27%

Community & Economic Development Division FY 18 (1st Quarter)

For October & November (December was not closed as of this report)



Development Division - FY18 Quarterly Budget to Actual



Variance explanation

- Operational expenses combined for planning and GIS for efficiency
- Engineering has an additional \$31,000 in revenue that was not recorded. Working with Accounting to correct
- Director position is budgeted out of Development Administration but is expensed to Zoning
- After our approved reorganization employees will be appropriated to their correct fund unit.
- Planning/GIS variance due to one vacant position
- Development Administration variance due to Administrative Assistant position vacant but hired on December 3, 2017

Community & Economic Development Division - (Departmental Updates)



Engineering:

We are managing the various CIP, Non-CIP, OHA, and other miscellaneous projects. We provide assistance to the Zoning Department with plan reviews for code compliance. In addition, we help various Tribal Departments with design and construction coordination for minor interior remodel projects. Major projects are identified in listing on next slide.



Paul Witek - *Senior Architect/Engineering Director;*
James Petitjean – *Community Development Area Manager*

Community & Economic Development Division - (Departmental Updates)

Contact Paul Witek
Office: 920-869-4543

Engineering (continued):

- Residential Home Sites
- Elder Services / Apartments Improvements
- Social Services Building Remodel – Phase V
- Maple Sugar Camp
- Oneida Nation High School
- Oneida Nation Farms Manure Pit
- Early Head Start Facility
- Water Main Loop
- NHC Remodeling – Phase VIII
- Business Park Storm Water
- Oneida Fishery Restoration – Phase II
- Solar Electric Deployment, assistance
- Tribal Transportation Program, assistance
- Main Casino Exterior Enhancements
- Mason Street Casino Exterior Enhancements
- O.F.F. Facility Improvements
- Oneida Recreation Complex
- OCHC Satellite Pharmacy - AJRCCC
- Tsyunhehkwa Storage/Shelter
- Elder Village Cottages – Phase II
- Uskah Village Apartments – Phase II
- Oneida Four Paths
- Oakwood Court House Reconstruction
- ONSS – Accessibility Renovations
- Miscellaneous Small Projects



Community & Economic Development Division - (Departmental Updates)

Planning & Statistics Department - Projects

Contact Susan Doxtator
Office: 920-869-4594

- **Central Oneida Area Development Plan-** On November 7, 2017, Planning met with BIA Tribal Transportation District Representative from Minneapolis and Local Representatives from Shawano. The Planning Department presented transportation concepts for the Upper Oneida Corridor (area of focus between Turtle School and Tsyunhehkwa). We addressed safety, local and regional connections, and implementing a complete streets model that supports future development on the BP site. Our next steps involve setting up a co-op agreement with Outagamie County to aid us in this work. The Tribal Transportation Program (TTP) representatives favor co-op agreements because they can show a cost savings of over 20%. Implementing the transportation plan sets the context to support the future development of the former BP site. There is support to use TTP road funds to plan, design and construct:
 - roadway improvements
 - streetscape
 - public parking area
 - sidewalks public plaza

Susan Doxtator – *Planning/GIS Director;*

James Petitjean – *Community Development Area Manager*



Community & Economic Development Division - (Departmental Updates)

Planning & Statistics Department - Projects (continued):

- **Model Housing Initiative** - Assisting the Oneida Housing Authority with concept design, feasibility analysis for a series of component small homes for one and two person households. The house design shall have the ability to be modified or expanded as the occupant(s) needs change. *Status: Concept.*

- **Community Trails** – Assisting in the development of a comprehensive trail system. Exploring the possibility of a Transportation Alternatives Program (TAP) Grant through the State of Wisconsin for the next phase of the project. It includes a trail from the Turtle school to the Flying Leaf Neighborhood (Site 2).
Status: Developing draft work plan that include phases and a time line for future development.

- **Community Recreation Center** – Is progressing along, currently we are in the beginning stages of a site massing study and site location alternatives. Community outreach and survey's will be a focus in this next quarter in order to restate the problem, gather needed input and begin development for plan, facility size and site amenities. *Status: Concept.*



Community & Economic Development Division - (Departmental Updates)

Planning & Statistics Department - Projects (continued):

- **Apple Orchard Improvements** - The Oneida Apple orchard is a center of tourist activity in the summer time with Apple Fest as its main event. Improvements to the facility such as parking, access points in and out of the apple orchard compound, replacing old trees, and production facilities is needed to continue to be community asset. *Status: Project Planning Phase*
- **Community Food Enterprise and Training Center (Food Center)** - Working with Governmental Services Director to evaluate the feasibility of an Oneida Community Food Enterprise and Training Center. An RFP for a feasibility study has been drafted by the team and will be sent out before the end of the year. *Status: Concept.*
- **Agriculture Strategy** – Assisting the Agriculture Strategy team with visuals, info graphics, maps, power point presentation and proposed Agriculture Strategy booklet. Introducing the Oneida Food Sovereignty Initiative that includes proposing incremental improvements to how we produce and provide white corn, buffalo meat, beef, and apples in the Oneida Community. *Status: On-going*

Community & Economic Development Division - (Departmental Updates)



Planning & Statistics Projects (continued):

- **Community Outreach** - “Coffee with Planners” will begin again on January 25th, 2018. Topic and location to be determined.
- **Signage Standards** - Work continues on street signage standards by incorporating existing standards. Installation and monitoring of this process continues.
- **Cultural Heritage** - Investigation of options for moving this project ahead. Development of approach and prioritization will be reviewed with team and stakeholders.
- **Tsyunhehkwá Storage Shelter** – Continues to move along, next step is the creation of a mission statement for Division Director. As well as revision of concept layouts based on input.





Community & Economic Development Division - (Departmental Updates)

Planning & Statistics Department - Projects (continued):

- The Planning Department continues to work with additional project development and initiatives such as: Pollinator Habitat – Grow not Mow, Boxing Club, McLester Memorial, Roundabouts and HWY 54 & 172 Landscape, Community Art, Oneida Parks and Reservation Beautification.
- With the approval of the Planning budget for 2018, we have begun additional work on a revision for the Comprehensive Plan and Vision Oneida. Revisions and development of an Area Development Plan and Land Use Plan is also being looked at.
- The Land Use Designation Process – is on the verge of being put into action for “Phase One”. With hard work and dedication for many months a small group has refined this process. There is much work to be done yet but with Louis Cottrell facilitating and monitoring the new process we can begin implementation quickly and seamlessly. “Phase Two” refinement is estimated to be complete by April of 2018.

Community & Economic Development Division - (Departmental Updates)



Planning & Statistics Department - Projects (continued):

- Surveys from various department have been a steady flow. Departments are constantly having surveys done for many reasons. Louis Cottrell has taken on this role of working with the areas and development of surveys for continued growth and needs in various departments throughout the organization.
- Planning is in the early stages of the initiative for an ice skating rink in Oneida. Location would be the open field across from Little Bear Development Center by the water tower. The Planning Department will be meeting with the different departments who would be involved in this project. We hope to have a community ice skating rink in the future and make it an enjoyable winter activity and community building experience for our community members.



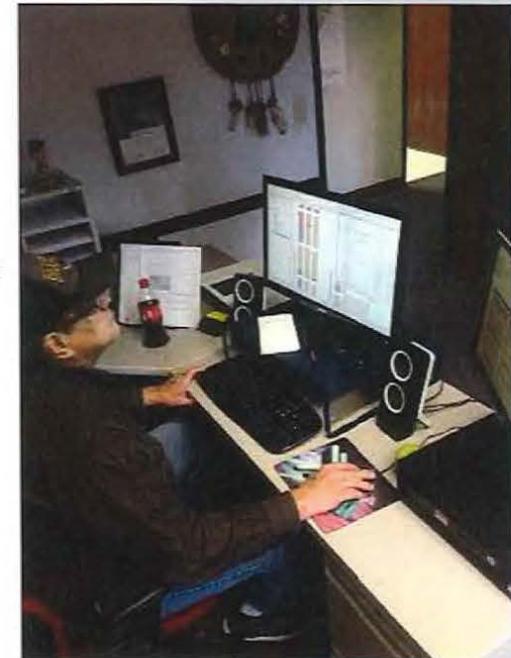
Community & Economic Development Division - (Departmental Updates)



Geographic Information Systems (GIS):

Contact Susan Doxtator
Office: 920-869-4594

- The GIS/MIS position has been filled by Joshua Swanson. Josh will be spending a majority of his time with GIS, but will be working in MIS as well. We look forward to what Josh will bring to the GIS department and website.
- The GIS database and interface are being completely overhauled and rebuilt on the latest blade server technology.
- The new GIS system will allow better access to appropriate geodata for the Land Commissioners as well as other departments within the Oneida Nation.
- The system will also include higher levels of security to protect sensitive data and control access to that data.
- The new system will greatly contribute to process improvements within the Land Use Designation Process (formerly LUTU)



Susan Doxtator – *Planning/GIS Director;*
James Petitjean – *Community Development Area Manager*

Community & Economic Development Division - (Departmental Updates)



Zoning Department

There are currently 19 active projects. A few major projects that currently in progress:

- The Sam's Club Renovation
 - Uskah Village Phase 2
 - Four Paths C-Store – Occupancy Issued
 - Externally leased New Car Wash at Four Paths C-Store
 - Solar Roof Project (near completion)
 - Maple Syrup Shack behind NHC
(Oneida High School and NWTC are partnering)
 - Three Sisters Head Start addition to the existing building
(just started)
- This past quarter 23 Building Permits were issued, 6 Land Use Permits were issued and 2 Sanitary Permit's were issued.
- Zoning has received 5 property complaints which have been investigated and forwarded for additional enforcement, if required.

Contact Leanne Doxtater
Office: 920-869-4534



Leanne Doxtater – Zoning Administrator/Manager;
James Petitjean – Community Development Area Manager

Community & Economic Development Division - (Departmental Updates)



ONEIDA

Contact James Petitjean
Office: 920-869-4574

Transportation Planning

- Aliskwit Ct, Town Rd, Metoxen Ln, Powless Dr, and 2 miles of Ranch Road were completed on November 15, 2017 for minor drainage improvements and repaved.
- Completed yearly Tribal Transportation Audit on all projects to the BIA in FY17.
- Added speed bumps in Site I
- Pedestrian crossing lights were added to Site II and Seminary road on the pathways.
- Met with the DOT on a possible guard rail extension on Highway 54



James Petitjean – *Transportation Planner/TTP Program Administrator*
Troy D. Parr, AIA – *Division Director*

Oneida Business Committee Agenda Request

1. Meeting Date Requested: 01 / 24 / 18

2. General Information:

Session: Open Executive - See instructions for the applicable laws, then choose one:

Agenda Header:

Accept as Information only

Action - please describe:

Approve DPW FY18 1st Quarter Report

3. Supporting Materials

Report Resolution Contract

Other:

1.

3.

2.

4.

Business Committee signature required

4. Budget Information

Budgeted - Tribal Contribution

Budgeted - Grant Funded

Unbudgeted

5. Submission

Authorized Sponsor / Liaison:

Primary Requestor/Submitter: _____
Your Name, Title / Dept. or Tribal Member

Additional Requestor: _____
Name, Title / Dept.

Additional Requestor: _____
Name, Title / Dept.

Oneida Business Committee Agenda Request

6. Cover Memo:

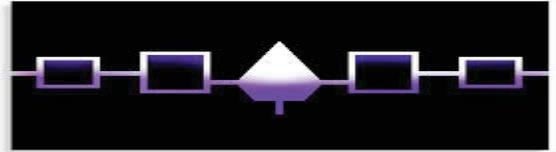
Describe the purpose, background/history, and action requested:

Submit and Approve Division of Public Works FY18 1st Quarter Report

- 1) Save a copy of this form for your records.
- 2) Print this form as a *.pdf *OR* print and scan this form in as *.pdf.
- 3) E-mail this form and all supporting materials in a **SINGLE** *.pdf file to: BC_Agenda_Requests@oneidanation.org



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ONEIDA NATION DIVISION OF PUBLIC WORKS



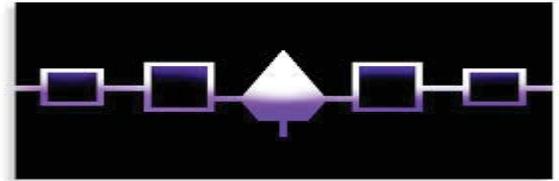
2018

1st Quarter Report





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Automotive & Fleet Mgt.

The most important provisions for the Oneida Nation is safe operations of vehicles used for the Nation's business to remain operational to their full potential. This is done by scheduled maintenance and repairs of departmental vehicles.

Community Wells & Septic, Plumbing

To upgrade the standard of living by providing complying Septic Systems and potable water supply from Private Wells. To be the first line of defense again disease prevention.

Custodial

The DPW custodial department maintains all non-gaming Oneida Nation occupied buildings in a clean, sanitized, and safe environment through teamwork, communication, and quality customer service.

Facilities, Maintenance

The facilities department provides preventative and regular maintenance, remodeling, fire and security monitoring, event coordination, and departmental moves for 80+ buildings and their departments.

Grounds Keeping

The overall maintenance of all of the Oneida Nation's grounds, roads, landscaping, and 24 hour snow removal along with Tribally owned roads is the mission of the Grounds Keeping Department.

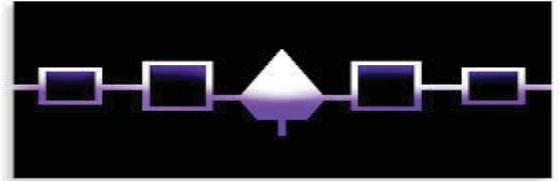
Utilities

Provide safe drinking water and environmentally safe wastewater treatment and seepage removal. Provide billing for sewer and water, septic removal and refuse/ recycling services.

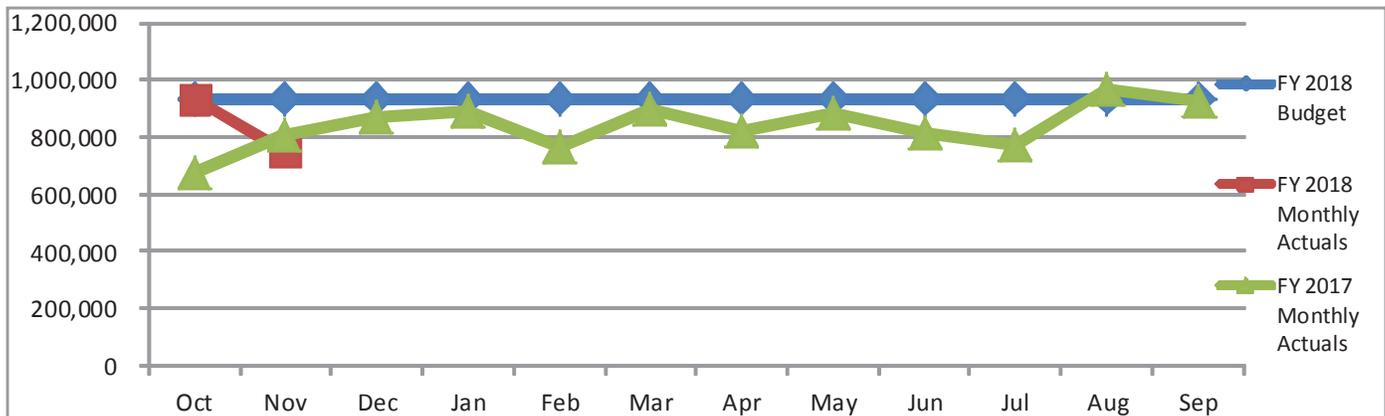




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Division of Public Works Consolidated Budget versus Actuals

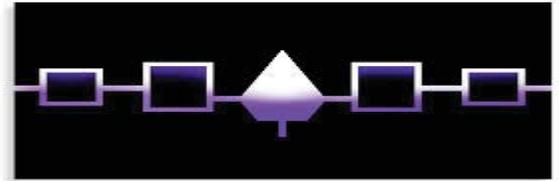


- YTD Actuals as of November are at a \$186,667 positive variance versus YTD Budget which is approximately a 10% variance.
- Major contributing factors to the positive variance are vacant positions, medical leaves, and incentive line.
- Reorganization efforts have created shared positions, efficiencies, and increased or improved services.





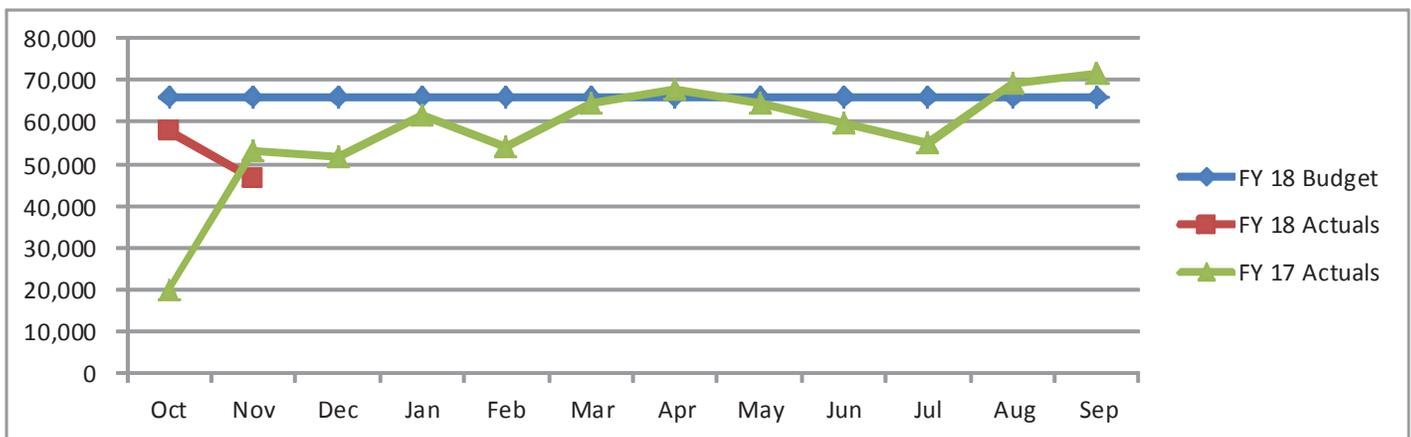
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Division of Public Works

Administration

The Department of Public Works Administration provides services and support for all of DPW business units and internal and external customers. Administration provides budget and financial support services, continuous improvement, customer services, fleet vehicle



Initiating and completing capital expenditure projects has been a major focus for DPW 1st quarter. The major projects that have either been completed or are in progress include:

- Repainting of the Water Tower
- Farm silo conveyor life safety and controls
- Norbert Hill Center North Wing HVAC Upgrade
- Hutson Rd building boiler replacement
- NHC electrical distribution

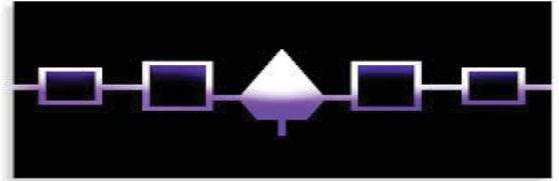
Safety Awareness continues to be a priority and training has been held on Winter Driving and Personal Protective Equipment. Upcoming training includes first aid, blood borne pathogens, and CPR.

Assisted Zoning with 49 on-site Plumbing inspections.

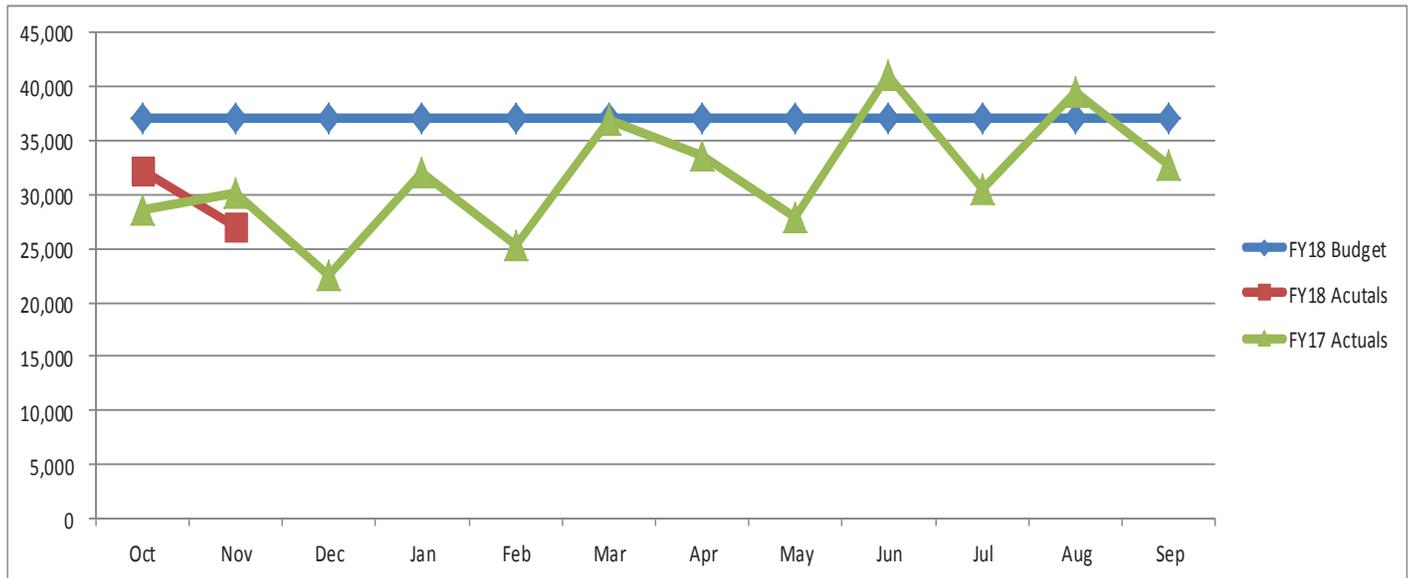




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Automotive Department



1st Quarter Services

Automotive Work Orders Completed: 307

Vehicle Requests: 48

Fleet Detailing: 130

Equipment Repair Costs for 4th Quarter: \$1,152.03

Fleet Management Projects

Purchases: Three (3) vehicles ordered

Vehicle Repairs (Incidents): \$14,755.59

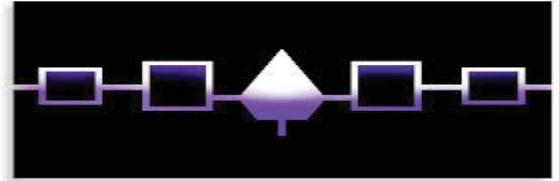
Gas Cards: Continue to work with Retail and Mobile regarding issues with the cards.



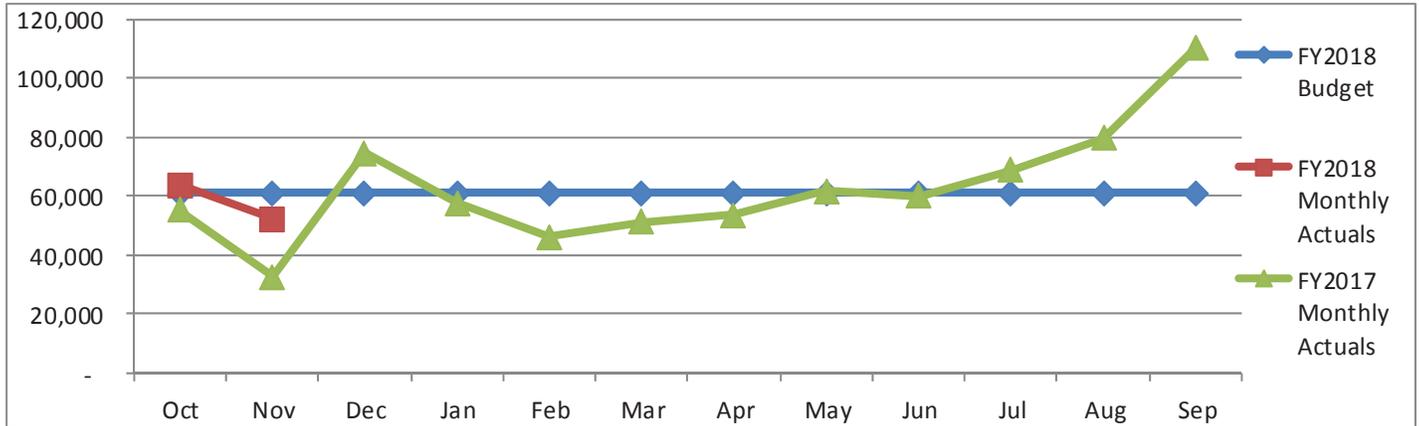


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Community



Wells and Septic, Plumbing



Projects

Description	Status
IHS Project BE-15-J50	1 Well Drilling, 1 Test pump 1 Water supply, 4 septic system
IHS Project BE-15-J50	7 New HBO Sites Open (no applicants yet)
IHS Project BE-12-G98	Start in Spring
POWTS Improvement & Inventory	353 POWTS Evaluation Sites

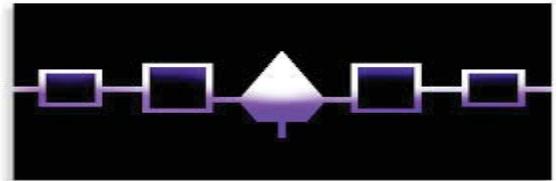
Program Alignment Summary

Alignment	Description	Status
Commitment to Building a Responsible Nation	CWS & Plumbing Repairs for: . Septic Systems . Water Supply/Well Repairs . Inside Plumbing Repairs (pipes, wtr htrs)	64 Homes
Commitment to Building a Responsible Nation	Engineering CIP Projects . HUD Apt. Bldg #2, #3 . Oakwood HUD Home Oneida Cemetery	Uska Village inside plumbing (toilets, sinks & showers) Interior Plumbing (toilets, sinks & showers) Weekly water height check at cemetery.
Commitment to Building a Responsible Nation	Tribal Building Facilities Plumbing projects, repairs and services	Work Orders
Commitment to Building a Responsible Nation	Other: Elder Services, Housing Authority, DOLM Sites	Work Orders

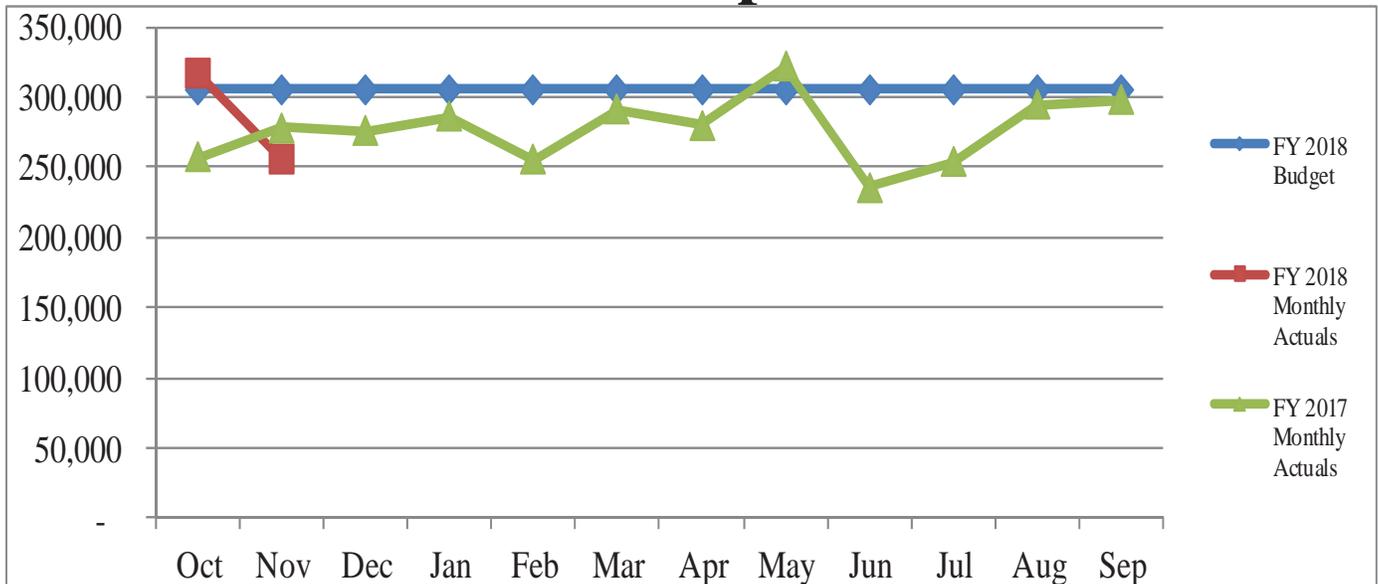




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Custodial Department



Projects/Services

Description/Project

Provide proper adequate training to Team Members, improved customer relations, best Team Member placement, proper equipment and chemical inventory to better the department productivity

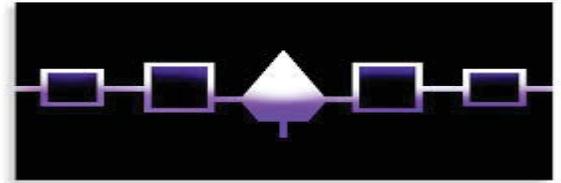
Status

We are meeting with leadership/supervision on a more scheduled, frequent bases. Training is on-going and includes leadership and Team Members from the recently hired to long term colleagues to standardize process and procedures creating more efficient practices. Equipment and chemical inventories are being evaluated and maintained through attrition and best practice research. Productivity and moral have increased through the above processes along with showing the colleagues their value and purpose.





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Custodial Department

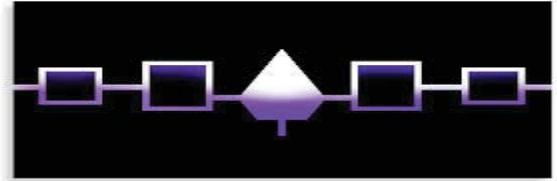
Program Alignment Summary

Alignment	Description	Status
Create a Positive Organizational Culture	Developing our Colleagues	By defining expectations, setting reachable goals, showing gratitude, celebrating wins, and working on communication not only within the department but with our customer base throughout the Tribe
Commitment to Building a Responsible Nation	Provide proper adequate training, inventory controls, provide and maintain proper safe equipment.	By doing this we are finding meaning and purpose in what we do as a way to stay positive. Reminding colleagues why their jobs are important. Defining expectations about their purpose and how they add value to the Oneida Nation, add to their expertise through training to better themselves to better serve our customers.

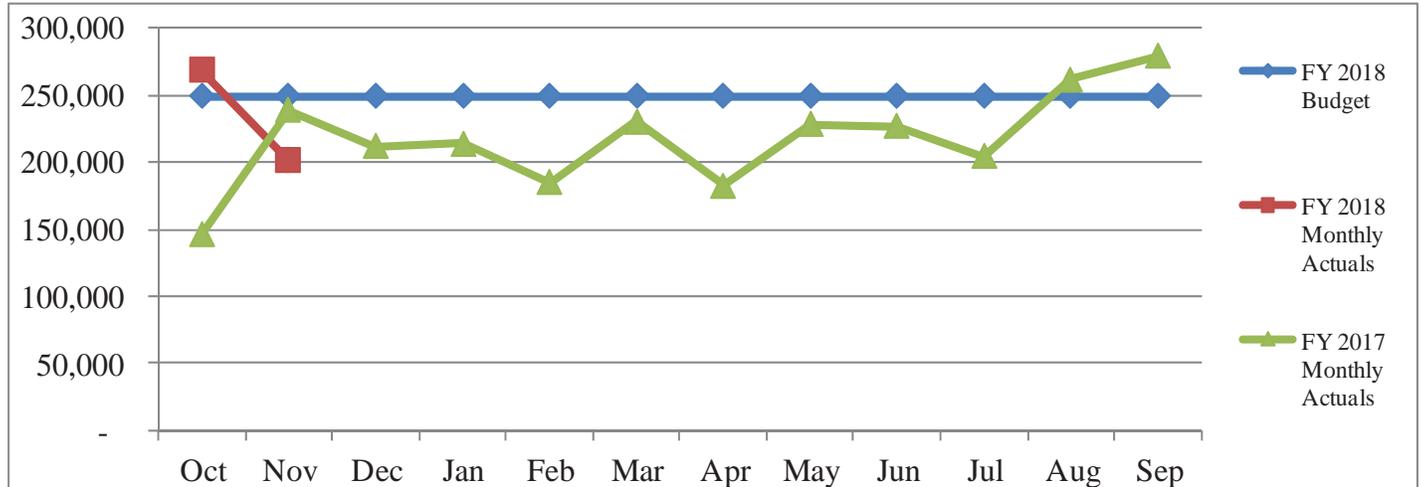




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Facilities Department



Program Alignment Summary

Alignment

Description

Completed

Committing to building a Responsible Nation

Completion of capital expenditure projects.

Preparing RFP's, contracts, and purchase orders to complete capital expenditure projects for FY18.

Committing to building a Responsible Nation

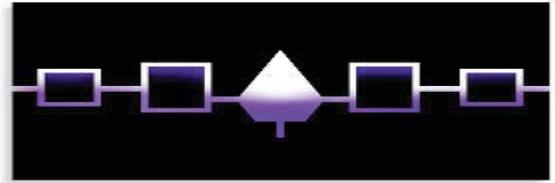
Complete Facility Condition Assessments

Building Assessments continue to be completed with additional ones being done each month. Focusing on inspecting mechanical rooms for any issues.





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Facilities Department Work Orders Completed 1st Quarter: 648

Completed Work Orders

October 2017	November 2018	December 2018
242	208	238

Open Work Orders

October 2017	November 2018	December 2018
30	37	52

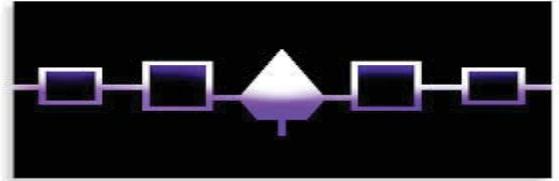
Initiatives and Projects

- ◆ BIE on requirements, deferred maintenance and projects.
- ◆ Land Management Boiler
- ◆ Temporary power installation for bridge and tree lighting
- ◆ Bay Bank—Air Handler Unit replacement RFP
- ◆ Food Distribution electrical for walk in cooler installation
- ◆ Health Center Boiler Installation
- ◆ Solar Deployment Project training and inspections
- ◆ Automotive and Custodial Inventory system to ARCHIBUS
- ◆ NHC emergency lighting, upgrade to LED lighting in corridor and law wing
- ◆ Four Paths Project—refrigeration equipment, security systems, HVAC, review electrical design
- ◆ Assisting with Early Head Start CIP Addition Project
- ◆ Permitting training for low voltage projects
- ◆ Health Center dental LED lighting, bollard lighting

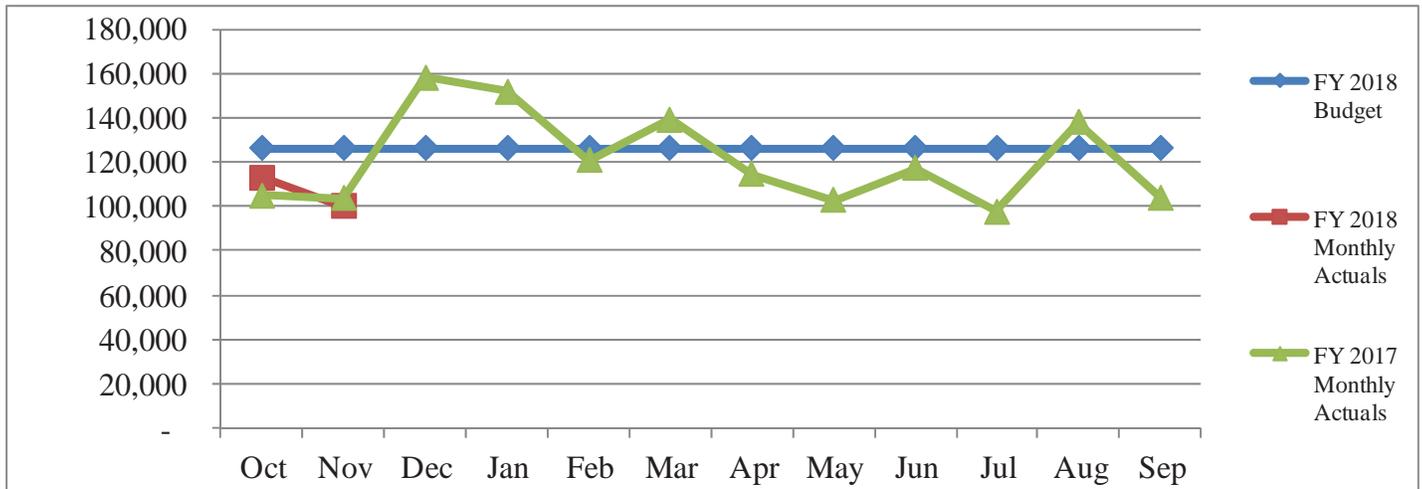




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Grounds Keeping Department



Projects/Services

Project/Services	Status
Work Orders Completed	21
Demolition	Completed: Belmont
Other Services	Working with various departments

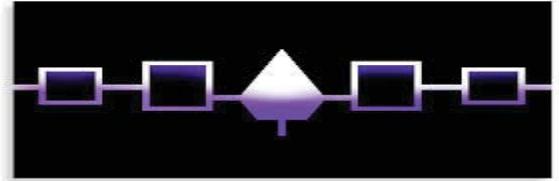
Program Alignment Summary

Alignment	Description	Status
Committing to building a Responsible Nation	Develop Standards for Grounds keeping and Landscaping	Personnel, Routes, Equipment are being refined from last year.
Committing to building a Responsible Nation	Snow Removal Plans	Schedules, site layouts, logs updated from last year to become more efficient.

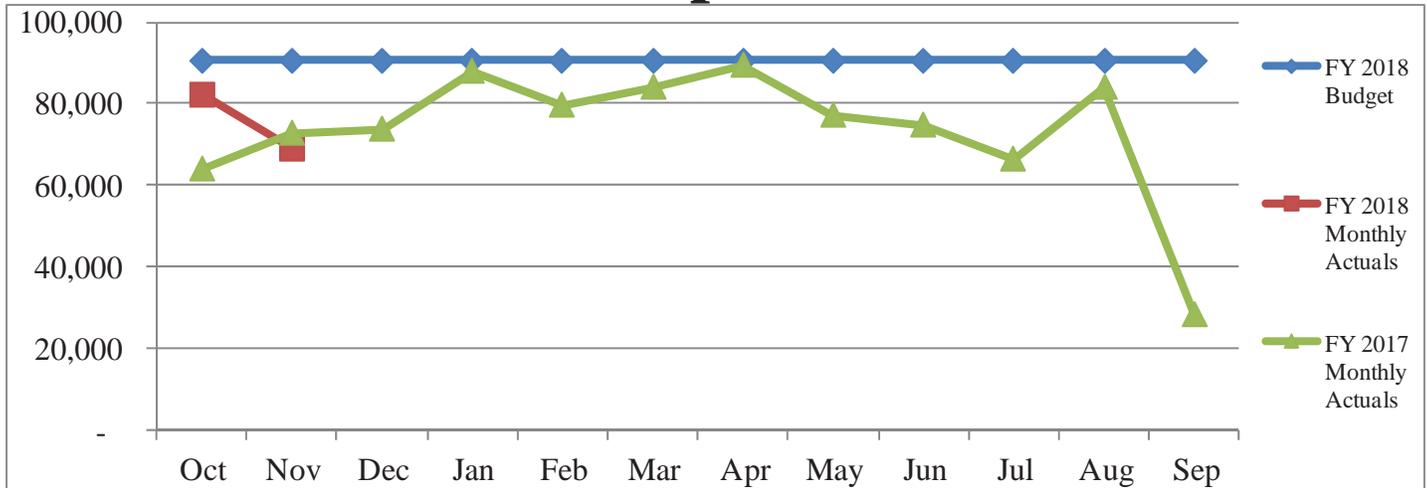




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Utilities Department



Services Provided

Service

Status

Work Orders

72 Completed

Locate Requests

127 Completed

Septic Pumping

128 Completed

Non-payment, Disconnections (April-Oct. 31st only)

0

Program Alignment Summary

Alignment

Description

Completed

Committing to building a Responsible Nation

Public Water Legal Mandate/Regulatory Compliance

EPA and Oneida Nation's Public Water and Wastewater required weekly sampling and testing were completed and in compliance for the 4th Quarter.

Committing to building a Responsible Nation

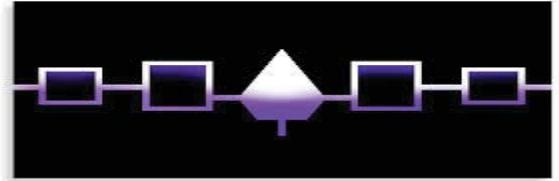
Indian Health Services O&M Inspection completed Sept. 26, 2017

Results of the inspection should be available early November.





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Utilities Department Other Statics

Water Customers Total:	661	Sewer Customers Total:	586
Residential	608	Residential	535
Commercial	18	Commercial	19
Internal Public Gov't	35	Internal Public Gov't	32

Refuse/Recycling customers - 976

Lift Stations – 13

Grinder Pumps - 2

Pump Houses - 5

WWTP - 1

Sandhill Circle Wastewater Plant-1 Sandfilter

Site 1 & 2 Water Booster Station – 1 that serves Site 2

Rolling Hills Water Tower

Hwy 54 Water Tower

Utilities Department Projects

Community Wells, Pumphouses and Water Main Loop- IHS Project BE-12-G87

Water Loss Mitigation-IHS Project BE-15-164

I & I Study (Infiltration and Inflow) IHS Project BE-15-J62

Hwy 54 Water Cap Ex Painting Project

