

MUKLUK



TELEGRAPH

AFN Special Edition

The Voice of the Alaska Native Tribal Health Consortium

Check on your ANMC eligibility

To ensure we provide the highest quality care, Alaska Native Medical Center needs your help to make sure that we provide services only to those people who are eligible for care here. Starting in January, 2004 ANMC will begin checking to make sure everyone receiving care has proof of eligibility on file.

Why is that necessary?

Alaska Native Medical Center (ANMC) provides pre-paid medical services to eligible Alaska Natives and American Indians. Indian Health Service funding covers only part of the cost for everyone eligible for care at ANMC. Thus, it is important that ANMC provides services only to those people who are eligible for services at the ANMC accredited campus. The only way to be sure we are doing that is to have proof. If we don't have proof of eligibility on file, we will ask for your help to get it.

How can you help?

You can help by providing the paperwork or documentation that proves you are Alaska Native or American Indian by being an enrolled member or a descendant of a member of a federally recognized tribe.

The papers that may prove your eligibility include, but are not limited to, the following:

- Bureau of Indian Affairs-issued card or Certificate of Degree of Indian Blood.
- Tribal card or enrollment verification from a federally recognized tribe.
- Birth certificates demonstrating lineage from an eligible benefi-

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Magnificent Seven

First class of dental health aides graduates

By Ron Nagel, DDS,
Alaska Native Tribal Health Consortium

In June 2003 the first seven dental health aides in Alaska were certified by the Community Health Aide Certification Board. Congratulations to: Clara Carlson, Debra Dayton, Michael Demoski, Debra Heard, Clarissa Maxfield, LaVerne Schafer, and Cynthia Sears, all of the Tanana Chiefs Conference region, for completion of the expanded function dental health aide training program.

These seven people have completed 40 hours of classroom and clinical training on restoring teeth (fillings) and have more than a year of clinical experience working under a dentist. Now they are able to work with a dentist to complete fillings after the dentist has prepared the teeth.

This will allow the dentist to provide treatment to more patients and reduce the waiting time patients sometimes face in getting an appointment. The seven are from the Tanana Chiefs Conference dental program in Fairbanks and came to the Dental Health Aide training program with



Dental health aide Debbie Heard talks with a client at the Tanana Chiefs Conference dental clinic in Fairbanks.

File photo

experience as dental assistants.

During training, students review fundamental dental anatomy, learn about materials used in dentistry, and begin to develop the hand-eye coordination needed to fill teeth. They do this by working on Typodonts, a type of dental mannequin used to teach dental techniques before students ever work on patients.

Once classroom training is complete, students are ready to begin to work on patients under the close supervision of their dentist. The students in Fairbanks practiced this

way, getting each filling checked by a dentist, for more than a year.

After a lot of hard work, they completed the clinical portion of the program and were recommended, by the director of the TCC dental program, for certification. These students deserve to be recognized for their extensive work in becoming the first certified Dental Health Aides.

In January 2004 Tanana Chiefs Conference will be hosting the

See Dental Aides, page 8

Milk Club helps Alaska's future leaders grow up strong

Kat Gorman, Muddy Rudder Restaurant led fight against soda

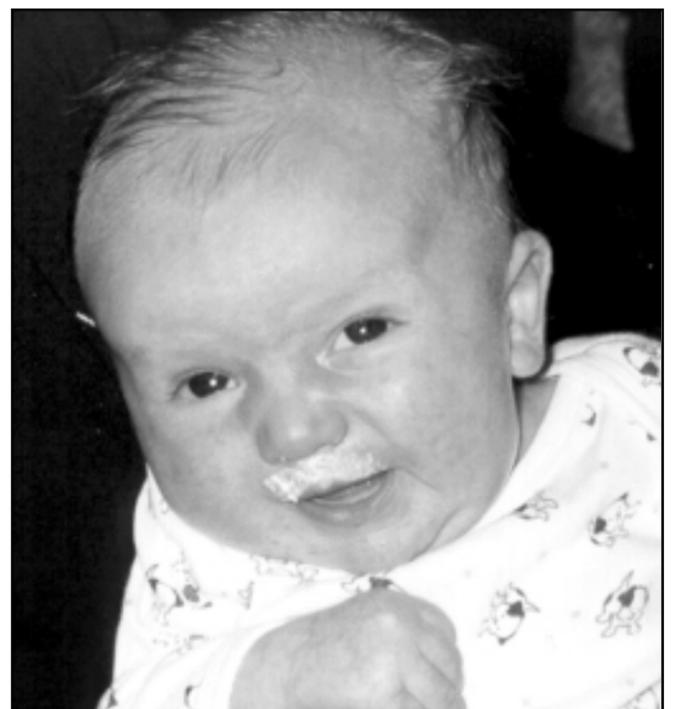
By Carole Ballew, PhD,
Director, Epicenter,
Alaska Native Health Board

Kat Gorman, front-end manager of the Muddy Rudder Restaurant in Dillingham, noticed children of all ages, from toddlers to teenagers, with cavities, missing teeth, and extensive dental work. She saw children drinking lots of pop, starting with pop in their baby bottles. She started encouraging children to choose milk by offering them a free milkshake if they drink 12 glasses of milk in the restaurant.

The idea took off and now she has nearly 300 children signed up, including residents of Dillingham and children who visit town from the surrounding villages. Someone in town started calling them the Milk Club. Kat recently added pregnant and nursing mothers to the Milk Club; they can earn a milkshake for themselves or accumulate points for their babies.

Kat says many children in the Milk Club have switched entirely from pop to milk, at least in the restaurant, while others still drink some pop. The Club

See Milk Club, page 11



Nursing Mothers in the Milk Club can earn a milkshake for themselves or get points on their baby's behalf.

Photos Kat Gorman

VOX

Voice of the people

What is it that you like most about AFN?



"Meeting all the people from all over the state, Barrow, Nome, just everywhere, and the great diversity of the people."

– Barbara Moonin,
Port Graham



"Meeting a lot of people and the dance that is held each year. The arts and crafts are fun as well."

– Denise Hooper,
Tununak



"Fellowship with people and getting to see the other cultures."

– Allen B. Nickanorka,
Tyonek



"I am a crafter and I love going to see the arts and crafts."

– Annie Kompkoff,
Anchorage

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Alaska Native Tribal Health Consortium study on safety of traditional foods expands into Russia

Studies show Native foods are safe, nutritious

ANTHC Staff Report

An ANTHC study on the safety of traditional Native foods has gone international. The Traditional Food Safety Monitoring Program looks at the levels of persistent environmental contaminants in Native people who use traditional foods. In early September, the final pieces fell into place to expand the project into Russia.

Similar studies are being done among the Inuit of Canada and Greenland as well as with other Russian indigenous people. Native communities in North and West Alaska and now the Aleutian and Pribilof Islands have passed tribal resolutions to participate in the study.

Results of these studies should provide answer important questions such as "Is traditional food safe?" and "What are the benefits of eating traditional foods?" While the research is still in the early stages, results so far indicate levels in Alaska mothers are in line with mothers in other Arctic countries and the rest of the U. S. population.

In early September representatives of three Alaska Native organizations traveled to the Russian city of Petropavlovsk to implement the traditional food safety-monitoring program. The Alaska delegation included Mike Bradley, ANTHC Traditional Food Safety Coordinator in the Division of Community Health Services, Mike Brubaker, Director of Community Services with the Aleutian Pribilof Islands Association, and Victoria Gofman, Executive Director of the Aleut International Association.

The traditional food safety monitoring program began in Alaska in 1998



Alaska and Russian tribal and health representatives meet to work out details of a study on traditional food safety. From left to right: Victoria Gofman, Executive Director, Aleut International Association; Valery Raenko, Acting Director, Kamchatka Regional Health Departments; Mike Bradley, Traditional Food Safety Coordinator, Alaska Native Tribal Health Consortium, ANTHC; Mike Brubaker, Community Services Director, Aleutian Pribilof Islands Association.

in response to concerns about reports of contaminants in traditional foods.

The study measures contaminant levels in mothers and babies and then follows the babies for a year to determine if there are any health effects associated with exposure to contaminants. Mothers also complete a dietary survey to determine how much and what traditional foods they consume. In addition to important information on contaminants, the study will provide information on health benefits from eating traditional foods.

Efforts to expand the study to the Russian Far East began because of other studies that show contaminant levels in the Western Aleutians seem to be higher than in other areas of Alaska. The Russian Commander Islands are the most Westerly of the Aleutians and have a population of Aleuts who are also members of the Aleut International Association.

Brubaker and Gofman have led efforts to expand contacts with the Russian Aleuts and one of the initiatives was to include them in the traditional food safety monitoring program.

The September trip finalized all preparations and the study has begun. Aleut women from the Commander Islands and those who live in or near Petropavlovsk will be asked to participate in the study. Other indigenous peoples of the region, including Evens, Itelmens and Koryauks, will also be eligible to participate. Staff at the three hospitals in Petropavlovsk and the small hospital on the Commanders will administer the project and collect the samples. The analysis will be done at the Northwest Public Health Research Center in St. Petersburg, Russia. The project is funded by the U.S. Environmental Protection Agency.



Public health partners unveil new campaign to promote awareness of proper antibiotic use

The U.S. Department of Health and Human Services and a consortium of national health organizations urge consumers to be cautious about their use of antibiotics during the cold and flu season. Officials stressed that antibiotics are an ineffective treatment for viruses, such as those that cause colds and flu, and that inappropriate antibiotic use - particularly

among children - is contributing to an alarming growth of global antibiotic resistance.

"Antibiotics show amazing results when used to treat bacterial infections, but they won't help at all against the common cold or flu," Surgeon General Richard Carmona said. "What's worse, if people take antibiotics when they

don't need them, it can make these important drugs less effective in the future. This is part of health literacy and closing the gap between what health-care professionals know and what Americans understand."

For more information, visit: www.cdc.gov/od/oc/media/pressrel/r030917.htm



MUKLUK TELEGRAPH

The Voice of the Alaska Native Tribal Health Consortium

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Attention: Mukluk Telegraph

For more information, or to send us news or announcements, please contact us at:
Fax: (907) 729-1901 Phone: (907) 729-1900

Letters to the Editor

You are welcome to submit articles for publication, or to comment on articles published in the Mukluk Telegraph.

If you have questions about sending in articles or feedback, please don't hesitate to call Selma Oskolkoff-Simon at (907) 729-1900 or send an e-mail to: soskolkoff-simon@anthc.org



The skinny about obesity in Alaska

In Alaska, combined obesity and overweight percentages increased from 48 percent in 1991 to 61 percent in 1999. Alaska now ranks fifth in the nation for obesity.

- 63 percent of Alaska adults are overweight or obese.
- In Alaska, over the past ten years, overweight/obesity in women has increased by 32 percent and in men by 22 percent.
- 20 percent of Alaska adults report getting no physical activity.
- 76 percent of Alaska adults report eating less than 5 servings of fruit and vegetables per day.
- In 2000, 37 percent of Alaska adults were trying to lose weight. 13 percent of these people received advice from a doctor or other health professional about their weight.
- 7 percent of Alaska students in grades 9 - 12 are overweight.
- In 1999 in high school students, less than 25 percent of boys and girls participated in daily school physical education activities.
- In 1999 in high school students, less than 23 percent of

boys and girls reported eating 5 servings of fruits and vegetables per day.

- If you drink one less regular coke every day for a year without making any other lifestyle changes, you will lose 18 pounds. Add to that 30 minutes of brisk walking every day for a year and you will lose an additional 9 pounds!

Facts about obesity

- Obesity and overweight are strongly linked to higher incidence of heart disease, high blood pressure, diabetes, arthritis, several types of cancer, breathing problems, and complications in pregnancy.
- Premature death and disability, increased health care costs, and lost productivity are all associated with overweight and obesity.
- Even moderate weight excess (10 to 20 pounds for a person of average height) increases the risk of death.



From the Alaska Department of Health and Social Services publication "The Burden of Obesity in Alaska," the "Surgeon General's Call to Action to Prevent and Decrease Obesity, 2001," and publications of the Centers for Disease Control and Prevention.

Sen. Murkowski resolution would create Fetal Alcohol Syndrome Day

By Heather A. Resz

U.S. Senator Lisa Murkowski is leading a national effort to eliminate preventable birth defects in Alaska children.

On Sept. 9, she introduced a senate resolution to declare Sept. 9 annual Fetal Alcohol Syndrome Awareness Day.

"The resolution, like the day itself, is intended to focus attention on the high cost of Fetal Alcohol Spectrum disorders to our nation and the ease of prevention," Murkowski said. "At the same time it asks that the American people treat those afflicted with these disorders with compassion and support."

Among a five-state Centers for Disease Control coalition, Alaskan children experience the highest rate of Fetal Alcohol Syndrome – birth defects that result when pregnant mothers drink alcohol.

Each year, about 140 Alaskan babies are born with fetal alcohol spectrum disorders. Alaska Native children suffer the highest rates of Fetal Alcohol Syndrome in the state.

Nationally, it is the leading cause of mental retardation. Fetal Alcohol Spectrum Disorders affects about 1 in 100 people in North America. In their lifetime, economists estimate that each affected person costs United States taxpayers from \$1.5 million to \$3 million.

Although researchers at Washington State University formally identified Fetal Alcohol Syndrome in 1973, the rate of heavy drinking during pregnancy has not declined. And it continues to be a major cause of social disorders including learning disabilities, school failure, juvenile delinquency, homelessness, unemployment, mental illness, and crime.

See FAS, page 8

New HIV/AIDS Web site will help Alaskan individuals, families affected by the disease

ANTHC Staff Report

The National Library of Medicine has awarded the Alaska Native Tribal Health Consortium HIV/AIDS program \$50,000 to develop a Web site about HIV/AIDS for Alaska Natives.

"This Web site will allow easier access for clients to get HIV/AIDS education, and much needed support for those who face the isolating and debilitating factors of these diseases," said Dr. Elizabeth Schenck, Medical Director for the Ryan White Title III Early Intervention Services program. "We're trying to reach Alaska Natives statewide to let them know ways they can avoid contracting HIV or how they can receive help if they are already infected."

The Web site will provide information about HIV/AIDS, links to other Internet sites, and offer an opportunity for people with HIV to communicate with each other. Communications with and among HIV/AIDS patients in Alaska can be difficult, say health care providers, due to the vast distances between communities, the lack of confidentiality that sometimes occurs in small communities, and the social stigma associated with HIV/AIDS.

On the Internet, however, "distance isn't a barrier," said Project Coordinator Laura Revels-Garlock. "People can come on, get information, find out about their medications or talk with others going through the same things... without fear that

someone will find out who they are," she added. "I have spoken with some of our clients who are living with HIV/AIDS before applying for this grant; they are excited that there will be a "place" for them to share their stories, and felt this type of interaction was way overdue."

The Web site will be a confidential, "online community" for Alaska Native HIV/AIDS patients, the affected family, caregivers and community. The site's name is going to be "Community Drum," a sign that it will also be culturally relevant. "Whenever possible," said Revels-Garlock, "we'll use traditional languages, graphics, and stories to facilitate patient, family, and community communications."



YOUR VILLAGE NEEDS YOU!

Be a valued asset for Elders in your village. Be a Personal Care Attendant.

Your healing touch will enhance their quality of life.

Receive training and earn a steady, year-round income with opportunities to advance in other health professions.





For information on how to become a Personal Care Attendant contact your Tribally managed health organization.



Dive in ... to good health

Swimming builds endurance, strength and flexibility, and gives your heart a workout.

In fact, being active every day lowers your risk for diabetes, heart disease, stroke and cancer. No matter what your age or

level of fitness, an active life is a healthy one.

Choose health!



Photo ©2003 Bill Hess

Proud to provide world-class health care for Alaska Native people.



ANMC achieves national award for nursing excellence

ANTHC Staff Report

Alaska Native Medical Center recently received Magnet Status for Nursing Excellence, the highest honor offered by the American Nurses Credentialing Center (ANCC), an arm of the nation's largest nurses group. Speaking at a celebration held for the nurses, Alaska Native Tribal Health Consortium Chief Executive Officer (CEO) Paul Sherry said, "This reflects the fact that we aren't content with being just good enough. We want to be among the absolute best in the business. You make that possible."

"We just work at providing the best care possible and awards come to us," said Alaska Native Tribal Health Consortium Board Chairman and President Don Kashevaroff. "It really speaks to the years of dedication from our employees."

Katherine Gottlieb, Southcentral Foundation President and CEO, told the nurses, "It's wonderful that ANMC, which is owned and managed by tribes, is the first facility in Alaska to win this award."

"So many people made this award possible," said ANMC Administrator Dee Hutchison. "Our customer-owners demand excellence, and foster an atmosphere that allows it to thrive. To leadership at all levels, to physicians and support staff, to all our employees and, especially, to our nurses – thank you."

ANCC granted Magnet Status after ANMC demonstrated that it met or exceeded standards in the areas of administrative structure, nursing involvement in care decisions, collaboration and collegiality, evidence-based practice and research, leadership support and, most importantly, patient care outcomes. Magnet Status for Nursing Excellence indicates ANMC creates a work environment that attracts and retains professional nurses.

Magnet status is awarded only after a voluntary, rigorous peer-review process that includes both a lengthy application and an on-site visit. Other facilities to receive Magnet status include the Mayo-Rochester Hospitals, in Rochester, Minnesota; the University of Washington Medical Center in Seattle; and University of California, Davis Medical Center in Sacramento.

About 1 percent of the nearly 6,000 hospitals in the nation have attained Magnet Status. ANMC is the 71st hospital to receive this recognition. Of those 71, ANMC is one of only four with 150 beds or less; the others are larger. ANMC is the first Alaska facility and the first tribal facility to receive Magnet status.

What is Magnet Status?

Magnet status came out of studies of hospitals that managed to recruit and retain nurses even as shortages grew. Those hospitals had certain characteristics that made them attractive to nurses.

"The leadership role of nurses in ANMC was a strong factor," said Lorraine Jewett, Chief Nurse Executive for the Alaska Native Tribal Health Consortium at the Alaska Native Medical Center. "Nurses have a real say in the decision making and in deciding on the best way to care for our patients. This means that decision making can never be too distant from the point of care."

"I think we also got the award because we're a tribal facility. I come here, and my family comes here, for

services.

In fact, I would never go anywhere else for care. Here, services and programs are tailored for my needs, for the needs of my family and me," said Pauline Stubberud, Nurse Executive for Southcentral Foundation at Alaska Native Medical Center. "Why would I go someplace else, where I'm a round peg trying to fit into a square hole?"

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



ANMC receives quality improvement award

ANTHC Staff Report

Alaska Native Medical Center has received recognition for its outstanding efforts to promote, teach and help institute continuous quality improvement at ANMC and throughout the Alaska tribal health care system. Eileen Ewan, chairwoman for the Alaska Native Medical Center Joint Operating Board, accepted the Award of Excellence in Healthcare Quality, one of four presented this year by Qualis Health. Qualis presented the awards at the Alaska State Hospital and Nursing Home Association banquet at the Hotel Captain Cook in early September.

The award centered on ANMC's Healthcare Quality Improvement

Course and its 2002-2003 collaboration among five tribal health care organizations on four clinical guidelines. The first Healthcare Quality Improvement Course started in March 2001. Five months later, 13 teams presented quality improvement projects to members of ANMC Joint Operating Board.

After a second course and six more projects, leadership at tribal regional hospitals took note and asked ANMC to host a 2002 course for statewide collaboration on standardized practices around four medical conditions. Five health care organizations collaborated in the 2002 course for four statewide clinical guidelines, including: Kakanak Hospital, Dillingham; Maniilaq Hospital,

Kotzebue; Tanana Chiefs Conference Fairbanks; Yukon-Kuskokwim Delta Regional Hospital; ANMC.)

Besides the four statewide guidelines, numerous other quality improvement projects have been developed and are in use throughout the Alaska tribal health care system. More than 100 health care providers have completed the course and have enhanced their knowledge of quality improvement.

The first participants, primarily, were physicians. Participation has expanded and now includes disciplines such as nursing, respiratory therapists, radiology technicians, social workers and administrative assistants. There is a waiting list for the course. The program has height-

ened an awareness of continuous quality improvement at ANMC and within our system. It's now part of our work and culture.

Qualis Health Alaska is a private, nonprofit corporation whose mission is to generate, apply and disseminate knowledge to improve quality of healthcare delivery and health outcomes with state and federal agencies related to Medicare and/or Medicaid in Washington, Idaho and Alaska. Qualis utilization management, case management and external review programs have been accredited by the American Accreditation Healthcare Commission/URAC. Qualis programs meet the highest quality and performance standards within the industry.



Alaska Native Tribal Health Consortium JOBS

Want to find out about job vacancies? Visit the ANTHC Web site, at www.ANTHC.org. Tell your friends, too! Here are just a few of the jobs available:

- Surgical Technologist
- Case Manager
- Medical clerk
- Pharmacist
- Sanitation Facilities Engineer
- Database Administrator
- Computer Programmer
- Neurosurgeon
- Registered Nurse

For more information, call the Human Resources Department at (907) 729-1301.



The Alaska Native Tribal Health Consortium: the latest addition to the tribal health system

In the 1970's, Alaska Natives began a long journey to realize a dream: A health services system owned and managed by Alaska Natives. The perseverance, intelligence and vision of tribal health care leaders brought about many historic achievements during that journey. Those include the creation of the Alaska Native Tribal Health Consortium, one part of a seamless, integrated system serving more than 110,000 Alaska Natives.

The Consortium was formed in 1997 to manage statewide health services for Alaska Natives. Alaska Natives, through their tribal governments and regional nonprofit organizations, own and manage the Consortium. The Consortium provides comprehensive statewide health services to Alaska Natives through its five divisions:

- Alaska Native Medical Center*
- Division of Environmental Health and Engineering
- Division of Community Health Services
- Division of Human Resources
- Division of Information Technology

Alaska tribes and tribal health organizations select the fifteen members of the Consortium's board of directors. The board meets every two or three months to review the budget, set policies, and otherwise set the direction for the Consortium. Together with the Consortium's many partners and its 1,500 employees, board members are journeying to the next destination – to fulfill the mission and vision of the Alaska Native Tribal Health Consortium.

Mission

To provide the highest quality health services for all Alaska Natives

Vision

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

Please contact the board member for your region or community if you have questions or comments about the Consortium's programs and services. Or, contact us at:

Alaska Native Tribal Health Consortium
4141 Ambassador Drive
Anchorage, AK 99508
(907) 729-1900.
www.anthc.org

* 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 Tribal Health Consortium Board of Directors

FRONT ROW, left to right: Don Kashevaroff (ANTHC Board Chairman and President), Unaffiliated Tribes; Evelyn Beeter, Unaffiliated Tribes; H. Sally Smith (ANTHC Board Vice Chair), Bristol Bay Area Health Corporation; Mike Zacharof, Aleutian/Pribilof Islands Association;



Eileen L. Ewan (ANTHC Board Secretary and Chairwoman of the Alaska Native Medical Center Joint Operating Board), Copper River Native Association.

Arctic Slope Native Association; Frieda R. Damus, Metlakatla Indian Community; Rita Stevens (ANTHC Board Treasurer), Kodiak Area Native Association.

Andrew Jimmie, Tanana Chiefs Conference; Lincoln A. Bean, Sr., SouthEast Alaska Regional Health Consortium; Fritz George, Yukon-Kuskokwim Health Corporation.

MIDDLE ROW, left to right: Emily Hughes, Norton Sound Health Corporation; Eben Hopson, Jr.,

BACK ROW, left to right: Ileen Sylvester, alternate to Katherine Gottlieb, Southcentral Foundation;

NOT PICTURED: Christina Westlake, Maniilaq Association, Robert Henrichs, Chugachmiut.



I eat well — like my ancestors did

Our ancestors lived healthy lives for thousands of years, eating food gathered from the land and sea.

Choose health!

The protein and nutrients found in traditional foods offer many health benefits: They help protect us from cancer, diabetes and heart disease.

Take care of your body. Eat traditional foods!





Alaska Native Tribal Health Consortium hosts second annual Alaska Native Traditional Health Celebration

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

Two dance groups, refreshments, and health exhibits were the big attractions at the second annual Alaska Native Traditional Health Celebration. The gathering was held on October 14, 2003 at Alaska Native Medical Center in Anchorage.

"We're here today to celebrate the lifestyle that has kept Alaska Natives healthy for thousands of years," said Paul Sherry, Consortium chief executive officer. "Traditional foods are a big part of traditional health," he continued. "Fish, marine mammals, moose and caribou are excellent sources of food. They're economical, and nutritious, and especially good for our kids."

"Eating healthy foods and an active lifestyle are the best things you can do to stay healthy," agreed Don Kashevaroff, Consortium board chairman and president. "Stay away from the high-fat western foods that are out there," he said, "and soda pop is a bad habit that just has to stop. Diabetes is becoming an epidemic among Alaska Natives. It's a very serious disease and it starts when you gain weight."

Rita Blumenstein, Traditional Healer for the Southcentral Foundation Traditional Healing Program, sang the Lord's Prayer, then sang a cleansing song, both in Yup'ik.

The crowd grew thicker as the King Island Dancers and Miracle

Drummers and Dancers performed. Soon the hospital lobby was packed with dozens of people. Others hugged and greeted friends, and paused to pick up salmon strips, fresh fruit, Russian tea, and to look at exhibits in nearby hallways.

Staff for the ANTHC Injury Prevention Program ironed reflective decals onto people's jackets. "The teddy bear shapes are a big hit this year," observed one as he cut out a butterfly for one little girl. The reflectors make it easier to see the wearer in the dark, giving drivers time to swerve to avoid hitting them.

William Jackson, originally from southeast Alaska, had an exhibit on traditional medicine, including devil's club, which can be mixed with deer tallow to use as an ointment, or steeped as a tea to drink. "It's good for the liver," he said, "and for an upset stomach. It's just good all-around."

A *Stop the Pop* display showed photos and x-rays of missing and rotted teeth. Staff from the Southcentral Foundation Dental Clinic showed people how much sugar is contained in various products. Many "sports" drinks contain 11 or more teaspoons of sugar per serving, as much as soda pop. And "Soda pop is very bad for you," said one hygienist. "It rots your teeth so fast, it's incredible." Employees also gave out small gift bags of toothbrush, toothpaste, mouthwash and dental floss.

Other exhibits featured posters; information about activity levels, diet, and tobacco cessation; and



Photos by Greg Martin Photography

"Eating healthy foods and an active lifestyle are the best things you can do to stay healthy," said Don Kashevaroff, board chairman and president of Alaska Native Tribal Health Consortium.

apparel decorated with the ANTHC logo.

Pushing her mother's wheelchair toward the elevators, a Kotlik woman said, "We had such a good time. Thank you!" Her mother, who is par-

tially paralyzed from a stroke, had used her one good arm and upper body to dance along with the drumming and singing. "This was the highlight of her week. She loved it!"



A member of the King Island Dancers.



Members of the King Island Dancers performing at Alaska Native Traditional Health Celebration held October 14, 2003, at Alaska Native Medical Center.



Hygienists smile despite the serious message of their "Stop the Pop" exhibit: Sip all day, get decay.



A member of the Miracle Drummers and Dancers performing at the Alaska Native Traditional Health Celebration held October 14, 2003, at Alaska Native Medical Center.



Rita Blumenstein opened the celebration with a cleansing song in Yup'ik.



A crowd awaits the opening of Alaska Native Traditional Health Celebration at Alaska Native Medical Center. There was standing room only a short time later, as the King Island Dancers, then the Miracle Drummers and Dancers, performed.



Dental Aides ...

From page 1

Advanced Restorative Course for Dental Health Aides. This course is designed to build on what the EFDHA I providers do and increase their skills so that they are able to work on even more complex fillings.

To find out more about how to become a dental health aide, contact the regional health corporation or organization serving your area.



Debbie Heard



Cindy Sears



Dental health aide Debbie Dayton talks with a client at the Tanana Chiefs Conference dental clinic in Fairbanks.



Clara Carlson

FAS ...

From page 3

If approved, the resolution would:

- Designate Sept. 9 of each year as "National Fetal Alcohol Syndrome Awareness Day."
- Request that the President issue a proclamation calling upon the people of the United States to observe the day with appropriate ceremonies; promote awareness of the effects of prenatal exposure to alcohol; increase compassion for individuals affected by prenatal exposure to alcohol, minimize further effects; and

ensure healthier communities across the United States.

- Establish an annual moment of reflection at 9:09 a.m. on Sept. 9 to remember that during the nine months of pregnancy, a woman should not consume alcohol.

"The goal is to inform women of childbearing age that no amount of alcohol during pregnancy is good," Murkowski said.

The first Fetal Alcohol Syndrome Awareness Day was organized in 1999 by a small group of volunteers; mostly adoptive and foster parents, and a small but committed number of mothers in recovery.

The first international Fetal Alcohol Syndrome Day was at 9:09 a.m. on Sept. 9, 1999.

"All of us lived daily with children whose prenatal damage caused mental retardation or learning disabilities, plus severe acting-out behavior that disrupted our lives and their classrooms, and often physical problems requiring much medical attention," said Bonnie Buxton, co-founder of the first International Fetal Alcohol Syndrome Awareness Day.

The first international Fetal Alcohol Syndrome Day was at 9:09 a.m. on Sept. 9, 1999.

While letters were sent to the President of the United States requesting the day be declared Fetal Alcohol Syndrome Awareness Day, no replies were received.

This year, Alaska was among the states and nations that observed the fifth International Fetal Alcohol

Syndrome Awareness Day. In Nome, a birthday cake honored all babies who will be born in the region in the coming year.

In Kenai the American Legion sponsored a breakfast and the ringing of bells at 9:09 a.m. And Anchorage, Ketchikan, Haines and Wasilla also had local celebrations.

"To Bonnie and all of the others who have made International FAS Awareness Day a reality, I want to say that the United States Senate is listening and proudly joins in your efforts to spread the word," Murkowski said. "Thanks to your good works, the world is listening."

For more information about Fetal Alcohol Syndrome, visit come-over.to/FASCRC; fasstar.com; or fasday.com.



Keep them sweet without pop!

A typical can of soda pop has 11 teaspoons of sugar in it. Combine that with the acid

in pop and you get cavities! Plus, kids who drink soda pop every day are more likely to become overweight or obese —

conditions that are linked to diabetes.

Stop the pop!



Choose health!

Photo ©2005 Play Science

YOUR VILLAGE NEEDS YOU!

Be part of a new oral health tradition. Be a Dental Health Aide.

Teach the importance of dental health, provide preventive dental care, and assist the dentists who work in your village.

Receive training, gain job skills, earn a steady wage, and feel the satisfaction of being a valuable asset to your community.



For information on how to become a Dental Health Aide contact your Tribally managed health organization.



Denali Commission, ANTHC partner to build new health clinic in Tetlin

By DEHE Communications Specialists
Kevin Braun and Carmen Williams-Bydalek

What difference does 20 miles make in an age of aviation and fiber optics, in a time when people are virtually connected by cell phone and laptop?

Whether 20 miles or 200, when the dark day of a traumatic injury dawns on someone in the Bush, distance often decides between life and death.

The residents of Tetlin, in interior Alaska, know. A rough-hewn dirt road clinging to the Bush tenuously connects the community of 130 to Tok, 20 miles away. But the road is not maintained by the state, bad weather makes travel a dangerous choice, and washouts make the road impassable.

Wanda David is a health aide who understands the double jeopardy of injury and isolation. She anxiously awaits the day that Tetlin's new health clinic, nearly complete, will open. "I am excited about having running water in the clinic," she said, "it will help with bad cuts. It will be really good to have a separate exam room from the clinic office, locked pharmacy, and a room for a [behavioral health] counselor. It takes over an hour to drive to Tok and that's in good weather. So I am looking forward to the telemed, it will help."

David will soon witness a new age of health care being delivered throughout rural Alaska. An increasing number of rural communities now have piped water and sewer service—the most basic of health care services. Therefore, the task list for building and maintaining Alaska's basic infrastructure now more prominently identifies modernizing health care.

Denali Commission: working for Alaskans

Much of the credit for this modernization belongs to the Denali Commission, which in 2002 awarded a grant worth \$671,424 to Tetlin to replace its dilapidated clinic. According to its 2001 annual report, the Commission is a federal agency with a mission that "... will partner with local, tribal, state, and federal governments and collaborate with all Alaskans to improve the effectiveness and efficiency of government services, to develop a well-trained labor force employed in a diversified and sustainable economy, and to build and ensure the operation and maintenance of Alaska's basic infrastructure."

True to its mission statement, the Commission partnered with the Alaska Native Tribal Health Consortium, which administers statewide health



Photos by DEHE staff
Dave Roland, DEHE construction superintendent, examines the plumbing and open web truss joists beneath the new Tetlin clinic.



Tetlin's new 2,000-square foot health clinic, funded by the Denali Commission and designed and built by the Alaska Native Tribal Health Consortium, will open in November.

and sanitation services for Alaska Natives. The second-largest division of ANTHC, the Division of Environmental Health and Engineering, then became responsible for administering Commission funding to build or renovate health clinics of less than 3,000 square feet.

The Commission receives its funding annually through the Department of Commerce budget. Once funds are available, the Commission informs communities via a Notice of Funds Availability. Communities propose their needs for building new or renovating existing clinics by completing Requests For Proposals, and the Commission scores and selects which projects it will fund based on a number of criteria.

A Memorandum of Understanding permits Commission funding to be administered by ANTHC in one of three ways: funds are "passed through" to the recipient community's regional health organization, such as the Yukon-Kuskokwim Health Corp., which then manages the project; funds are awarded directly to the recipient community, which manages the project; or the project is directly managed by DEHE.

Besides Tetlin, in 2002 the Commission awarded and ANTHC administered \$15 million in grants to communities throughout Alaska.

Telemedicine: equipping clinics of the future

Tetlin's new clinic is equipped to provide telemedicine, which uses video and teleconferencing equipment to transmit real-time diagnostic images, X-rays, and database information, thereby linking clinics and physician offices to larger medical centers.

Alaska's vast size and extreme geography and climate often make transportation difficult at best or life threatening at worst. Telemedicine is therefore expected to substantially improve the quality of rural Alaska health care by improving access to medical information and expertise. Health aides and visiting physician assistants and doctors work-



The newly constructed clinic is equipped to provide dental health services, marking the first time such services are locally available to village residents.

ing in the small health clinics scattered throughout Alaska increasingly can quickly and accurately consult with the many different specialists, surgeons and other resources available at regional hospitals or Alaska Native Medical Center.

This technology, often referred to as telemed, is what David looks forward to because it will provide her, visiting medical staff, and Tetlin residents with a health care option other than traveling in dangerous weather. In addition to saving lives, telemedicine reduces the cost of health care by identifying when symptoms that appear to be serious are in fact not. Such diagnoses save the expense of unnecessary airplane or helicopter flights, and the resources of the hospitals that patients would be unnecessarily transported to.

DEHE: designing clinics of the future

The new Tetlin Health Clinic is the first constructed using a prototype design funded by the Denali Commission and designed by DEHE. John Warren, Senior Engineer Consultant, DEHE, said the prototype design was based on an exhaustive consultation to determine the needs of professions and agencies involving doctors, nurses, health aides, tribal and regional health organizations, telemedicine experts, architects, engineers and others. The task was further complicated, Warren said, because the prototype had to be designed to adapt to the range of Alaska conditions, from the rain and



Dave Roland, DEHE construction superintendent (left), discusses the progress of the construction project with Ralph Hogge, DEHE Regional Facilities Service Director, at the clinic entrance.



Alaska Native Medical Center providing Alaska's highest level of trauma care

Alaska Native Medical Center has been re-certified as a Level II Trauma Center, the highest level achievable in Alaska. In mid-July, the American College of Surgeons (ACS) Committee notified ANMC that it had been re-verified as Alaska's first and only Level II Trauma Center. Trauma is the leading cause of years of productive life lost among all Alaskans and is the leading cause of death among Alaska Natives,

"ANMC became a Level II trauma center in 1999 and this re-verification shows we are still strongly committed to support trauma care in Alaska," said Frank Sacco, MD, ANMC Chief of Trauma Services. "It shows we've met the rigorous standards of the ACS, which basically require a facility to show that it has an organized, systemic approach to the care of the injured patient."

The ACS criteria require trained and capable personnel, adequate facilities, and ongoing self-assessment. A level II trauma center must show it has staff, facilities and equipment readily available 24 hours a day, 365 days a year, to provide optimal care for people with traumatic injuries, whether from a vehicular crash, fires or explosions, falls or fights.

"ACS looks at everything from the

level of commitment of hospital leadership, physician responsiveness, backup schedules to injury prevention activities," said Sacco.

"The teamwork of many people is vital and crucial in the provision of quality trauma care," said Mary Leemhuis, Trauma Nurse Coordinator. "Everyone, physicians and nurses as well as support personnel — lab, radiology, respiratory therapy — are key to the success of the program and essential to the delivery of care to the trauma patient."

ANMC and the other tribal facilities have led the effort to develop a statewide trauma system. Within the past year, Norton Sound Regional Hospital in Nome and Yukon-Kuskokwim Regional Hospital in Bethel were certified as Level IV Trauma Centers. "Trauma centers are a key component in the development of a statewide trauma system," Joel Gilbertson, Commissioner of the Alaska Department of Health and Social Services (DHSS).

Research shows that an organized and timely response to trauma, as outlined in the national standards, can improve patient care, reduce trauma death rates, and enhance staff confidence in treating traumatic injury victims.

See Trauma, page 12

Tetlin ...

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wind of Southeast winters to the dry and bitter cold of the North Slope.

The design was completed in April 2002 and provided for three differently sized clinics based on a community's population. A community of 100 people or fewer qualifies for a small clinic of 1,500 square feet, 100 to 500 people for a medium clinic of 2,000 square feet, and 500 or more people for a large clinic of 2,500 square feet. A medium-sized clinic was built in Tetlin to serve its population of 130.

Dave Roland is the DEHE superintendent responsible for the construction of the Tetlin Health Clinic.

Roland said when the clinic opens dental care will for the first time be locally available to village residents.

The dental exam room is equipped

with X-ray equipment, amalgam processors, and an air and water vacuum system. The clinic is handicapped accessible; the old clinic was not.

"There is living area with three beds for medical residents," Roland said, "a kitchen, two health aide offices, a laboratory, a behavioral health office, a janitor's closet with mop sinks, a main lobby and pharmacy."

Describing the clinic's telemedicine equipment, Roland said, "The 73 telecom ports required 6,000 feet of wire; each port has Internet, phone line and fax. There is an emergency system that will auto dial the superintendent, community members, engineers in Fairbanks and Anchorage if anything were to go down."

For more information contact Joel Neimeyer, P.E., Project Manager, Denali Commission, (888) 480-4321, www.denali.gov, or Roger Marcil, Small Clinic Program Coordinator, ANTHC, DEHE, (800) 560-8637.



Diabetes conference in Anchorage Dec. 3-5

The annual Alaska Area Diabetes Conference entitled "The Prevention and Treatment of Diabetes in Alaska Natives: Continuing the Momentum" is scheduled for Dec. 3-5 at the Hilton Hotel downtown.

The conference is designed especially for healthcare providers. CEUs will be provided for physicians, nurses, dietitians, physical therapists, pharmacists, and community health aide/practitioners.

There is a non-refundable \$25 registration fee for this conference and pre-registration is required. For more information contact Carol Treat, MS, RD, at 729-1128 or ctreat@anthc.org.



ALASKA NATIVE
MEDICAL CENTER



Eligibility ...

From page 1

ary with their proof of eligibility documentation.

• A card or statement from your Alaska Native Claims Settlement Act (ANCSA) corporation stating that you are a Native person listed on the ANSCA roll (issued in 1971), or a lineal descendant of a Native person listed on the ANSCA roll.

What if you don't have one of these?

If you don't have the paperwork or issued card, ANMC can give you an application to the Bureau of Indian Affairs for a Certificate Degree of Indian Blood (CDIB). Once you complete the application and mail it to the BIA office, they will send ANMC the CDIB.

Where can I get the papers I need to prove I'm eligible for services here?

For a Certificate of Degree of Indian Blood contact: Bureau of Indian Affairs 3601 C Street, Suite 1100 Anchorage, AK 99508 Phone (907) 271-3519 or 271-3517 Toll-Free: (800) 645-8465, Option 1.

For Adoption, Birth or Marriage Certificates contact: Bureau of Vital Statistics Anchorage Recording Office 3601 C Street, Suite 128 Anchorage, AK 99501, phone (907) 269-0990.

For other eligibility questions contact: Eligibility Manager Alaska Native Medical Center 4315 Diplomacy Drive, 1st Floor

Anchorage, AK 99508, Phone (907) 729-2353 Fax (907) 729-4451 E-Mail eligibility@anmc.org.

Important notes:

1. Individuals may be required to pay for services if ANMC determines they are not eligible, or if they fail to provide the paperwork that proves they are eligible.

2. ANMC now require that patients provide proof of eligibility within 120 days of being asked for it.

3. Starting January 1, 2004, patients will be required to show proof of eligibility before they will be scheduled for any elective appointments or surgeries.

The Alaska Native Tribal Health Consortium and Southcentral Foundation jointly own and manage the Alaska Native Medical Center under the terms of Public Law 105-83.

These parent organizations have established a Joint Operating Board to ensure unified operation of health services provided by the Medical Center. Alaska Native Medical Center 4315 Diplomacy Drive Anchorage, AK 99508.

Disclaimer

This information is solely intended as a general tool to educate and empower ANMC patients on their rights and responsibilities as eligible recipients of pre-paid health care at ANMC.

This information is not intended in any way to substitute, replace or alter the policies, procedures or contract commitments of the Alaska Native Tribal Health Consortium, Southcentral Foundation, or the Alaska Native Medical Center regarding ANMC medical service eligibility.

A complete copy of ANMC's Direct Care Eligibility policies and procedures is available on request. This information is subject to change at any time without notice.



Use tobacco? No way!

Just think: You could go to Disneyland or you could smoke a pack of cigarettes a day for a year. The cost is about the same.

"Smoking or chewing tobacco is disgusting," says Genevieve O'Neill. "Kids can make a better choice."

Don't even start using tobacco. It's not worth it.



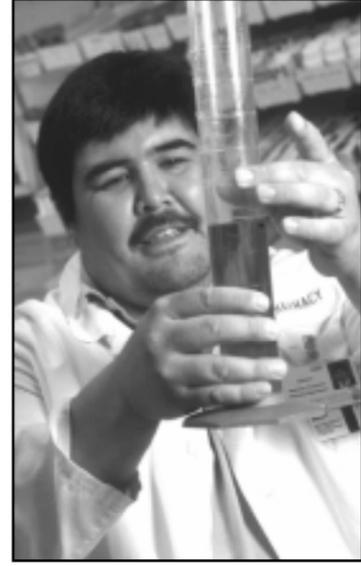
Choose health!

Photo ©2003 Ray Solomon





Alaska Native Medical Center Laboratory wins accreditation with distinction



The College of American Pathologists recently awarded the Alaska Native Medical Center Laboratory Accreditation with Distinction, which places it in the top 5 percent of hospital laboratories around the world accredited by the College.

Milk Club ...

From page 1

has several multi-milkshake winners, including Marie and Jackie Hoyt, daughters of the cook in the Muddy Rudder.

The Milk Club has worked so well at the Muddy Rudder that others are starting to jump on the bandwagon.

Third and fourth graders at the Koliganek Village school have started their own club and the New Stuyahok Village school is considering starting a club in the coming school year.

Koliganek students drank 60 glasses of milk each during the school year and had a milkshake party at the end of the school year.

Most continued to drink milk after they accumulated their 60 glasses and most learned the benefits of drinking milk instead of pop. Kat sent the Koliganek Milk Club students gift certificates for a free milkshake at the Muddy Rudder when they come through Dillingham.



Milk Club member Jacob Nelson works toward another milkshake.

Kat is always on the lookout for incentives to encourage the children to continue drinking milk.

She is hoping to receive a bike and scooters from an Alaska milk producer and has contacted the California Fluid Milk Processor Advisory Board, famous for the "Got Milk?" campaign, for promotional materials



From the Alaska Native Health Board newsletter.



Kat Gorman helps Marie Hoyt look for her Muddy Rudder Milk Club score-card among the nearly 300 members' cards. The club is so large Kat uses color-coded cards on multiple rings.



Carol and Angela did not consume 12 glasses of milk so they had to buy their milkshakes.

Why is it important to get Denali KidCare, health insurance or other resources?

1. It brings alternate resources into our Native healthcare system.
2. It's easy, and happens at no cost or inconvenience to you.
3. Our Family Health Resources team at the Alaska Native Medical Center are willing to help determine if you are eligible for any resources such as Denali KidCare.

Alaska's Covering Kids presents:

Facts on how Denali KidCare helps children, teens, and pregnant women in the Alaska Native Health System.

1. Children and teens receive a full range of prevention and treatment services such as doctor's visits, check-ups, vision exams, eyeglasses, prescriptions, medical transportation, and more!
2. Enrollment in the Denali KidCare program assists our Alaska Native Health Campus medical staff and helps bring resources into our Native healthcare system—making us stronger!
3. Enrollment is easy, and we have Family Health Resource staff available to answer any questions you may have or assist you in enrolling or renewing your insurance. Please call them at 729-3254 to find out more about what you're eligible for! If you would like to request a Denali KidCare mail-in application by phone call 269-6529 (in Anchorage) or 1-888-318-8890 (toll-free statewide).



ALASKA NATIVE TRIBAL HEALTH CONSORTIUM
AND SOUTHCENTRAL FOUNDATION

CONGRATULATE

Alaska Native Medical Center



*For Being First In Alaska
To Attain Prestigious Magnet Status
for Nursing Excellence*

For the first time, an Alaskan hospital has received the nation's highest honor for nursing excellence by the American Nurses Credentialing Center, an arm of the American Nurses Association, the nation's largest nurses group.

ANMC is the 71st hospital in the nation to achieve Magnet status.

Magnet Status for Nursing Excellence indicates ANMC attracts and retains professional nurses through its quality of leadership, patient care, nursing autonomy, and career development. Magnet status is awarded only after a voluntary, rigorous peer-review process.

Congratulations on Magnet Status for Nursing Excellence

The Alaska Federal Health Care Partnership would like to publicly acknowledge and congratulate Alaska Native Medical Center on being awarded *Magnet Status for Nursing Excellence*. The American Nurses Credentialing Center gave the award after ANMC demonstrated its excellence in the areas of nursing administration, education, clinical practice, research and patient outcomes.

Magnet Status is awarded only after a voluntary, rigorous peer-review process that includes both a lengthy application and an on-site visit. Just a little more than one percent of the nearly 6,000 hospitals in the country have attained Magnet Status. ANMC joins a small group of distinguished hospitals in attaining this recognition. Other facilities to receive Magnet Status include the Mayo-Rochester Hospitals, in Rochester, Minnesota; the University of Washington Medical Center in Seattle; and University of California, Davis Medical Center in Sacramento.

The Alaska Federal Health Care Partnership is a unique alliance of federal and state Alaska-based health care organizations including: Alaska Native Tribal Health Consortium; Indian Health Service; Department of Veterans Affairs; United States Coast Guard; and the United States Army and Air Force, representing the Department of Defense.

As the Host of the Alaska Federal Health Care Partnership, it is indeed an honor to work with committed health care leaders in a forum of collaboration for providing quality health care for beneficiaries.

— Alex Spector,
Director, Alaska Veterans Affairs
Health System and Regional
Office Host,
Executive Committee,
Alaska Federal Health Care
Partnership

Trauma ...

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An ANTHC staff report based, in part, on a press release from the Alaska Department of Health and Social Services.

Alaska Native Tribal Health Consortium and Southcentral Foundation own and manage the Alaska Native Medical Center under the terms of Public Law 105-83. These parent organizations have established a Joint Operating Board to ensure unified operation of health services provided by the Medical Center.

