

Alaska Natives Making Healthy Choices



Alaska Native
Tribal Health
Consortium

2001 Annual Report

Alaska Native Tribal Health Consortium

Purpose

To provide the highest quality health care for all Alaska Natives

Vision Statement

A unified Native health system, working with our people, achieving the highest health status in the world

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Alaska Natives Making Healthy Choices

This report is a summary of the activities of the Alaska Native Tribal Health Consortium during fiscal year 2001 (FY01), the period from October 1, 2000 through September 30, 2001.

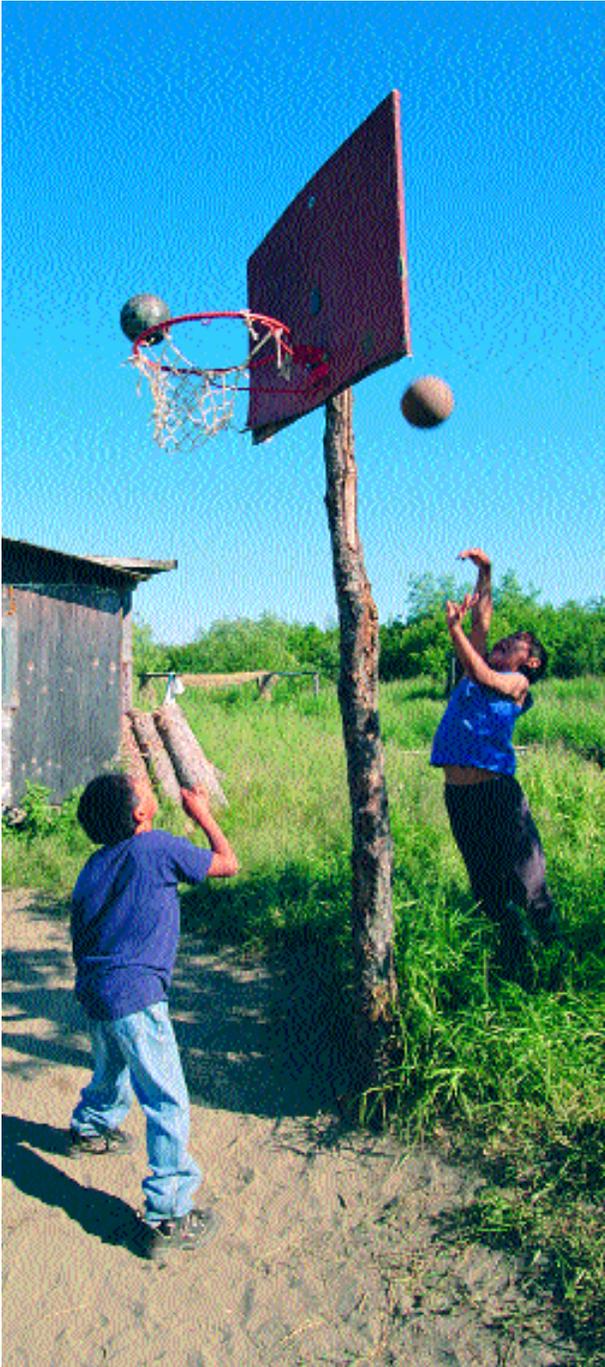
The Alaska Native Tribal Health Consortium was formed in December 1997 to manage the statewide health services component of the Alaska Native health system. The Consortium is owned by all Alaska Natives through their tribal governments and their regional non-profit organizations set up to provide health care services across Alaska. The Consortium is one of 20 co-signers of the Alaska Tribal Health Compact, a self-governance agreement with the Indian Health Service.

The Consortium has approximately 1,350 staff and had an operating budget of approximately \$200 million in FY01. We're based at the Alaska Native Health Campus on Tudor Road in Anchorage.

The Consortium is a:

- major medical center
- design and engineering business
- construction company
- purchaser of medical care services
- medical supply distributor
- professional recruiting agency
- technology development enterprise
- health research organization
- public health and advocacy agency and
- health information systems manager.

We recognize that exercising tribal self-governance means making healthy choices with the resources we now manage. Through the exercise and development of Native leadership, provision of quality medical care services, creation of quality health facilities, development of new technologies, promotion of healthy lifestyles, and many other approaches, the health of our people will continue to improve in the coming years.



Pictured throughout are children having fun and exercising – making healthy choices. The photographs were taken by photographer Clark James Mishler during a trip to the Calista Childrens Camp near Kwethluk in Southwest Alaska.

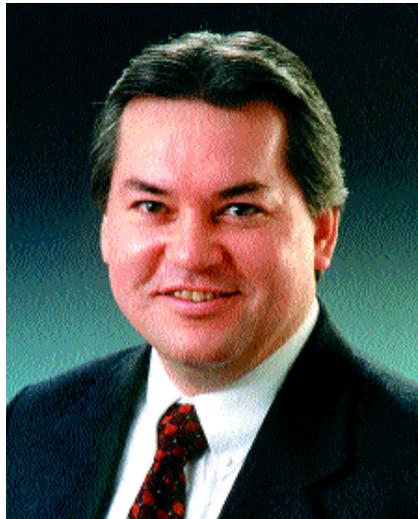
Letter from the Chairman and President

To all Alaska Natives:

Since December of 2000, it has been my privilege to serve as both Board Chairman and President of the Alaska Native Tribal Health Consortium (ANTHC). Previously, the Consortium had a Board Chairman and a combined President/Chief Executive Officer (CEO) position. The ANTHC board separated the President and CEO functions to ensure that an elected tribal representative leads the Consortium. I enjoy fulfilling the responsibilities of this new role, and look forward to the challenges and successes of our fifth year of operations.

During our fourth year of operations, ANTHC staff and management focused on several developments and initiatives to enhance and strengthen our business infrastructure and the ways we provide health care services. These included:

- Implementing state-of-the-art technology to upgrade and improve our medical records, human resource, and financial systems.
- Renovating parts of the Alaska Native Medical Center (ANMC) to facilitate increased space needs on campus.
- Deploying Alaska Federal Health Care Access Network (AFHCAN) telemedicine work stations statewide, with a focus on planning for the long-term sustainability of this project.



To meet increased need and expand statewide services, Consortium leadership actively and successfully worked to secure necessary funding. We are looking toward the future by continuing to diversify our funding base through grants, foundations, and other funding sources.

Over the past year, Consortium staff, management, and our Board of Directors have had a renewed focus on providing the best possible services—whether by encouraging healthy lifestyles, advocating for health promotion and disease prevention, or promoting Native-to-Native relationships with our customers and statewide organizations.

Our health is truly in our hands now. The Consortium has made tremendous progress over the past four years in providing for Alaska Native health care needs. I look forward to our future accomplishments, and welcome any comments or recommendations you may have regarding our programs and services. On behalf of the Consortium and our Board of Directors, thank you for allowing me the opportunity to represent your interests as the Consortium's Chairman and President.

Sincerely,

A handwritten signature in black ink that reads "Don Kashevaroff". The signature is fluid and cursive, written over a white background.

Don Kashevaroff
Chairman and President

Letter from the Chief Executive Officer

To all Alaska Natives:

On behalf of the administration and staff of the Alaska Native Tribal Health Consortium I am pleased to present this annual report of our accomplishments during the past year, as well as some of our plans for the coming year.

In the year 2000, our Board of Directors outlined a five-year strategic plan for growth and development of the Consortium. We have undertaken several initiatives to realize the goals outlined in this plan, including:

- the growth of health service revenues
- increasing Native employment in administrative and medical provider positions
- promoting wellness and prevention, and
- strengthening our statewide Native health system through networking.

During 2001, we established a formal business relationship with the Denali Commission, the federal/state agency created to improve public services in rural Alaska. The Consortium is the lead

agency charged with the construction and renovation of dozens of community health clinics over the next few years.

We are also building new relationships with federal agencies within the Department of Health and Human Services, and with private grant-making foundations, to enhance health care services needed by the Native community.

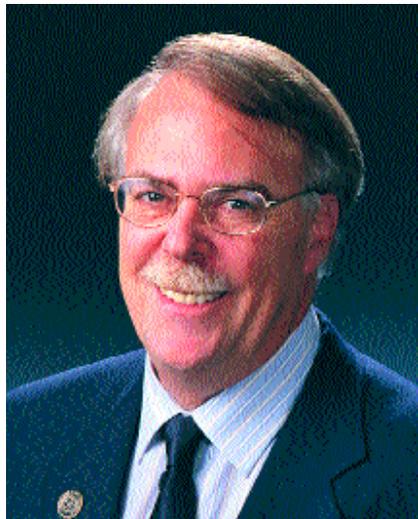
Our new Office of Alaska Native Health Research will ensure that medical and health research will be more closely tied to Native priorities, and provide training and support for Native health researchers.

The Alaska Native people are rightly proud of the Consortium's accomplishments to date. We are always open to

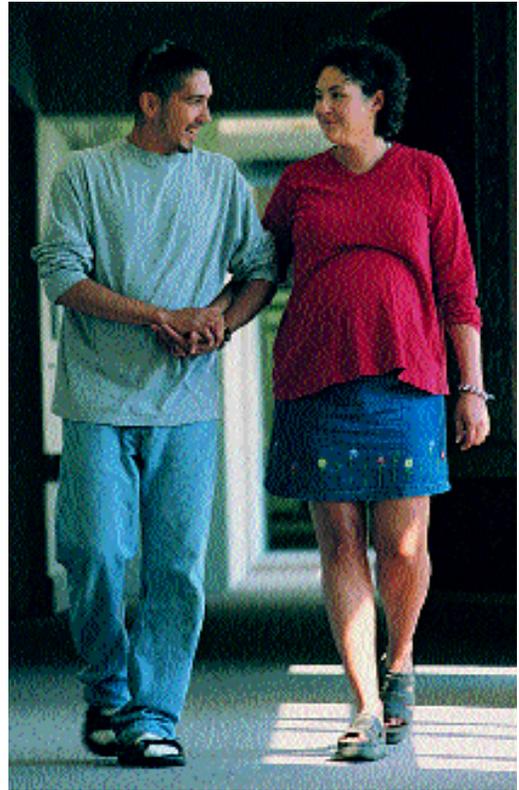
hearing your comments and recommendations on how we can improve our services.

Sincerely,

Paul Sherry
Chief Executive Officer



A handwritten signature in black ink that reads "Paul Sherry". The signature is fluid and cursive, written over a light blue background that features a faint, stylized graphic of a person's head and shoulders.



Alaska Native Medical Center

The Alaska Native Tribal Health Consortium and Southcentral Foundation jointly own and manage the Alaska Native Medical Center (ANMC) under the terms of Public Law 105-83. These parent organizations have established a Joint Operating Board to ensure unified operation of ANMC.

The Alaska Native Medical Center is a special place because it is owned and operated by the people it serves. In the spirit of our mission and unique relationship with the Alaska Native people, the Consortium and Southcentral Foundation have joined efforts to pursue excellent quality care and customer service. We endeavor to be the hospital of choice for all Alaska Native people.

The year 2001 has been a transitional year for ANMC administration. The Consortium added several new administrative positions, including Chief Operations Officer, Director of Financial Operations, and Chief Information Officer. The development of qualified Alaska Native health care leaders is a priority for the Medical Center. This year we

implemented a senior management mentoring program, to prepare Alaska Natives to assume top management roles. Two Alaska Native Assistant Administrators are now employed; three more are being recruited for 2002.

The Alaska Native Medical Center continues to experience significant growth in the level of services provided. In 2001, ANMC provided more than 332,000 clinic visits (a 10% increase), 6,600 inpatient admissions (a 5% increase), 1,200 infant deliveries, and more than 8,500 surgical procedures.

Alaska Native Medical Center Highlights:

■ In October 2000, ANMC received a score of 95 out of 100 on our triennial survey by the national Joint Commission on Accreditation of Health Care Organizations (JCAHO). ANMC's rating meets or exceeds national health care industry standards and places it among the best medical care facilities in the United States.

■ In 2001 the College of American Pathologists awarded an exceptional accreditation survey score to the ANMC Clinical Laboratory.

■ The ANMC Pharmacy Practice Residency Program was recommended for accreditation by the American Society of Health Systems Pharmacists. This initiative will assist in attracting and retaining qualified pharmacists who are in short supply nationally.

■ ANMC exceeded its 2001 goal for recovering reimbursement from Medicare, Medicaid, and private insurance payers.

■ ANMC began installing new financial and billing software systems designed by Shared Medical Systems (SMS).

■ ANMC now has a fully developed Corporate Compliance program to ensure compliance with all federal, state, and other laws and regulations regarding medical care and health care financing.



Opposite page: A prenatal check-up helps Desiree and Quentin Simeon prepare for parenthood. Above: The Alaska Native Medical Center has long served as a gathering place for Alaska Natives in Anchorage. Here, people visit and enjoy quiet time in the hospital lobby. Left: Nursing intern Peggy Willman with Luke Maxim.

■ ANMC has completed a new organizational improvement plan aligned with the strategic plans of its parent organizations. This plan outlines the development of new services and strategies over the next five years.

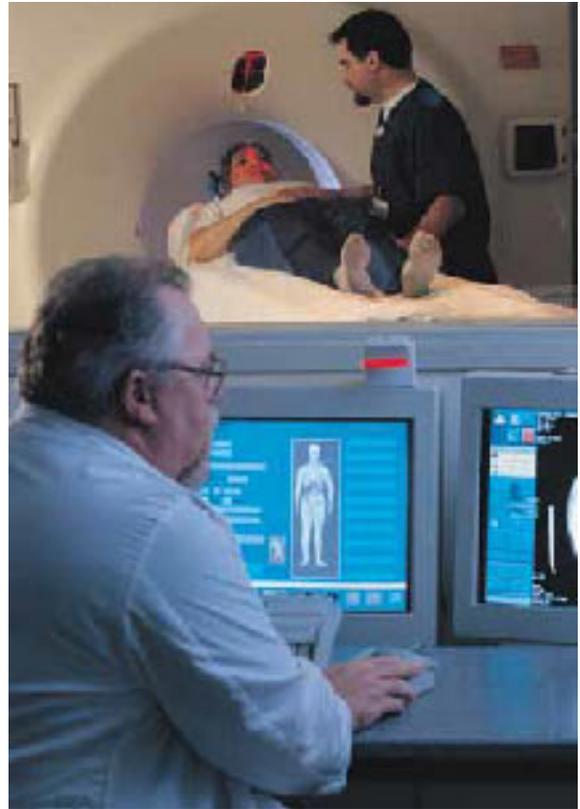
■ Clinical Core Business Groups have been created to address the continual improvement of medical care services.

■ Several remodeling projects were completed in FY01, including the day-surgery area, the addition of an eighth operating room, renovation of the laboratory, and expanded guest areas in the Quyana House.

■ ANMC's Obstetrics Department has added a perinatologist to provide specialized care for expectant mothers.

■ ANMC's Pediatrics Department has added two pediatric intensive care specialists to provide more comprehensive care for our sickest infants and children. Planning is underway for a new Pediatric Intensive Care Unit.

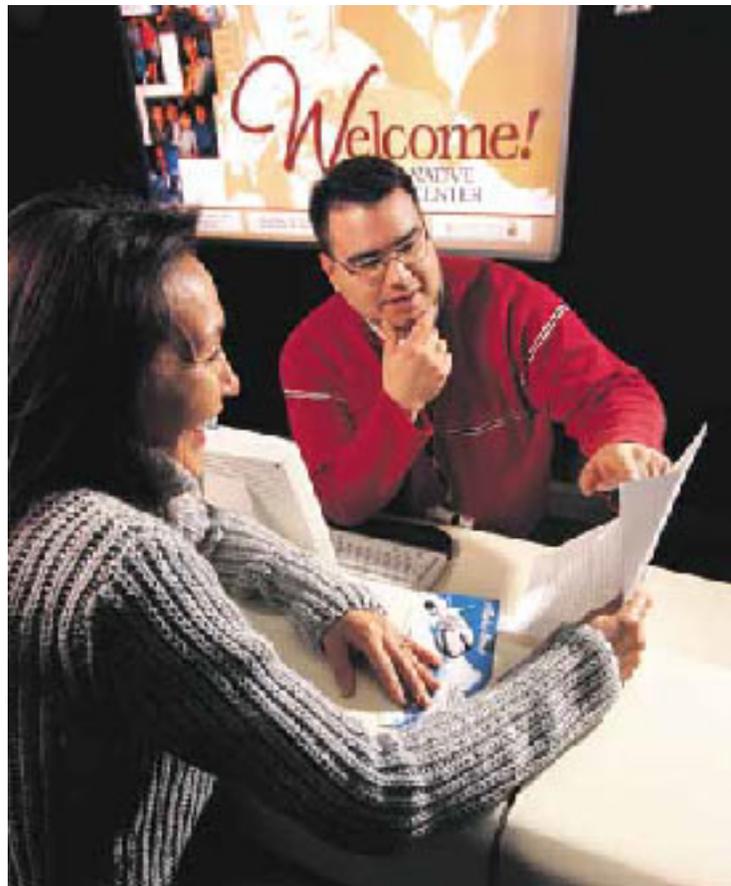
■ The Consortium has been supporting Southcentral Foundation's major project in FY01 to substantially expand the Primary Care Center, which will be fully completed in the spring of 2002.



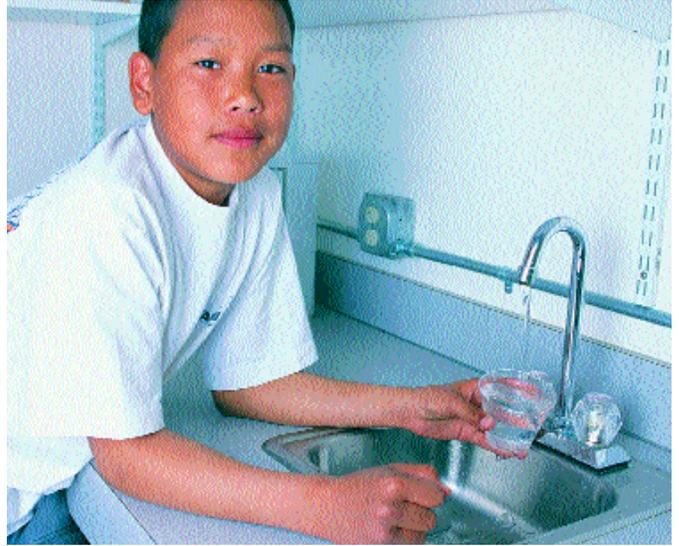
Top: Radiological technologist Sam Christy talks with college student Mollie Dunham going through a mock cat-scan, while Chuck Broadwater, CT/ MRI Technologist, watches the computer screen. Lying on a gurney and going through the cat-scan helps Radiology students understand feelings patients may have when getting a CAT-scan.

Right: Jason Hurley, Travel and Housing Assistant for ANMC Quyana Hospitality Services, works with Martha Jack, Travel Technician for Yukon-Kuskokwim Health Corporation, at ANMC's new airport kiosk at the Ted Stevens International Airport.

Opposite page: Mom Lariene Iya and Dad Craig Niksik, of Savoonga, admire their newborn daughter Miesha.







Environmental Health and Engineering

The Department of Environmental Health and Engineering (DEHE), in partnership with Native communities, provides a comprehensive array of public health-based services statewide:

- Sanitation facility planning, design, and construction
- Rural health clinic construction and renovation
- Regional hospital and clinic maintenance and improvement
- Environmental health consultation
- Community-based injury prevention
- Safety and institutional environmental control service
- Water and sewer system operation and maintenance assistance

The department was redesigned this year to better focus on customer service by adjusting the foundation of our service delivery. By aligning the borders of our health facilities and sanitation service operations with the boundaries of Native regional health organizations, DEHE improved its ability to communicate and coordinate with our customer-owners. Another objective was to deliver our engineering services more rapidly. DEHE combined the construction of sanitation and health facilities into a single program, which uses personnel and equipment assets more efficiently. On the threshold of 2002, DEHE stands on a stronger customer-service foundation, ready to deliver services through four programs.

The **Regional Facility Program** provides engineering services to communities and tribal health organizations. These services include:

- Planning, designing, and constructing water, sewer, and solid waste systems in Alaska Native homes and communities.
- Providing technical assistance to regional hospitals and clinics.
- Planning, designing, and constructing new and renovated clinics in Alaska Native communities, as the Denali Commission's statewide administrative partner.

To deliver these services, four regional service areas have been established along regional Native health organization boundaries: Interior, Northwestern, Western, and Southern. Through agreements with local governments, construction is completed using local labor and ANTHC trades people.

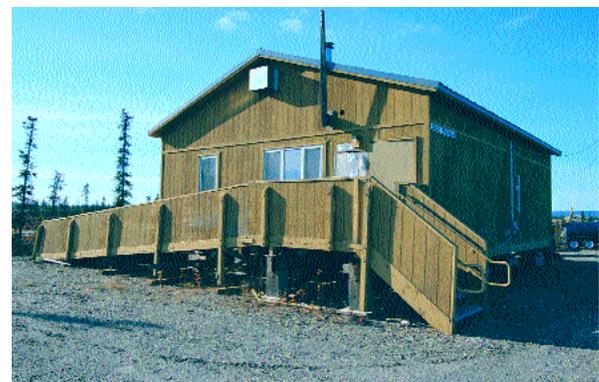
Regional Facility Program Highlights:

- DEHE constructed \$48 million in sanitation facility projects in Alaska Native communities.
- Projects improved sanitation service to 2,552 Native homes. Of these homes, 359 received service for the first time.
- DEHE administered \$8.3 million for 33 maintenance and improvement projects to 11 health clinics and regional hospitals.
- DEHE administered \$3.7 million of construction and improvements to 12 small health care clinics, on behalf of the Denali Commission.

The **Environmental Health Services Program** assists tribal health organizations with technical and administrative support, recruitment of professional staff, and coordination of statewide activities. Through tribal health organizations, Environmental Health Services assists in developing community-based injury prevention programs, and provides educational materials and training. Environmental Health Services also provides a variety of safety and institutional environmental control services. These include environmental sampling, assessment and compliance; industrial hygiene evaluation; occupational safety and health consultation; hazardous material and waste training; radiological health evaluations; hospital accreditation assistance; and infection control and risk management consultation.

Environmental Health Services Program Highlights:

- DEHE assisted tribal health organizations in administering approximately \$65,000 in injury prevention projects involving smoke detector installation, float coats, and car seats.
- DEHE provided radiological health service, lead-based paint assessment in child occupied areas, and JCAHO, OSHA and EPA technical assistance.
- DEHE expanded its construction safety risk management program.



*Opposite page: Leon "Kag" Okitkun tries out a new water faucet in Kotlik.
Above top: 2001 summer interns from left, kneeling, Leigh Hubbard, Jeremy Hamilton. Standing, Peggy Paulus, Julie Stoneking, James Walker, Fannie Black.
Above bottom: Allakaket's community health clinic.*



he **Sustained Operations Program** provides technical assistance and training to water and sewer system operators and managers. Training courses are made available throughout Alaska through grants to regional health organizations and classroom assistance by Sustained Operations staff.

DEHE also initiated a new Alaska Utility Supply Center (AUSC), a "one-stop shopping" resource for village operators. Materials and equipment for maintenance and operation of village water and sewer systems are available on an expedited basis at a discounted price.

Sustained Operations Program Highlights:

- This program provided operation and maintenance emergency assistance projects in seven communities, with services ranging from constructing a new well to rebuilding a boiler.
- The AUSC purchased water and sewer system maintenance equipment and supplies for more than 40 Native communities.
- Designed and implemented a Rural Utility Cooperative pilot project, in cooperation with the Yukon-Kuskokwim Health Corporation, to efficiently and economically administer the billing, operation and maintenance of community utilities.
- Conducted 25 classes to train more than 300 village water and sewer utility operators.

Central Engineering Services (CES) works with funding agencies and stakeholders to represent the interests of Native communities and their access to improved sanitation facilities, hospitals, and clinics statewide. CES also advocates for Native Alaska interests in national forums.

CES improves the efficiency and effectiveness of delivering DEHE services to communities through engineering review, financial accounting, material purchasing, transportation coordination, and project documentation. As part of this process, construction projects are reviewed to ensure that Native historical sites and the environment are not adversely affected.

Central Engineering Services Highlights:

- Developed an Internet-based Sanitation Deficiency System to improve Alaska tribes' ability to compete for national Indian Health Service environmental health program funding.
- Implemented a statewide housing assessment project, with State of Alaska funding, to determine where sanitation facility needs exist.



Opposite page: Tony Carroll (at right) and Clayton Jones install water lines in Ft. Yukon.
Above top: Maniilaq hospital in Kotzebue. Above bottom: Walter Tonuchuk demonstrates the difference between treated and untreated water in Kotlik.



Tribal Support Services

Tribal Support Services provides an array of programs designed to build infrastructure for the statewide Alaska Native health system and to provide critical support services for other Consortium divisions and regional and local tribal health programs throughout Alaska. Programs include:

- the Alaska Federal Health Care Access Network (AFHCAN) telehealth project
- Business Office Coordinator services
- Denali KidCare outreach services
- Professional Recruiting
- Employee Development
- Employee Recognition
- Planning, Evaluation, and Health Statistics
- Regional Supply Service Center

Tribal Support Services Highlights:

■ The AFHCAN project, an initiative to improve access to health care for federal beneficiaries in Alaska through sustainable telehealth systems, is in its fourth year of operation. The telecommunications system, the evaluation and purchase of equipment, and the initial software designs have been completed. Equipment has been deployed to 125 of the 235 total sites. Technical and clinical training programs have been implemented. A comprehensive sustainability plan is under development.

■ The Business Office Coordinator works with tribal business offices statewide to maximize their reimbursements. Two statewide business office manager workshops were conducted, along with a Medicare Part B workshop and coder training sessions in Anchorage and Sitka.

■ Denali KidCare outreach staff helped enroll more than 19,000 children in the state's child health insurance program, surpassing the goal of 11,600. A new user-friendly renewal form has been developed. ANTHC now publishes *Denali KidCare Tribal Connection*, an informational newsletter with 17,000 copies distributed statewide in regional newspapers.

■ Professional Recruiting continues to address the statewide shortage of health care professionals for tribal health programs. This program coordinates with the ANMC Nursing Management Council and human resources departments across Alaska. Recruiters made seven site visits in FY01, and attended three IHS recruiting conferences.

■ Employee Development provides scholarship and internship opportunities for Alaska Natives interested in health careers. In FY01 applications for these programs doubled. Twenty-seven high school and graduate students served in summer internship positions on the Alaska Native Health Campus. Five graduate and five undergraduate scholarships were awarded. Thirty ANTHC staff received educational assistance awards or education leave awards.

■ The Employee Recognition Program is designed to encourage, develop, and retain motivated employees. This year's activities included mid-summer and mid-winter employee recognition events, twelve Employee of the Year awards, support for the Special Olympics, and distribution of ANTHC three-year service pins. Special employee awards were given to ten units, 150 individuals, and 100 Commissioned Officers.

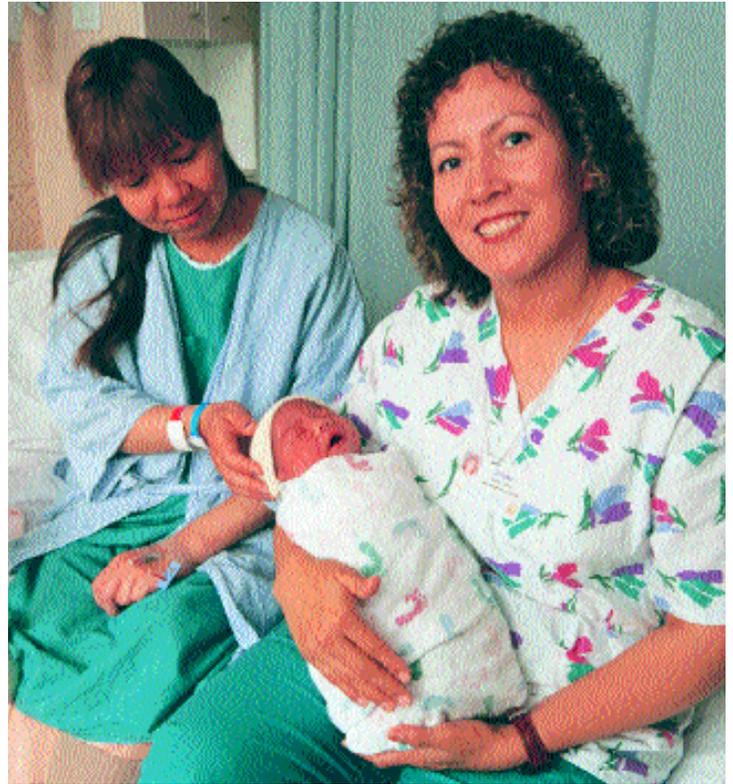
■ Planning, Evaluation, and Health Statistics staff published an updated Alaska Area Profile, completed the 2000 Alaska Native census count data, and reported on Alaska Native Mortality, Births, and Infant Deaths.

■ Staff at the Regional Supply Service Center acquired \$600,000 in excess military medical equipment and supplies for distribution throughout Alaska. The center distributes medical and pharmaceutical supplies to tribal hospitals and clinics in Alaska. Purchases from AmeriSource, ANTHC's prime vendor for pharmaceutical supplies, increased by 26 percent to \$14.7 million, while the Regional Supply Service Center's sales increased by eight percent to \$4.4 million.



Participants in ANTHC's 2001 Summer Internship Program. Front row left to right: Danielle Pratt, Melanie Draper, Stephanie Myers, Julianne Westlake, Peggy Willman, Flora Baker, Rachel Frost, and April Alexie. Middle row left to right: Jacinda Mainord, Crystal Peltier, Melissa Vallee, Hillary Gularte, Valene Peratrovich, Noah Wisecarver, Vivian Thurmond-Montoya, Sheila Vogt, Alexandra Taylor, and Priscilla Heckman. Back row left to right: Garret Spargo, Louis McGinty, and James Walker.

Opposite page: Tribal Support Services managers, back row, left to right: Harold Squartsoff, Director, Regional Supply Service Center; Vonni Carole, Director, Tribal Support Services; Edward Bean, Administrative Support Coordinator; Jackie Grediagin, Director, Employee Development; Front, left to right: Diane Leach, Statistician, Planning and Statistics; Sheila Fluetsch, Manager, Professional Recruitment; Linda Lekness, Director, AFHCAN; Charlene Galang, Coordinator, Denali KidCare Pilot Project. Not pictured: Lue Rae Erickson, Coordinator, Business Office; Rea Bavilla, Manager, Employee Development.



Community Health Services

Community Health Services programs focus on elevating the health status of Alaska Native communities to the highest possible level. Objectives are to monitor trends in deaths and illness, develop comprehensive regional and community-based solutions for priority health problems, provide technical assistance to communities and tribal health programs, and develop partnerships with other agencies for these purposes.

Community Health Services Highlights:

- Presentations to various groups on Alaska Native health status.
- Expansion and development of the Alaska Native Traditional Food Safety program, monitoring human tissue levels of heavy metals and industrial pollutants in mothers and newborn infants. Monitoring services have been expanded to include the Eastern Aleutian Tribes and Aleutian/Pribilof Islands Association communities.

■ Supporting the opening of the new Tundra Swan inhalant abuse treatment facility sponsored by the Yukon-Kuskokwim Health Corporation in Bethel.

■ Developing proposals to expand the number of Behavioral Health Aides serving in rural villages, and providing comprehensive training for substance abuse and mental health service providers.

■ Initiating development of a Dental Health Aide program to increase dental care services in rural villages, including development of standards and a training program.

■ Improving access to immunizations for children and measuring immunization rates.

■ Receipt of a new four-year Native American Research Center for Health (NARCH) grant from the Indian Health Service and National Institutes of Health to develop our Office of Alaska Native Health Research. This grant will fund seven specific research projects and provide training for Alaska Native researchers.



■ Receipt of National Cancer Institute funding to manage the Alaska Native Tumor Registry, to conduct cancer education for Community Health Aides, and to begin a long-range study monitoring health status of Alaska Natives.

Opposite page: Nursing intern Vivian Thurmond-Montoya holds Tracy Bertram's newborn baby Brandon Gonzales.

Above: Vera Spein at fish camp near Kwethluk. Community Health Services (CHS) works closely with tribal governments and agencies to ensure the continued safety and health benefits of our traditional diet by measuring nutrients and contaminants in residents who enjoy traditional foods. These and other studies show that eating our traditional foods provides numerous health advantages, as well as social, cultural, spiritual and economic benefits. Eating salmon, for instance, provides inexpensive and readily available nutrients, vitamins and protein. The benefits of fish consumption are proven, and they far outweigh the theoretical and controversial potential adverse health effects from the low levels of contaminants in Alaska fish. Switching to other less healthy, less nutritious foods would result in far greater harm to health.



Administration

Standing from left:

Tim Gilbert, Health Systems Network Specialist

Louis Christie, Director, Human Resources

Paul Sherry, Chief Executive Officer

Karen M. Mitchell, Executive Administrative Assistant

Garvin Federenko, Director, Finance and Administration

Sitting from left:

Marianne Gilmore, Executive Administrative Assistant

Tom Lefebvre, Director, Planning and Development

Joaqin Estus, Director, Public Communications

Tim Schuerch, General Counsel

ANTHC administrative offices consist of the Chief Executive Officer, Finance and Administration (including contracting and procurement), General Counsel, Public Communications, Human Resources, Planning and Development, and Health Systems Networking. The administrative offices provide organizational management and systems support for the four program divisions of the Consortium.

Administration Highlights:

- Organizing the implementation of the Consortium's 2000-2005 Strategic Plan.
- Working with the Alaska Native Health Board to create a new Statewide Alaska Native Health Plan for 2002-2010.
- Conducting a statewide forum on health information systems development.
- Developing an agreement with regional Native hospitals for management of medical evacuation funding resources.
- Representing Alaska Natives in the development of regulations for Title V of the Indian Self-Determination and Education Assistance Act.
- Revising our purchasing and contracting policies to give stronger preference to Native-owned enterprises.

- Purchasing land on the Alaska Native health campus for future needs, and securing a building lease for relocating Environmental Health and Engineering offices in 2002.

- Developing successful proposals to the Department of Health and Human Services for the expansion of health care for patients with HIV and AIDS, and to provide stronger information systems support to tribes and tribal organizations in the rural Anchorage Service Unit region.

- Representing the Alaska Native health community in the Alaska Federal Health Care Partnership, an inter-agency network including Indian Health Service, Veterans Administration, Department of Defense, and U.S. Coast Guard.

- Supporting a second year of Inform and Inspire, a multi-media healthy lifestyles promotion project featuring Alaska Natives making healthy choices.

- Creating the Campus Connector, a monthly newsletter for staff on the Alaska Native Health Campus, and expanding distribution of the Mukluk Telegraph, a statewide newsletter.

- Establishing a system for on-line Internet applications for Consortium employment.



Financial Summary

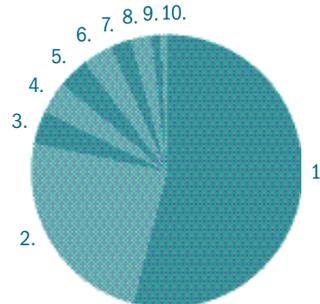
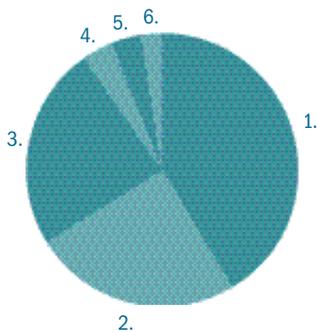
Revenue (in millions)

1. Indian Health Service (IHS) Compact	96.5
2. Third Party Collections	57.6
3. Sanitation Construction Projects	56.0
4. Telehealth - non IHS	8.6
5. Facility Maintenance and Improvement	8.3
6. Interest	5.8
Total	232.8

Expenditures (in millions)

1. Alaska Native Medical Center	118.1
2. Sanitation Projects	53.5
3. Telehealth	8.6
4. Facility Maintenance Improvements	8.3
5. Environmental Health and Engineering	8.0
6. Administration	7.9
7. Pass through Awards	5.3
8. Tribal Support Services	5.3
9. Sanitation Projects Committed Funds	2.5
10. Community Health	1.5
Total	219.0

This Financial is preliminary as of 11/1/01 and is subject to a formal audit for FY 2001.





Percy C. Ballot, Sr.
Maniilaq Association



Lincoln A. Bean, Sr.
*SouthEast Alaska Regional
Health Consortium*
(Vice Chairman of the Board)



Evelyn Beeter
Unaffiliated Tribes



Frieda R. Damus
Metlakatla Indian Community



Eileen L. Ewan
Copper River Native Corporation
(Board Secretary)



Fritz George
*Yukon-Kuskokwim
Health Corporation*



Katherine Gottlieb
Southcentral Foundation



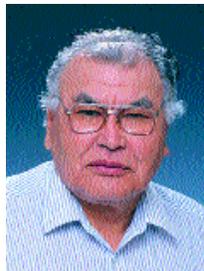
Robert Henrichs
Chugachmiut



Eben Hopson, Jr.
Arctic Slope Native Association



Emily Hughes
Norton Sound Health Corporation



Andrew Jimmie
Tanana Chiefs Conference



Don Kashevaroff
Unaffiliated Tribes
(Chairman and President)



H. Sally Smith
*Bristol Bay Area
Health Corporation*
(Board Treasurer)



Rita Stevens
Kodiak Area Native Association



Mike Zacharof
*Aleutian/Pribilof
Islands Association*

Board of Directors

Alaska tribes and tribal health organizations select the fifteen members of the Consortium's Board of Directors, which meets about six times each year. The Board has established several standing committees including:

- **Bylaws and Policy committee:** develops proposed changes for Board consideration.
- **Finance and Audit committee:** develops budgets and monitors expenditures for ANTHC; oversees audit and investment activities; recommends financial policies.
- **Alaska Native Medical Center Joint Operating Board (ANTHC selects five persons to serve, while Southcentral Foundation selects four persons to serve):** develops policies, oversees finances and operations of the Alaska Native Medical Center.
- **Medical Services Networking Committee (MSNC):** ensures coordination between ANTHC, Alaska Native Medical Center and our affiliated tribal hospitals and health centers throughout Alaska.
- **Alaska Health Facilities Advisory Committee (AHFAC):** advises ANTHC's Regional Facility Program and recommends allocations for maintenance and improvement.
- **Sanitation Facilities Advisory Committee (SFAC):** advises ANTHC's Regional Facility Program and recommends priorities for sanitation projects in rural Alaska.



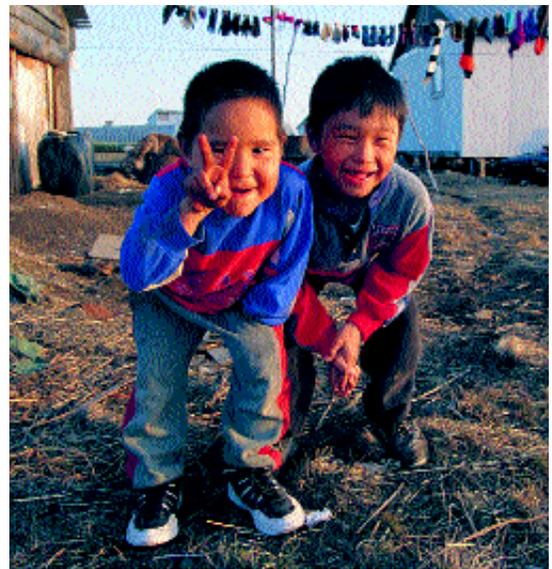
In FY01, the Board of Directors:

- Developed revisions to the Consortium's personnel and procurement policies.
- Approved a policy on the use of savings and interest income.
- Authorized the purchase of land on the Alaska Native Health Campus and the lease of an office building for Environmental Health & Engineering.
- Approved the operating and capital budgets and monitored expenditures.
- Identified legislative priorities.
- Approved Consortium membership on the Alaska Native Health Board.

Future Directions

In the coming year, the Consortium will have a series of opportunities and challenges, including:

- Adding several new key staff positions in the areas of information systems coordination, grants writing, safety management, specialty recruiting, and facilities management.
- Relocating the offices of Environmental Health and Engineering from the Alaska Native Health Campus to a new location on Bragaw Street adjacent to East High School.
- Relocating several programs from the Alaska Native Medical Center to the current Environmental Health and Engineering building, allowing for expansion of the Medical Center's dining area.
- Opening a new Pediatric Intensive Care Unit and an Occupational Therapy unit at the Alaska Native Medical Center.
- Increasing the number of Alaska Natives in administrative mentoring positions at the Alaska Native Medical Center.
- Increasing support for HIV/AIDS specialty and primary care services provided at ANMC.
- Expanding the number of village clinic construction projects funded by the Denali Commission.
- Completing the deployment of all 235 AFHCAN telemedicine workstations and completing a long-term sustainability plan for the AFHCAN system.
- Acquiring a new Human Resource Information System to improve personnel and finance systems interaction.
- Acquiring private foundation funding to support community-health programs.





Dee Hutchison
Hospital Administrator
Alaska Native Medical Center

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