January/February 2003 Vol.4, Number I



The Voice of the Alaska Native Tribal Health Consortium

### Inside

Alaska Diabetes conference was an "incredible opportunity"

Page 4

Consortium announces scholarship recipients for 2002-2003

Back page

Alaska Area Native Health Service employees achieve National awards Page 6

## NOTED

### She's ready to retire!

Koyuk health aide rests

after 30 years

After

a health



Georgianne Anasogak

## **Consortium annual meeting draws 200**

Tribal members offer praise, suggestions for improvements

By Joaqlin Estus, Director, Public Communications, Alaska Native Tribal Health Consortium

More than 200 people attended the Alaska Native Tribal Health Consortium's annual meeting held December 5, 2002 at the Egan Convention Center. "The meeting was our best yet, in terms of turnout," said Consortium Chairman and President Don Kashevaroff.

The meeting included people from villages such as Allakaket, Tununak, Nulato, Port Heiden, Igiugig, Telida, Manokotak and Diomede, as well as from larger hub communities. The meeting started with awards for Consortium employees who have demonstrated their commitment to excellence.

Then came presentations by Division directors Steve Weaver, Environmental Health and Engineering; Dr. Jim Berner, Community Health Services; Rich Hall, Information/Technology; and Sonya Conant, Human Resources. Paul Sherry, Consortium Chief Executive Officer, and Katherine Gottlieb, Southcentral Foundation President and Chief

Executive Officer, talked about Alaska Native Medical Center programs (ANMC Hospital Administrator Dee Hutchison was traveling)

Tribal representatives were invited to comment on Consortium programs and services, either at a microphone or using comment cards. "This is an important part of the annual meeting," said Sherry. "The better we understand the

needs of our customers, the better we can tailor programs to serve them."

Tribal representatives from communities such as Barrow, Tuluksak, Tazlina, and Northway offered suggestions on ways to improve Consortium services as well as praise. Some of the questions and responses were:

"The people who work in oncology are very caring and the clinic is state-



people who commented on programs and services offered by the Alaska Native Tribal Health Consortium.

— Photographs by Charles Tice

of-the-art. But I'm concerned, actually embarrassed, about the facilities. It's so crowded. And I'd like to see a greater emphasis on cancer research and education."

A master plan for facilities includes larger space for Oncology. Cancer research and education are a high priority for the Consortium.

Continued on Page 2

### **Alaska Native Medical Center reaches all time high revenues**

#### ANMC Staff Report

After a focused effort, Alaska Native Medical Center (ANMC) has caught up on its billing and receipt of revenues from Medicare, Medicaid, private insurance, and other sources. "We are very proud and excited," said Hospital Administrator Dee Hutchison. "Employees really pulled together to manage their resources well and to improve our revenue capture. It made a huge difference."

country, ANMC is facing rising costs and limited revenues. The hospital's specific challenge is to provide quality care as costs increase about ten percent per year while major funding sources do not necessarily keep pace. Last spring, the hospital's cash flow was temporarily interrupted after it installed new information technology systems in support of its billing and finance functions. The hospital instituted temporary

improve the many processes necessary to capture revenue. These efforts have increased financial stability for the hospital. Tribal leaders at Alaska Native Tribal Health Consortium (ANTHC) and Southcentral Foundation (SCF) continue to work actively on long-term business strategies to sustain and improve clinical services within available and foreseeable resources in order to achieve the goal of making ANMC the clear "provider of choice" for its

#### aide, Georgianne Anasogak of Koyuk has retired.

"I devoted so many years to others, "Anasogak said. "Now it's time for me, and my family."

Originally from Shaktoolik, Anasogak always dreamed of being a nurse to help people.

After two years of business school at Haskell Institute in Kansas, she moved to Koyuk and married Oscar Anasogak in 1964. In 1968 she began working as a health aide. She has spent nearly 30 of

Continued on Page 2

Like most health care providers in the

cost containment measures. Staff gave services and their resources a careful review. There was a focused effort to complete the software installations and

Native beneficiaries.



### Why so many nutrition studies in Alaska?

Different issues, different places call for different studies

Staff Report, Division of Community Health Services, Alaska Native Tribal Health Consortium

It seems like everyone is interested in nutrition these days. At last count, there were at least six ongoing dietary studies involving Alaska Natives. This may seem like a lot, but these studies all serve very important purposes.

First, although it is believed that food

habits among Alaska Natives have changed a great deal over the last thirty to forty years, very little research has been done to examine what people are currently eating. The last statewide data was collected in 1987. Unfortunately, Alaska is not part of an ongoing national nutrition survey. Therefore, in order to understand current food habits, we need to collect information on what people are actually eating now.

Secondly, information from the communities that have been surveyed highlights a fact that many people already know: Alaska Natives in different parts

of the state do not eat the same things. Alaska Natives are comprised of Yup'ik and Inupiat Eskimo, Alutiiq (Sugpiaq), Athabascan, Tlingit, Haida, and Tsimpsian Indians, and Aleuts. These groups have distinctly different languages and traditions. They inhabit different geographic areas of Alaska, and they often eat very different foods.

Thirdly, the various nutrition studies are investigating different issues. Certain chronic diseases known to be related to the food we eat, such as heart

Continued on Page 3



Page 2

The Voice of The People

#### Question: What is your New Year's Resolution?

"To quit smoking."

[Quitting smoking is the most common New Year's resolution, perhaps because studies show most smokers fail several times before quitting successfully.]



Juline Amarick



Shirl Snyder "To keep my family together and healthy." Snyder family (front left to right) Shaundeen, Rion, Shana, Shelby (back row) Shirl. Not pictured: Husband Lorenzo and eldest son Shawn.

"To be more self disciplined in maintaining my health, and physical fitness. I also want to achieve my educational goals." [Dieting and exercise are the second most common New Year resolution.]





"To obtain the elusive 4.0 [grade point average, or straight A's] in at least one of my two semesters next year."

### Annual meeting Continued from Page 1

"I had a bill that got sent to me and ended up going to collections. The billing should not even come to us."

Medical bills are usually the result of not having advance authorization from Contract Health Services.

"Some people want to come to ANMC but cannot pay for the medevac. So they go to Providence because it pays for the medevac."

"I'd like someone to check on how travel is handled. I had to come to ANMC for sinus surgery and I had to pay for the travel myself. It was heartbreaking when I found out I had to do it on my own because I'm overqualified for Medicaid."

In most cases, the regional health corporations each cover travel costs for their tribal members. Please talk with the staff there about travel policies. "Our hospital in Barrow is too small. It really needs to be the top priority for replacement."

The Samuel Simmonds Hospital in Barrow is the top priority in Alaska for hospital facilities funding.

"We need more assisted living facilities for the elders. All of us here will need a place to go for care some day. There's a great need in my region for assisted living facilities. It's also the cheapest way to go, instead of sending elders to the Pioneer's Home or a nursing home."

The Consortium has received a new grant for a study of elder needs.

"I have received care both at home and here, and like it better at ANMC. I had a cracked tooth and was able to get in to Dental right away. I was surprised at the friendliness, and got excellent service. My husband had to go to internal medicine and got excellent care there too. The doctors and nurses were all very good." Thank you for the positive feedback.

"The staff, and the board are all very positive, professionally dressed, and with a smile on your face. So, I feel good about being at this meeting. I'm concerned about how you can notify family if someone is dying. If the patient won't let us know, how are we going to be able to help if we don't know how bad it is?"

Patient confidentiality is not only required by law but an important value to health care providers. Health care providers will continue to respect the wishes of patients when it comes to sharing or disclosure of information.

The Consortium will write letters of response to everyone who gave comments and included their address.



### Koyuk health aide

Continued from Page 1

the 34 years since then as a health aide. The best thing about the job has been having the ability to help people.

The hardest thing has been being on call, unable to get away from the job. That has been easier since the city of Koyuk purchased a longrange cordless phone system for the clinic. The health aide on call can be reached anywhere within 12 miles of the clinic.

Despite hardships of the job, including caring for friends and family, Anasogak encourages interested young people to become health aides.

"I would tell them these are things to look out for," she said: "Don't ever keep anything to yourself. Find somebody to talk to, or eventually it will pile up and you'll break." To respect patient confidentiality, Anasogak for years thought she could not talk with anyone about her cases or how they affected her. She realized much later that she could discuss cases with others covered by the same "umbrella of confidentiality"—fellow health aides, doctors, some other NSHC staff, or a counselor.

Still, a simple "thank you" from a patient feeling better always helped Anasogak face another day with a smile and the confidence that she was helping people.

She also tries to instill confidence in young people.

"I've always told my kids, you can be anything you want to be," Anasogak said. "If you work at it,



Georgianne Angasoguk poses in the hallway at Norton Sound Regional Hospital with (from left) grandson Leo Charles, daughter Becky, and (right) son Timothy.

Photo by Carol Gales

you get your dreams." *Excerpts from an article in* <u>Kaniqsirugut, News</u>, a newsletter of the Norton Sound Health Corporation.



#### ANMC Assistant Administrator wins statewide award for health education

On December 4, the Alaska Health Education Consortium awarded its "Barbara Berger Award for Excellence" to Vivian Echavarria, MPH, CHES. Known as a committed and effective leader, educator and advocate for health education, Echavarria was the first Athabascan Indian to be certified as a Health Education Specialist (in 1990). The award nomination notes several of Echavarria's other career accomplishments: \* At Alaska Health Fair, Inc., modified site coordinators training to include a rural Alaska emphasis \* At Bristol Bay Area Health

Corporation, increased the regional health promotion budget from \$135,000 to \$1.3 million from multiple sources

Established the first Women,
Infants and Children (WIC) program in the Bristol Bay region
Provided training and orientation in Health Education Method-ology to health and educators that provide care to Alaska Natives Echavarria at a banquet held in conjunction with the Alaska Health Summit. The award is named in memory of Barbara Berger. a





\* Effectively took part in national efforts to increase health education in the areas of diabetes, nutrition, exercise and tobacco cessation

The Alaska Health Education Consortium presented the award to leader in Alaska and **Ec** 

Vivian Echavarria

health education and health promotion activities who died in 1985.



### Letters to the Editor

All readers of the Mukluk Telegraph are welcome to comment on subjects covered in the newsletter. Your opinions may be shared with other readers in the following issues of the Mukluk. Responses will be edited for length and good taste. We will attempt to publish all opinions. If you have questions about sending in letters, please don't hesitate to call Selma Oskolkoff-Simon at 907-729-1900.

### Editorial Staff

*Joaqlin Estus* Public Communications Director

> Selma Oskolkoff-Simon Administrative Assistant

Marianne Gilmore Executive Administrative Assistant





#### The Voice of the Alaska Native Tribal Health Consortium

The Mukluk Telegraph is the official newsletter of the Alaska Native Tribal Health Consortium. It is published bi-monthly and distributed to customers, partners, employees and associates of ANTHC statewide. Write us at: Alaska Native Tribal Health Consortium 4141 Ambassador Drive, Anchorage, Alaska 99508, Attn: Mukluk. Telegraph Or contact us at: FAX: 907-729-1901 PHONE: 907-729-1900 E-MAIL: <u>soskolkoff-simon@anmc.org</u>.



### National Guard donates duplex for sober housing



The Alaska National Guard has deeded a duplex to Norton Sound Health Corporation for use as sober housing for substance abuse clients. At left (left to right) Guard Brig. Gen. Steve Korenek, Army Col. Dave Snodgrass, Army Col. Fred Lehman, NSHC president and CEO Joe Cladouhos, and NSHC Sr. Vice President Trevor Colby, at a ceremonial deeding event. The house is expected to open in early 2003.

Photo by Carol Gales From <u>Kaniqsirugut News</u>, a newsletter of NSHC.

## Nutrition studies

disease, cancer, and diabetes, are on the rise in the Native population. There is not enough data available to evaluate the protective effect that eating Alaska Native food may have on development of these diseases. Several nutrition studies, therefore, are testing nutrient levels in foods to determine how important these foods are to maintaining good health. Many unique Native foods have never been analyzed in the lab. One study of four villages in 1997 found 26 Native foods for which nutritional information did not exist. Additionally, our understanding of which nutrients are important to good health has changed. Nutrients recently shown to have beneficial effects, such as folic acid (preventing birth defects and heart disease) or selenium (role in protecting against contaminants) are missing from the database for foods that may have been analyzed years ago.

Also, Native people are becoming more concerned about the possible contamination of their traditional food sources, and are becoming more involved in initiating research into this area. A number of the current nutrition studies are testing contaminant levels in Native foods and in some cases, in store-bought foods as well.

Without knowing what specific foods Native people are currently eating, how much and how often they are eaten, or what nutrients those foods contain, and whether they contain any contaminants of concern, it is hard to evaluate the effect that diet is having on the health of Alaska Natives.

Fortunately, a number of dietfocused studies have been funded. A description of these studies is shown below.

#### Title: Alaska Native Dietary and Subsistence Food Assessment Project

Agency: Alaska Native Tribal Health Consortium

Summary: In collaboration with Alaska Native organizations, this investigation will develop a dietary assessment instrument and increase the nutrient information on Native foods, enabling future investigators to more accurately assess the effects of diet on chronic disease. Six communities in each of two regions (Maniilaq and Yukon-Kuskokwim Health Corporation) will participate in this project, which will collect 24hour diet recalls in four seasons to determine current eating practices, analyze foods for nutrients, and develop and validate a food instrument that is useful in the two regions. They will partner with the U.S. Department of Agriculture, which is expanding the database of nutritional value for Alaska Native and American Indian traditional foods.

#### Title: Influence of Maternal Nutrition on Pregnancy and Fetal Outcomes in Alaska Native Populations

Agency: ANTHC, University of Alaska Anchorage Institute of Circumpolar Health Studies

Summary: The objective is to investigate the influence of maternal nutrition on pregnancy and infant outcomes. Three-day food records will be obtained from the pregnant women participating in the Maternal Cord Blood Monitoring Program. Participating regions are Yukon-Kuskokwim Health Corporation, Aleutian/Pribilof Islands Association, Arctic Slope Native Association, and East Aleutian Tribes. **Title: Alaska Traditional Diet** 

**Project** Agency: Alaska Native Health Board



Gwen Shavings, Cupik, from Nunivak, enjoying a healthy meal of fish, fruit and vegetables in Anchorage, where she now lives.

Photo by Ray Solomon

ic and cultural consequences which could result from a shift to an alternative, market-based diet?" This is a cooperative, community-driven model for understanding the risks and benefits of a rural diet, taking place in the Aleutian/Pribilof islands region.

#### Title: Building a Center for Biomedical Research Excellence for Alaska Native Health Research

Agency: University of Alaska Fairbanks, University of Alaska Anchorage Institute for Circumpolar Health Studies

Summary: The purpose of the diet and nutrition component of this interdisciplinary research project is to evaluate the dietary patterns, nutrient intakes, and food sources of Alaska Natives and to improve the understanding of the nutritional value of subsistence foods. Through the Cultural/Behavioral and Genetic components of the project, they will also determine the prevalence of overweight and associated behavioral factors such as body image, knowledge, and attitude toward diet practices and weight management beliefs as well as the genetics of body weight in a Yup'ik population. This study will take place in the YKHC region. The studies described here are nutrition based. Many other studies currently underway involve subsistence foods, but examine instead the issue of contamination. For information on these and other studies involving nutrition or contaminants, call Jennifer Johnson in the Office of Alaska Native Health Research, at (907) 729-3650.



### Sip all day, get decay

The Minnesota Dental Association (MDA) addresses issues with both regular and sugar-free soft drinks at its Website: mndental.org. Check out the Kids and Teens section. The MDA also has handouts (such as "Sip All Day, Get Decay"), posters, and stickers that can be ordered at:

[http://mndental.org/Files\_MP/T ool\_File\_38\_01.pdf

dental, and nutrition.

Thank you, Rameera Maresh, of Yukon-Kuskokwim Health Corporation, for this information.



# EMS presents awards to Nome, Norton Sound

The Norton Sound region took high honors at the awards banquet during the 27th Annual Emergency Medical Services Symposium in Anchorage on Saturday, November 16, 2002.

The Nome Volunteer Ambulance Department (NVAD) was named Ambulance Service of the Year -an honor they also captured in 1987.

The department was lauded for maintaining quality services despite drawing from a relatively small pool of volunteers.

Mike Owens, director of Emergency Medical Services at Norton Sound Health Corporation, was honored with a special commendation from the Alaska Council on Emergency Medical Services. The special award recognized Owens' dependability, excellent skills, and 20 years of service

#### Title: A Prospective Study of Alaska Natives and American Indians

Agency: Alaska Native Tribal Health Consortium, Southcentral Foundation, Yukon-Kuskokwim Health Corporation (YKHC), SouthEast Alaska Regional Health Consortium (SEARHC)

Summary: Will help determine how diet, physical activity, and other lifestyle and cultural factors relate to the development of diseases such as cancer, heart disease, and diabetes. This project will collect dietary information from Alaska Natives in three regions of the state -- the Anchorage bowl, the Yukon-Kuskokwim delta region, and Southeast. Summary: The purposes of this project are to determine the various foods eaten throughout the state and test some traditional foods for contaminants. Consumption patterns and contaminant levels will be used to assess possible exposure risk of traditional food users to contaminants of concern. Thirteen communities are participating throughout Alaska. **Title: Dietary Benefits and Risks in Alaska Native Villages** 

Agency: Aleutian Pribilof Islands Association

Summary: This project is designed to answer the question "What are the risks associated with environmental contaminants bio-accumulating in traditional foods, and how do they compare with health, social, econom-



to the region.

Confirming the excellence of the region's EMS providers, NVAD's two-person team took first place in the EMS skills competition at the symposium. Elisha Edwards and Vicki Erickson of Nome were judged best at handling several role-played scenarios, including one involving an ATV wreck and one involving a confused child.

From <u>Kaniqsirugut News</u>, a newsletter of the Norton Sound Health Corporation.



## More Statewide News

## YKHC Physical Therapist wins Governor's Award

On November 16, 2002, in Anchorage, Anne Kosacheff, Director of Physical Therapy for the Yukon-Kuskokwim Health Corporation, received the Governor's EMS Provider of the Year Award for 2002.

The award was based on Kosacheff's many accomplishments, including:

 Achieved EMT3 status quickly since joining the Bethel Fire Department in 1996.

Became the first woman state
 certified Structural Fire Fighter 1
 in the history of the Bethel Fire
 Department.

✤ Won the Bethel Fire Dept. firefighter of the year award, and had the most EMS runs of the year, with 121 ambulance runs.

Serving on the board of directors of the Bethel Volunteer
 Emergency Service Association.

From <u>The Messenger</u>, a newsletter of the Yukon-Kuskokwim Health Corporation.



#### Dental awards go to Southeast and Bristol Bay health organizations

The Alaska Native Tribal Health Consortium (ANTHC) recently named the dental program at the SouthEast Alaska Regional Health Consortium (SEARHC) 2002 Dental Program of the Year. The Consortium recognized Glenda Wilson, of the Bristol Bay Area Health Corporation, as Senior Dental Assistant of the Year and Susan Sergie, also of BBAHC, as Junior

### **Diabetes conference called an "incredible opportunity"**

.....

Julian Naylor, MD, Director Alaska Area Diabetes Program Alaska Native Tribal Health Consortium



Photo by Teresa Altenburg

December 4-6, 2002, the Alaska Area Diabetes Program of the Alaska Native Tribal Health Consortium sponsored its annual diabetes conference: Diabetes Prevention & Treatment in Alaska Natives: A Move to Action. The annual conference is designed for healthcare providers seeking to expand and update their knowledge in diabetes management. This year, with the growing concern about diabetes in the Alaska Native communities, the conference focused on preventing diabetes through lifestyle changes such as exercise, weight loss and healthy food choices.

This year's conference had record attendance with more than 270 health care professionals and paraprofessionals from around the state attending the three-day conference.

Staff from fourteen special diabetes grant sites in Alaska attended the National Diabetes Conference in Denver on December 11-13, 2002. The Tribal Leader's Diabetes Committee sponsored the confer-

Dynamic speakers, with practical advice on the prevention and treatment of diabetes in Alaska, were a valuable part of the Alaska Diabetes Conference held the first week in December in Anchorage. (At left) Charles Jaworski, of Norton Sound Regional Hospital, speaking on the effects of diabetes on vision. (Above) The Yukon-Kuskokwim Health Corporation Diabetes Program's Kelly Griffin, Licensed Nutritionist, and Delaine Davis, RN CTE, Director, giving a poster presentation.

File photo

Experts in the field of diabetes shared updates and information on the prevention and care of diabetes. A highlight of the conference was the "All Around Alaska" session where Special Diabetes Grant programs shared primary prevention program activities in their communities. This also allowed an opportunity for diabetes program staff to network with one another and learn about the many valuable resources within the Alaska Native health community.

Comments from conference participants included:

"Really intellectually stimulating with many practical recommendations..."

ence. Nome and ANTHC gave workshop presentations. ANTHC also did a poster presentation and a plenary presentation on the *10,000 Steps* walking program tool. The conference was called *Diabetes*  "This conference is a great source of information and provides an incredible opportunity to interact with others working in this challenging field..."

"The speakers provided very upto-date and informative lectures, introducing new thoughts and ideas on diabetes management which will be invaluable to take back to our rural communities."

The next Alaska Area Annual Diabetes Conference is scheduled for December 1-3, 2003. Mark your calendars now to attend this dynamic professional conference!

Prevention in American Indian and Alaska Native Communities: Turning Hope Into Reality.



### **Knowles names November 18-22 Community Health Aide/Community Health Practitioner Week**

In one of his last acts as governor, Tony Knowles issued a proclamation naming November 18-22, 2002 as Community Health Aide/Community Health Practitioner Week.

The governor extended the recognition in light of the great strides made by the Community Health Aide Program. tuberculosis in Alaska was brought under control.

However, it wasn't until 1968 that the Indian Health Service established the Community Health Aide Program. Over the years, it has proven its worth as isolated communities have come to rely on it for primary health care. The program is unique, the only one of its kind in the United States. Other countries have modeled their rural health care delivery system on Alaska's. Today it is administered throughout Alaska by tribal organizations. For health aides, the challenges and the dedication that come with the job make them some of the most significant contributors to the success of their villages. Despite limited resources and stressful conditions, health aide and health practitioners provide quality care. We should all be inspired by their commitment to service and healthy lives.

Dental Assistant of the Year.

ANTHC cited SEARHC's "innovative collaborations with the State of Alaska and Denali KidCare to bring increased services to children in Southeast Alaska communities."

Denali KidCare is a state-run, Medicaid-funded health plan for Alaska's uninsured children. The collaboration has proven self-sustaining and has freed dental resources to provide a higher level of care for adult dental patients.

Continued on Page 5

The program has its roots in the tuberculosis epidemic of the 1950s. Village volunteers, called "chemotherapy aides," made sure those that had the disease took their medicines. Through their work,

From <u>The Council</u>, a newsletter of the Tanana Chiefs Conference.



### Native Bazaar benefits artists, patients, Native students

Hundreds of people turned out to shop at the 19th annual Alaska Native People's Bazaar held on December 7, 2002 at the Alaska Native Medical Center. About 50 people volunteered to help with the bazaar so checkout went quickly. "We even had three women who flew up from Minnesota to help out," said Gift Shop Manager Jeanne Dougherty. Patients and visitors enjoyed entertainment by the King Island Dancers, Dave Chanar and Louise Leonard, and Athabascan fiddlers Artie Joseph and Louise Britton.

The Alaska Native Medical Center Auxiliary sponsors the bazaar. Prices of bazaar sale items include money for the artists and a small markup for the Auxiliary. The Auxiliary uses the proceeds to support patient programs and scholarships for Alaska Natives.

"We provide the Anchorage community with wonderful Native art," said Dougherty, "and it's a great benefit to the people in the villages."

## Denali Commission gives special award to Unalakleet clinic builders

Local crew members building a subregional clinic in Unalakleet, in northwest Alaska, were in the spotlight at the Denali Commission reception during this year's Alaska Federation of Natives convention.

The crew was presented with a special award for their hard work closing in the clinic last winter despite sub-zero temperatures that stopped their pneumatic nailers and left them swinging hammers.

The award was presented during a wellattended reception at the Anchorage Hilton on Thursday night, Oct. 24.

"We recognized that

the folks who did the work probably didn't know how much we appreciated what they were doing, so we crafted this award," said Denali Commission Federal Co-chair Jeff Staser.

"The work the crew did building that facility through the arctic winter was remarkable," he added. Before siding was put on, an inspection of the building's exterior found not a single bent nail—a true sign of pride in workmanship, Staser said.

"This is an example of local hire excelling," he said. The crew has shown levels of craftsmanship, diligence and pride "you rarely see in construction jobs."



(Back): Jeffrey Staser, Denali Commission, federal co-chair; Richard Cattanich, commissioner; Terrance Kotongan, project superintendent; Emily Hughes, NSHC board chair; Virginia Washington, NSHC board member; Fran Ulmer, Denali Commission state co-chair; Joe Cladouhos, NSHC president and CEO. (Front): NSHC Capital Projects staff members Eddie Hebert, construction expediter; Matt Carey, project engineer; and Stephen Christopher, director.

An inspection found not a single bent nail --- a true sign of pride in workmanship

Staser said the commission doesn't give regular awards.

"It's a judgment call based on what we see around the state," Staser said. "When you catch people doing things right, they ought to know about it."

Staser complimented supervisor Terry Kotongan for keeping his crew trained and injury-free in "some of the toughest working conditions on the planet."

Staser said the Denali Commission frequently uses the Unalakleet project to illustrate successful efforts the commission funds in Alaska. Federal cabinet officials have heard about Unalakleet.

"I think it's just a really neat story we can share showing how Alaskans are doing the right things in the right way," Staser said. "It's a sustainable project, it creates jobs, and it will create better health for all the communities around it."

The clinic is scheduled to open next fall.



.....

### More Statewide news

Continued from Page 4

**Running Water** Plant operators vital to water

and sewer systems

Who keeps your village water system running?

Every community in the Bering Strait region has at least one water plant operator, responsible for keeping the water bacteria-free and maintaining the system.

It's not simple. And if the water stops working or becomes contaminated, the health of the entire village is at risk.

To make sure water plant operators know their jobs well, Norton Sound Health Corporation runs six to eight training courses in Nome every year.

The sessions have resulted in more qualified operators who stay on the job longer.

At least one water plant operator in every village in the region is certified at least to the minimum level, as an operator in training. Five villages in the region add fluoride to their water to improve dental health in their communities. NSHC offers a course on fluoridation and chlorination regularly in Nome. No operator is allowed to run a fluoride system without proper training, including one-on-one training in the village.

NSHC encourages villages to have at least two water plant operators with regular hours so there is not just one person in town able to run the system. This protects the village if one operator quits. Water plant operators in the region are paid anywhere from \$9 to \$25 an hour.

From <u>Kaniqsirugut News</u>, a newsletter of the Norton Sound Health Corporation.

## SouthEast Alaska Regional Health Consortium honored for diabetes programs

The SouthEast Alaska Regional Health Consortium (SEARHC) has received statewide honors for its efforts to prevent and treat diabetes within the Native population of Southeast Alaska. Qualis Health, the quality assurance branch of the Medicare/Medicaid programs, has named the SEARHC Diabetes Team as one of the recipients of its annual Awards of Excellence in Health Care Quality. This year the Qualis awards focused on diabetes, an illness that now affects as many as 50 percent of adults within some Indian tribes in the lower 48. "In the 1960s, diabetes was rare among Alaska Native people. Now, Alaska Natives are developing diabetes at a higher rate than the U.S. as a whole," says SEARHC Outpatient Clinic Manager and diabetes team member Phyllis Hill. "The Native population of Southeast Alaska is particularly at risk," she adds. Hill says that SEARHC has been responding to the increase of the disease with a coordinated effort that involves physicians, nurses, pharmacists, nutritionists, social workers, health promoters, and other health professionals. Representatives from

many disciplines serve on the consortium wide SEARHC Diabetes Team. "We are trying to reverse the trend," says Hill, referring to rates among Southeast Natives that have nearly doubled in the past 15 years.

Hill notes that the increase in diabetes among Alaska Natives is largely related to changes in diet and lifestyle —with a shift in the current generation to less physical activity this condition among children seen at the SEARHC clinic in Sitka. "We are starting to see adult onset of diabetes in high school age Native youths," she notes.

The Qualis award recognized theSEARHC diabetes management program for addressing the disease on three levels. With patients that already have the disease, services are aimed at avoiding the complication of its advanced stages including heart disease, blindness, loss of limbs, and kidney failure. SEARHC's approach also includes early screening to identify patients at risk as well as primary prevention directed at eliminating obesity and unhealthy eating habits. In the area of prevention, the award noted that SEARHC offers many health promotion and healthy lifestyles projects in communities around Southeast Alaska. These projects include Ravens vs. Eagles walking competitions, the 10,000 Steps program, the Five-a-Day (fruits and vegetables) healthy diet campaign, promotion of traditional foods, floating health fairs, and computerized health risk appraisals. 

TO FIND OUT MORE ABOUT THE 10,000 STEPS PRO-

#### GRAM,

CONTACT CAROL TREAT, AT (907) 729-1128.

and more high-calorie foods. "In many cases diabetes and especially the advanced stages of the disease are preventable," states Hill. "One of the most important answers is for patients to become more physically active."

Obesity is one of the biggest risk factors of diabetes, and Hill says there has been a noticeable rise of

### spring 2003 groundbreaking for Angoon Clinic

**SEARHC planning** 

The U.S. Department of Agriculture (USDA) recently released \$1,732,500 to the SouthEast Alaska Regional Health Consortium (SEARHC) for the construction of a new clinic in Angoon. With funds now secured, SEARHC anticipates groundbreaking for the project during Spring 2003. This support will provide for site development and construction of a 7,800 square foot clinic, featuring telemedicine services.

From the SEARHC website.





## **STATEWIDE**

### News and notes

Continued from Page 5

.....

#### Elim lends a hand to heart disease study for region

Since October 2000, more than 600 Alaska Natives in the Bering Strait region have taken part in a study seeking genetic links to heart disease.

Each study participant gave about 14 tablespoons of blood, answered many questions about health and diet, and was given a physical exam.

Now it's Elim's turn. And people are lining up to help out.

The five-year study is known as GOCADAN: the Genetics of Coronary Artery Disease in Alaska Natives. Funded by the National Institutes of Health, the study is being run through Norton Sound Health Corporation.

Focusing on people who are related, researchers are looking for common genes among those who have heart disease or associated health problems—and among those who don't.

The GOCADAN team stretches across the nation. At least 15 scientists or investigators in seven cities receive and analyze the materials from each exam. They don't know any patients' names; items are identified only with a number.

NSHC GOCADAN staff Violet Charles and Terry Romenesko moved operations to Elim in November.

GOCADAN already visited Shaktoolik, Unalakleet, Koyuk and Teller. All 120 of Koyuk's eligible residents were seen in three months. The program has also tested King Islanders, relatives of Unalakleet, Shaktoolik and Koyuk people who live in Nome, and some Teller residents. Researchers want 1,200 exams completed by early 2004. Each exam takes about three hours, so the GOCADAN team can see only about four patients per day. Staff are impressed with people's willingness to go through the three-hour exam and interview to contribute to the study. People are hoping it will shed light on health problems in the region. As some have told Romenesko: "I know it might not help me, but it'll help my grandchildren."

## **Alaska Area Native Health Service** employees receive national awards

Charles W. Grim, DDS, MHSA, Assistant Surgeon General and Interim Director of the Indian Health Services, presented Alaska Area Native Health Service Employees IHS National Director's Awards at a November 21, 2002 ceremony in Rockville, MD. Also, Kristen Brockett-Miller and the AANHS Office of Human Resources received IHS Excellence Awards.

MILLER SERVED AS THE PRINCIPLE FINANCIAL CONSULTANT DURING A PERIOD IN WHICH THE AGENCY MADE THE LARGEST SINGLE PROGRAM TRANSFER TO TRIBES PURSUANT TO PL 93-638.

Sharon A. Miller, AANHS Financial Management Officer received an IHS Director's Award for her invaluable assistance in the resolution of contract disputes, streamlining and refining the reconciliation process

Miller

for Title V Tribal Compactors and Title I Tribal Contractors.

Miller served as the principle financial consultant as the Agency made the largest single program transfer to tribes pursuant to PL 93-638. Preparation leading to this unprecedented transfer included intense financial analysis to support the IHS negotiating team. Miller also provided a great deal of technical assistance to representatives of the Alaska Native Tribal Health Consortium and Southcentral Foundation before, during and after the transfer of programs.

Miller continues to provide invaluable assistance. During the FY 03 final negations, Tribal leaders complimented Miller and the Area Finance staff for the vast improvements to quality service. The timeliness of payments and reconciliation of funding agreements and buyback accounts dramatically improved. Consequently, the government-togovernment relationship between Alaska Native Tribes and the Indian Health Service has improved.

lion in IHS sanitation funding to Alaska Native Tribes. In addition, he coordinates funding with several other state and federal agencies, resulting in an additional \$40 million being transferred each year through IHS to Alaska Native Tribes.

In June 2002, AANHS received a call from Department of Defense (DoD) about a solid waste project they wanted to fund in Barrow. The DoD provided \$3.4 million for the construction of a new solid waste facility, but needed to obligate the funds before the end of the fiscal year. DoD had contacted other agencies to ask for assistance, but those agencies had determined they were unable to assist due to the short time frame. AANHS determined that we could use the authority of PL 86-121 to facilitate the project.

Fairbanks quickly engaged all the parties and successfully negotiated an Interagency Agreement with DoD that detailed the scope of work, policies, procedures and funds transfer. Fairbanks also negotiated a Project Funding Agreement with the North Slope Borough establishing the cooperation among participants, parties, scope of work, reporting requirements, environmental clearances and funding transfer and a resolution of support from the Native Village of Barrow. Capt. Fairbanks utilized his leadership and technical skills to establish this agreement in a little over eight weeks, though this type of agreement usually takes many months. Dedicated senior engineer managers like Capt. Fairbanks' are the foundation of the IHS health care delivery system. Due to Capt. Fairbanks efforts, the residents of Barrow will have a new environmentally sound facility that will provide safe and sanitary disposal of solid waste.

MILJURE WAS INSTRUMENTAL IN THE COMPLETION OF THE LARGEST SINGLE PROGRAM TRANSFER TO TRIBES . . . EXE-CUTING MORE THAN 1,000 INTERGOVERNMENTAL **PERSONNEL AGREEMENTS** (IPA) AND MEMORANDA OF AGREEMENT (MOA).

the new Alaska Native Medical Center (ANMC) to the Alaska Native Tribal Health Consortium (ANTHC) and Southcentral Foundation (SCF). Miljure, directly and through outstanding leadership of Area Human Resource staff, provided outstanding advice and assistance to IHS, ANTHC and SCF representatives before, during and after program transfer. Miljure led IHS, Tribes, and employees through the process of executing more than 1,000 Intergovernmental Personnel Agreements (IPA) and Memoranda of Agreement (MOA). Since 1999, Miljure continues to provide outstanding leadership in the area of human resource management. She has served as an advocate with both IHS and Tribal managers, for strong EEO principals. Miljure states "This award honor goes to the Federal HR, past and present, who worked to achieve these goals for ANMC and the tribal groups. Many thanks goes also to management, without whose support HR could not have accomplished these tasks."

MILLER-BROCKETT WAS KEY TO THE IMPLEMENTATION OF THE INTEGRATED **TIMEKEEPING AND** ATTENDANCE SYSTEM (ITAS) FOR THE ALASKA AREA . . . **DUE TO HER GRASP AND UNDERSTANDING OF ITAS.** 

Kristen Miller-Brockett, Alaska ITAS Administrator, received an Indian Health Service "Excellence in Human Resources" Award in the Administrative Support category.



Kristen

Miller-

Brockett works as an **Brockett Employee Relations** Assistant with IHS,

Alaska Area Native Health Service Office of Human Resources. Brockett was key to the implementation of the Integrated Timekeeping and Attendance System (ITAS) for the Alaska Area. Due to Brockett's grasp and understanding of ITAS, she was sought after to be on the IHS team for the IHS-wide implementation project. Brockett's independent preparation for ITAS was above and beyond her scope of work. Brockett reorganized the federal timekeeping training manual and set up timekeeping rules and regulations training. She modified the ITAS training manual to adapt the Alaska time difference, as well as hospital specific categories such as night differentials, Sunday differentials, on call, and shift work. Brockett assumed a great deal of responsibility to ensure that the training for the project and the implementation of ITAS was a success. Brockett ensured that timekeeper training, as well as Payroll Error Corrections (PECS) training was



Sharon A.

From Kanigsirugut News, a newsletter of the Norton Sound Health Corporation.



**FAIRBANKS IS RESPONSIBLE** FOR MANAGING A COMPLEX **PROGRAM THAT TRANSFERS** ABOUT \$18 MILLION IN IHS SANITATION FUNDING TO **ALASKA NATIVE TRIBES.** 

Capt. Norm Fairbanks received the IHS Director's Award for exceptional initiative and leadership Fairbanks, Director of the Division of Sanitation Facilities. is responsible for

program that transfers about \$18 mil-

Nieves M. Miljure, Director of **AANHS** Human Resources, received the IHS Director's Award for outstanding dedication to further the mission of the Indian Health Service.

### Miljure served as

Nieves

Miljure

the principle human resource consultant to the Indian Health Service when the Agency opened the largest state-of-the-art hospital in the Indian Health Service. Miljure was instrumental in the completion of the largest single program transfer to Tribes when in January, 1999 IHS transferred operation of all Area statewide programs including

Continued on Page 7

managing a complex

Norman

Fairbanks



### **Reflective tape reduces chances of injury**

.....

<u>ANTHC Staff Report</u> Several people involved in injury prevention programs have been ironing reflective tape onto coats for

folks around Anchorage. A good selection of designs helps, according to Helen Andon, Injury Prevention Program Coordinator for the Alaska Native Tribal Health Consortium.

"The most popular were feathers, thunderbolts and stars," said Andon, "When you see people walking around with the Big Dipper design on the back of their jackets, that's our work."

The team spent four days at the Alaska Federation of Natives Convention, and several hours at the Alaska Native Traditional Health Celebration held at Alaska Native Medical Center in October. On December 20, the group had three irons going at once at Bean's Cafe, a soup kitchen for the hungry and homeless in downtown Anchorage.

"We probably ironed reflective designs on at least 75 coats [there]," said Andon.

As we all know, darkness comes early during fall and winter months in Alaska. Pedestrian-vehicle collisions increase as well. In fact, the highest numbers of pedestrian collisions occur from November to February, between 3-6 p.m.

But, did you know it takes 260 feet to stop a vehicle traveling at 60 miles per hour?

A child wearing dark colors and walking in darkness or in low-light conditions is first seen approximately 55 feet away. This gives a driver less than one-second reaction time!

A person wearing white or light colors is first seen approximately 180 feet. A person wearing reflectors is first seen 550 feet away.

Alaska has one of the highest injury rates in the nation. People wielding irons in Anchorage to change those numbers include:

Ryan Hill, Injury Prevention Specialist

Chris Campbell, Environmental Review Officer



(Above): Chris Campbell laughs with a fellow getting reflective tape ironed onto his coat. (Above top) A design of feathers and stars on one coat, and (above right) another client shows off his feather, stars and hearts design. Reflective tape greatly increases the distance at which a driver can see the wearer and respond to world a collision.

### **IHS Awards**

*Continued from Page 6* conducted for twenty-one timekeepers and eight designated PECS employees. Evaluations of the training conducted by Brockett were worthwhile and informative with excellent comments on Brockett's teaching skills. Brockett's efforts in training development and implement tation reflect a substantial accomplishment that contributes to the quality and efficiency of the Alaska Area Native Health Service and Indian Health Service. Brockett's dedication to getting a job done and done well continues to reflect well

on her daily work.

The Alaska Area Native Health Service staff received an "Excellence in Human Resources Award" in the category of HR Consultation and Operations Team. The Alaska Area IHS Human Resources is staffed with nine employees, which includes experts in Commissioned Corps Personnel, Integrated Time and Attendance for Civil Service employees, knowledgeable and exemplary staff to handle personnel data, and a Transportation Officer who is sought out by other IHS Areas for transportation advice and service. Other IHS Area offices, which have not transferred large programs to tribal management pursuant to Indian Self-Determination and Education Assistance Act (PL 93-638), turn to the Alaska Area HR Office for advice and assistance. Office of Human Resource (OHR) staff played a huge role in preparing the move from the old Alaska Native Medical Center (ANMC) to the new ANMC in 1997. The move involved establishing, classifying, recruiting, and staffing over 300 new positions; and realigning and reassigning many other positions. The subsequent transfer of ANMC operations to trib-

al management in 1999 involved defining positions to be transferred to tribes; determining employee eligibility for IPA/MOA assignments to tribal organizations; counseling employees; establishing records including IPA and MOA agreements; and, assisting the Agency Lead Negotiator in his negotiations with the tribal organizations that assumed management of the ANMC and other

## CALENDAR

.....

**Reflective tape and light** 

SERIOUS INJURIES FROM COLLI-

SIONS BETWEEN PEDESTRIANS

Kerry Wilson, Communications

Helen Andon, Injury Prevention

Ron Perkins, Director of the

Alaska Injury Prevention Center

Kelly McManus, SCF, Injury

**OR WHITE CLOTHING HELP** 

SAVE LIVES AND PREVENT

Keith Cook, Environmental

AND VEHICLES.

**Program Coordinator** 

Prevention Specialist.

**Control Officer** 

Specialist

#### January

**13-17** Bristol Bay Area Health Corporation (BBAHC) Full Board Meeting, Anchorage **14-16** Indian Health Service (IHS) Business Plan Workgroup, Phoenix Area Office, Phoenix **15-16** ANTHC Sanitation Facilities Advisory Committee, Yukon Conference Room, Division of Environmental Health and Engineering (DEHE) Building **20** ANTHC OFFICES CLOSED for Martin Luther King, Jr. Day **20-24** Norton Sound Health Corporation (NSHC) Board Meeting, Nome **21-24** SouthEast Alaska Regional Health Consortium (SEARHC) board meeting **22** Alaska's Covering Kids Statewide Coalition, Noon - 3:30 pm, Inuit Building, Room 311 **24** Denali Commission Quarterly Meeting, UASE, Egan Library Building, Juneau, 9 am - 5 pm. (Info: www.denali.gov) 27 Alaska Native Medical Center (ANMC) Joint Operating Board (JOB) meeting, 9 am - 4:30, ANMC Conf Rm 2 **27** Medicaid Task Force Meeting, 10 am - 3 pm, Inuit Building, Room 312 (Info: Kamala Rodgers kamala.Rodgers@searhc.org) 28-29 ANTHC CMT Retreat, 8 am - 5 pm

### February

**4** ANTHC Finance Committee, 9 am - 5 pm, Room 311, Inuit Building 5 ANTHC Special Board Meeting, 9 am - 5 pm, Room 311, Inuit Building 6-7 ANTHC Regular Board Meeting, 9 am - 5 pm, Room 311, Inuit Building **6** Eastern Aleutian Tribes (EAT) board meeting, False Pass 7 ANTHC Scholarship & Internship Applications due to **ANTHC Education & Development** (Info: 1-800-684-8361) **11-14** Alaska Native Health Board MEGA Meeting, Juneau 14 Alaska Telehealth Advisory Council **17** ANTHC OFFICES CLOSED for Presidents' Day **18** YKHC Finance Committee meeting, Bethel **19** Denali Commission Health Steering Committee, 9 am - 1 pm, DC Office 19-20 YKHC Executive Board, Bethel 25 Medical Services Networking Committee, location TBA **25-27** Alaska Health Facilities Advisory Committee, Yukon Conference Room, DEHE Building **28** IHS Scholarship Applications due to ANTHC Education & Development (Info: 1-800-684-8361)

### Other IHS Area offices, which have not transferred large programs to tribal management pursuant to the Indian Self-Determination and Education Assistance Act (PL 93-638), turn to the Alaska Area HR Office For Advice and assistance.

essential state-wide services.

The Alaska OHR team has been a key player in Merit Systems Protection Board (MSPB) hearings for separated federal employees impacted by Reduction in Force as a result of tribal cancellation of their assignments. Several of the MSPB cases are precedent setting. The OHR continues to maintain employee records, assisting tribes in HR matters, providing benefit information, providing travel entitlements, and providing information to employees and management on all the Commissioned Corps matters for the Alaska and Portland Areas.



## **Scholarships**

#### Staff Report, ANTHC Education and Development Department, Human Resources Division

Alaska Native Tribal Health Consortium (ANTHC) Education & Development is proud to announce the ANTHC \$5,000 Scholarship awardees for academic year 2002-2003. ANTHC awards approximately five full-time undergraduate students and five full-time graduate students scholarships of \$2,500 per semester (\$5,000 per academic year). ANTHC Education & Development department grants scholarships to encourage Alaska Native and American Indian students interested in the healthcare field.



Christina Anagick, Unalakleet, AK University of Washington School of Medicine. Graduate – Medical Program

Christina Anagick

Photo not available

Aaron Peters, Anchorage, AK University of Alaska Anchorage, Bachelors -Journalism & Aaron Peters Public Communications



Adella Bolling, Anchorage, AK University of Alaska Anchorage, Associates - Pre-Nursing



**Richard David**, Sr., Fairbanks, AK University of Alaska Fairbanks, Bachelors - Civil Engineering

Richard David, Sr.

Dhote

**Teresa Flores**,

Photo not available.	Margaret Hoffman, Ruby, AK Willamette University,
Margaret Hoffman,	Bachelors – Biology

not

**Beverly Johnson**, Photo Emmonak, AK University of Washington School available. of Medicine, Graduate – Medical Beverly Program Johnson

Photo Melanie Johnson, not Bethel, AK available University of Alaska Fairbanks, Bachelors - Biology Melanie Johnson

**Rona Johnson-**Photo Kurzejeski, not Eagle River, AK available. University of Alaska Anchorage, Bachelors – Nursing Rona

Johnson-Kurzejeski



Unalakleet, AK Bastyr University, Masters – Nutrition

Charlene Koutchek



Amy Maitland



Larissia Billy-Motto



Elise Pletnikoff, Kodiak, AK Carroll College, Bachelors - Biology

Larissia

Sitka, AK

**Billy-Motto**,

University of

Nevada Reno,

Bachelors – Nursing

Elise Pletnikof



Jessica Scott, Juneau, AK University of Washington Medical School, Graduate -Medical Program

lessica Scott



Amber Sims, Holy Cross, AK University of Alaska Anchorage, Associates – Human Services





Viola Stepetin



St. Paul, AK University of Alaska Anchorage, Bachelors – Civil Engineering & Science and Technology/Welding



Brandy Tiger,

#### January/February 2003



Melissa Vallee, Anchorage, AK University of Alaska Anchorage, Bachelors - Pre-Medicine

Melissa Vallee



Lorna Wilson, Unalakleet, AK St. Olaf College, Bachelors - Pre-Medicine

Lorna Wilson

**ANTHC Education & Development** would also like to thank the Alaska Native Medical Center (ANMC) Auxiliary for sponsoring three \$5,000 scholarships for the following students:



Peters

Aaron Peters, Ruby, AK University of Alaska Anchorage, Bachelors – Biological Science



Danielle Pratt, St. Mary's, AK Dartmouth College, Bachelors - Pre-Medicine

Danielle Pratt

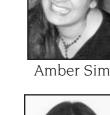


Martha Vlasoff, Cordova, AK University of Alaska Anchorage, Bachelors -Psychology





Amber Sims





	Bethel, AK University of Alaska	L F
available.	Fairbanks,	Г
	Bachelors –	
Teresa Flores	Psychology	



Brandy Tiger Bachelors-Physician Assistant

### Scholarship and Internship applications now available

ANTHC Scholarship and Internship & IHS Scholarship applications are now available. If you would like to have one mailed to you or a friend, or for further information, please contact Ann Hansell, Education & Development Assistant, at (907) 729-1917 or by e-mail at: anhansell@anthc. org

### Alaska receives record number of IHS scholarships

- Academic year 2002-2003 presented ANTHC Education & Development a record number of Indian Health Service (IHS) scholarship awardees. On average, the Alaska area receives 7-11 IHS scholarship awards per academic year. This year the Alaska area received 32 awards in the following disciplines:
- 2 Chemical Dependency Counseling
- Associate Degree Nursing 2
- Bachelor Degree Nursing

- 2 Physician Assistant
- 3 Pre Dentistry
- Pharmacy 1
- 9 Pre Medicine
- 5 Pre Nursing
- 2 Pre Pharmacy
- 1 Pre-Physical Therapy
- 1 Pre Social Work

ANTHC Education & Development facilitates the Indian Health Service (IHS) scholarship, which provides selected scholarship recipients with

paid tuition, related fees, and a small amount for travel, books and a monthly living stipend. All Alaska Native or American Indian students with proof of enrollment to a federally (or possibly state) recognized tribe are eligible to apply for the IHS scholarship. (See back page for information on how to apply).

