Toksook Bay Subregional Clinic has been getting into the holiday spirit. They created this display in the clinic lobby. It is made entirely of recycled and found materials. Notice the musk ox with real musk ox hair and the fish decorated with found seashells.
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Toll Free ................................................................. 1-800-478-3321
Public Relations ....................................................... 543-6038
Media Services ......................................................... 677-2232
Office of Environmental Health & Engineering ........ 543-6420
Technology Help Desk .............................................. 543-6070
Human Resources ..................................................... 543-6060
Administration ........................................................ 543-6020
Hospital ..................................................................... 543-6300
Emergency Room .................................................... 543-6395
Hospital Community Relations ............................... 543-6350
Social Services .......................................................... 543-6225
Family Medicine Clinic Appointments ..................... 543-6442
1-800-478-3321

Appointments
Dental Appointments ............................................... 543-6229
Optometry Appointments ......................................... 543-6336
Audiology Appointments .......................................... 543-6466

Subregional Clinic Appointments
Aniak ................................................................. 675-4556
Emmonak .......................................................... 949-3500
St. Mary’s ......................................................... 438-3500
Toksook Bay ....................................................... 427-3500

Public Health Nursing ............................................. 543-2110
Pharmacy ................................................................ 543-6382
Travel Management Center .................................... 543-6360
WIC Program ....................................................... 543-6459

Health Services ...................................................... 543-6024
Village Operations ................................................. 543-6160
CHAP ............................................................... 543-6160
ICEMS ............................................................... 543-6080

Community Health & Wellness ............................ 543-6190
Behavioral Health Services .................................... 543-6100
Phillips Ayagnirvik ................................................. 543-6700
Village Services .................................................... 543-6740
Home Care Services .............................................. 543-6170
Board of Directors welcomes new member

New board member Stanley Hoffman, Sr., was sworn in at the meeting of the full Board of Directors last month.

Hoffman, of Bethel, will be representing Unit 5, replacing long time Bethel board member Bill Kristovich. Unit 5 includes Bethel, Napakiak, Napaskiak and Oscarville.

Bill Kristovich has been an involved and active board member for nearly 20 years, serving as Executive Board vice chair and hospital Governing Body chair for many of those years, as well as serving on many committees.

Board Chair Ray Alstrom expressed heartfelt appreciation for Mr. Kristovich’s contribution to YKHC leadership and years of service and dedication while extending a warm welcome to Mr. Hoffman. Hoffman has also found committee work to do, with assignments to the Housing and LifeMed committees and the Human Studies board.

In other action, the Board approved the FY12 corporate goals and moved to restrict the sale of soda pop at the YK Delta Regional Hospital, tackling the ongoing epidemic of tooth decay in the region.

YKHC Board Committee Appointments 2012

Executive Board
Ray Alstrom, Chair
Esai Twitchell Jr., 1st Vice Chair
Marvin Deacon, 2nd Vice Chair
James Charlie Sr., Secretary
Gloria Simeon, Treasurer
Sam Alexie, Sitt.-At-Arms
Paula Ayunerak, 1st Additional Member
Patrick Tall, 2nd Additional Member
Gene Peltola, Ex-Officio
Paul John, Honorary Member

Governing Body
James Landlord, Chair
James Nicori, Vice Chair
Moses Peter, Secretary
Billy Jean Stewart, Treasurer
James Sipary, Sitt.-At-Arms
Chris Larson, Billy Jean Stewart, Medical Staff Appointments/Privileges Committee
James Nicori, Marvin Deacon, Joint Conference Committee

Finance Committee
Gloria Simeon, Chair
Billy Jean Stewart
Marvin Deacon
James Nicori
James Landlord
Ray Alstrom, Ex-Officio
Gene Peltola, Ex-Officio

Policy Committee
James Charlie, Sr.
Gloria Simeon
Paula Ayunerak
Eric Olson

Board Standing Committees:
By-Law Committee
Patrick Tall
Marvin Deacon
David O. David
Moses Peter
Mary Ayunerak
Eric Olson

Yukon-Kuskokwim Health Corporation

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Winter Viruses are here – RSV and Influenza

by Rosalyn Singleton, MD, ANTHC Immunization Consultant

The RSV season has arrived!

YKHC clinics started seeing a few children with RSV (Respiratory Syncytial Virus) in the YK Delta in mid-November, but the number of children with RSV has increased this month.

RSV season usually lasts for two to five months. It is a very common cold virus, especially in the YK Delta region.

In older children and adults, RSV causes a bad cold with runny nose and a cough, but in infants RSV can cause serious lung problems like bronchiolitis or pneumonia. Bronchiolitis is inflammation of the small breathing tubes, or "bronchioles" in the lungs. Bronchiolitis results in fast breathing, cough and wheezing.

RSV is often the number one cause of winter hospitalizations for infants in the YK Delta. YK children have one of the highest RSV hospitalization rates in the U.S. Each year, up to 15 percent of infants in the Delta are hospitalized with RSV.

Premature infants and infants with lung or heart disease are at much higher risk of being hospitalized with RSV. The highest risk infants receive a shot, Synagis®, once a month during the RSV season. Synagis® has RSV antibodies (germ fighters) that help to prevent over half of the RSV hospitalizations in these infants.

And the flu too

Another winter virus that is starting to circulate in low levels is influenza virus. Influenza (flu) usually causes fever, cold symptoms, headache, sore throat, body aches and cough.

One of the most serious complications of influenza is pneumonia. Infants, people with medical conditions like asthma or heart disease, and elders are at the highest risk of being hospitalized with influenza.

Doctors recommend that all persons, especially those at highest risk, receive influenza vaccine to decrease the risk in all.

What can families do to prevent infants from getting sick with RSV or Influenza?

• Wash your hands before touching or holding infants
• Keep infants away from large crowds and sick people
• Don’t let anyone smoke around infants
• Breastfeeding is best
• Infants 6 months and older, children and adults should get the flu vaccine.
• High risk infants on Synagis need to get every monthly dose on time.

Napartet Goal

Patient Centered Excellence

Increase screening rates for colorectal, breast and cervical cancers to meet or exceed Healthy People 2020 goals.

Healthy People is a set of goals and objectives with 10-year targets designed to guide national health promotion and disease prevention efforts to improve the health of all people in the United States. Released by the U.S. Department of Health and Human Services each decade, Healthy People reflects the idea that setting objectives and providing science-based benchmarks to track and monitor progress can motivate and focus action.

For the past two years, YKHC has chosen Cancer Screening as one of the many topics to focus on. Cancer is the leading cause of death for our region. Along with overall prevention, early detection is one the best ways to decrease mortality and morbidity. Currently, YKHC leads the state in our cancer screening efforts, but we still are striving to exceed the national goals before the year 2020. The PCE pillar goal is utilizing the National Healthy People 2020 Goals as a measurement of our efforts and success.

Servet Pellumbi gets his flu shot.
IMPACT: Evidenced Based Care for Depression

What is IMPACT?
IMPACT stands for Improving Mood, Promoting Access, Collaborative Treatment.

IMPACT is a new program for depression care management at YKHC. Before their medical appointment in the clinic, each patient is asked to complete a patient health questionnaire with nine questions about their overall health. The PHQ-9 is available in both Yu’Pik and English translations and can be answered in just a few minutes.

The questionnaire is an important tool to help medical providers better understand how their patients’ emotional health may be affecting their physical health.

Statistics
Every day patients who are experiencing symptoms of depression are seen at the YKHC clinics. In fact, one of every 10 adult patients experiences symptoms of depression. Symptoms may include trouble falling asleep, lack of energy, poor appetite or feeling down or hopeless.

What is the good news about depression?
Ask your doctor: The good news about depression is that depression is very treatable and the symptoms are almost completely reversible. The tough news about depression is that the longer it goes untreated, the harder it is to treat.

How do I contact IMPACT?
IMPACT offices are located in the Yukon Clinic. Lynette Knapp, LCSW, or Raphael Martens, MSW, can be reached at 907-543-6553. Office hours are 8 a.m.–5 p.m. Monday – Friday.

Sobering Center now operates 24/7

Through its first nine months of operation, the Sobering Center provided services to over 800 individuals. Services include “sleep-off,” assessment of vital signs, monitoring of 12-hour sobering stays and conducting SBIRT* screenings. The facility was initially open Thursday through Monday. Since November it has been open around the clock.

Sobering Center Manager Rusty Tews says the Center has received additional funding to support 24/7 operations. Thanks to the efforts of the Alaska Mental Health Trust and a network of supporters including the Bethel Police Department and the Yukon-Kuskokwim Correctional Center, the Sobering Center received an additional $350,000 for FY2012.

Tews projects that the Center will be fully staffed and training completed by January 1, 2012. “Thanks to the extra efforts of our existing Full Time staff and several dedicated on-call staff, we have been able to open for full time services since

*Screening, Brief Intervention and Referral to Treatment (SBIRT) is a medical approach to help reduce alcohol use and/or prevent substance abuse and dependence.
How to Keep Your Newborn Decay Free

Fix your cavities first
• Complete Mom’s dental treatment
• Less cavities in Mom = less chance for future cavities in the baby
• Avoid chewing your baby’s food. You can pass on your cavity bacteria

Wipe the baby’s gums and teeth
• Clean the baby’s gums every day after feedings

Baby’s first dental visit
• Within the first year, bring your baby to dental
• Regular treatments of fluoride up to 4 times a year is shown to reduce the chance of cavities.

Ask your dental provider for many other ways to prevent Early Childhood Decay!
Call 907-543-6220 or 866-543-6220 for your Prenatal Dental appointment.

PREVENTION IS THE KEY TO WELLNESS
New mothers invited to new YK Dental program

YK Dental is proud to announce the launching of a brand new program!

The *Prenatal Dental Program* has been established to help prevent children from having to go to the operating room for dental treatment. Last year approximately 2 out of 3 children in the YK Delta were treated in the dental operating room. This is more than double the national average. In addition to exposing the child to unnecessary health risks, the operating room expense can reach up to $10,000.

The *Prenatal Dental Program*’s goal is to reduce the caries rate by ridding the mothers of cavity-causing bacteria and by educating them on how to help keep their baby’s mouth clean and healthy.

Did you know cavities can be passed just like the cold and flu? Cavities are a contagious infection. If the mother (or caretaker) has a dental infection in their mouth, the bacteria is easily spread to the baby.

Pregnant women and their babies are the priority of this program. There will be designated appointment times open only to them. Dental will also be utilizing the help of the dental therapists in the subregional clinics.

If you are pregnant and would like to enroll in the *Prenatal Dental Program*, simply walk into or call Dental and state that you would like to join the program. You will be given an enrollment form (or fill out via telephone). The medical staff and health aides will be supplied with referral cards to give at prenatal appointments. Please schedule your dental prenatal appointment today.

**Here are some tips for keeping your children’s teeth healthy:**

- Wipe or brush the teeth after each feeding (especially before bed)
- No bottles or sippy cups at bedtime
- Have fluoride painted on teeth at least four times per year
- Chose a diet low in sugars and sodas
- Have cavities fixed—reducing the bacteria reduces the chances of spreading the infection
- Schedule a dental exam by age 1

Healthy children have healthy mouths. The health of your child begins with you! We look forward to working with you.

---

**Press Ganey Survey Results**

We are improving!

And you’ve noticed.

“VERY GOOD”

Congratulations to all five of our Subregional Clinics

**Aniak**

**Hooper Bay**

**St. Mary’s**

**Toksook Bay**

**Emmonak**

For the first time since implementation of Press Ganey surveys all five SRCs exceeded the 50 percent goal for achieving “Very Good” scores for the last quarter of reporting!
Meet Martha!

This month we are featuring Physician Assistant Martha Flores, originally of Mountain Village.

She is the proud mother of four children (Chico, Theresa, Crystal, and Edward) and seven grandchildren. Health has been a constant theme in Martha’s life and she thoroughly enjoys caring for patients. Having started as a Health Aide in 1985, Martha later determined to advance her career as a Physician’s Assistant (PA). She attended the University of Washington Physician Assistant school and graduated in 1993 before joining YKHC.

When asked about how she was able to persevere through the intensity of PA school, she gives credit to her husband of 32 years (and YKHC Materials Management Inventory Control Analyst) David Flores for getting her through school and literally “raising the children” so she could concentrate on her studies.

“He quit his job to stay home with the kids while I was in school,” Martha said. “It was a sacrifice for all of us, but he was in charge of the dirty work and he could see the importance and the investment the continued education would have to benefit the whole family. I wouldn’t have been able to (finish school) without him. Many times I wanted to quit, but he was the one who made me realize if you do, ‘what are we going to do? what are our children going to do?’”

Her own mother was a medical aide and Martha grew up with a lot of exposure to medicine. Martha says she felt she “learned from the best,” namely Martha’s “all time favorite health aide,” the late Georgianna Waskey of Mountain Village. Martha says that Georgianna was the epitome of the dedicated Health Aide through and through. “She was a counselor, and anyone could feel they could approach her or go talk to her, confide in her. She treated everyone equally.”

see PROFILE, p. 9
Meet Martha!

Rotary Club picks YKHC nurse for New Zealand trek by Claire A. Lewis, WHNP

Congratulations to Brenda Lamont, YKHC’s OB/GYN Case Manager, who has been selected from 17 applicants in Alaska and Yukon, Canada, as one of four representatives to advocate for Maternal and Child Health issues for the International Rotary Club foundation.

This newer GSE (Group Study Exchange) program is a unique cultural and vocational exchange opportunity.

Brenda will be in New Zealand and Fiji for one month starting in March. This will include five full days weekly of vocational visits in these countries to observe and exchange how similar maternal/child health issues may compare to her work and knowledge of similar issues at YKHC.

She will also be expected to speak at various Rotary clubs in these countries on her work at YKHC and her observations in the organizations visited.

This is an opportunity for young business and professional men and women ages 25-40 and is funded through grants of the International Rotary Club. We are so proud of you, Brenda for this nomination and appreciate all your hard work as our Gyn and Centering Pregnancy Case Manager at YKHC.

Patient Centered Excellence – Martha’s way

I followed Martha around the ER as she tended to numerous patients. Out of the ten rooms, Martha was bouncing between three or four and taking care of paperwork as well as assisting TDY/Locums who may not have been as comfortable as she was with the routine.

In less than three hours of observing her providing care, she had seen four Title 47 patients (inebriated or patients who posed potential harm to self or others), administered to a patient with an elbow injury, a patient with a boil, a jaundiced baby, a child with rapid heart beat and breathing issues, four or five patients with cough/fever, and even provided some analysis of a couple who were in a sno-go wreck. Martha never skipped a beat. She washed her hands a million times, managed to chatter with other colleagues (many of whom are locum or TDY nurses), sent items off to the lab, filled and administered prescriptions, counseled and mentored other providers, and even managed to chat with me for the interview.

Alaska Native Workforce Development

Martha is living testimony to the power and commitment of developing, mentoring and growing the Alaska Native workforce.

Her oldest daughter, Teresa, also a PA, works in outpatient clinic, provides SBIRT* trainings, and is active with several initiatives in the community. Daughter Crystal has worked with YKHC’s finance administration for many years.

Although there aren’t many Alaska Native PAs or Nurses, and the work with numerous locums and TDYs from out-of-state is common to Martha, she mentioned, “I would love it if there were more Alaska Native nurses to work with.”

Cultural context in explaining care to patients is critical and meaningful to Martha. “When someone has an ear infection or a ruptured ear drum, I compare it to the edges along a lake which freeze, but the center is still soft. I describe high blood pressure similar to that of sloughs and tributaries which rise when the main river water rises and when it creeps up over the banks, it is too much.”

Martha’s use of analogies to provide context makes sense to her patients.

“Our people are aware of their surroundings, they pay attention, and using these comparisons and visuals, I feel, makes perfect sense to keep them informed on how or why things are the way they are in terms of their personal health.”

Elevating the health status of our region

“I would like to see the day when people are tobacco free, both smokeless and cigarettes.”

When I asked her if she felt her patients told the truth when conducting SBIRT screenings and if they stated they used tobacco, drugs, or alcohol - how do you know they are telling the truth? Martha said “trust no one, but hear what they have to say and then make your own decision.”

Well said. Quyana, Martha Flores for consistent dedication and compassion in your work as a PA in elevating the health status of our people.

*SBIRT: Screening, Brief Intervention, Referral to Treatment. This method is used in all YKHC outpatient clinics to assess potential high-risk alcohol use.
Northwng is the inpatient care unit at the Yukon-Kuskokwim Delta Regional Hospital. We recently dropped in around the eight to nine o’clock shift change as visitors left and nurses and patients settled in for the night.

“There is a strong connection between Geneva, Alabama, and Bethel, Alaska, believe it or not,” shared Night Shift Charge Nurse, JC Crews. “Thanks to some connections—compliments of Gary Holmes,” the Charge Nurse who’s been around Bethel for quite awhile, “—we’ve nearly achieved a familial balance between Alabama and Alaska, right here in the North wing.”

It’s true. A surprisingly large contingent of the nursing staff in the North Wing is from Geneva, Alabama. JC Crews is the father of Specialty Clinic Nurse (and recent March of Dimes award recipient) Catherine Crews. JC said he was an accountant for 20 years, but, “I should have been a nurse a long time ago...I love it.”

Crews said, “After seeing my sister’s care in dealing with pancreatic cancer and the level of engagement and care her nurses provided to her (before her passing) it changed my life. I’m
Nicotine Control & Research

By Rahnia Parker, Nicotine Control and Research Program Manager

Harmful Effects of Tobacco on a Developing Baby

Cigarette smoke, secondhand smoke, chew, Iqmik and any other tobacco product can hurt a developing baby when a pregnant woman is exposed to it. All tobacco products are full of dangerous chemicals that are passed from the mother to the baby that can cause problems in the baby’s development in addition to making the baby addicted before it is even born.

Nicotine Withdrawals mean a Cranky Baby

When a baby is exposed to nicotine, it becomes addicted just like anyone else. So when he or she is born and doesn’t have nicotine anymore, withdrawals make the baby very cranky.

Tobacco Slows Fetal Growth and Harms Brain Development

A woman who uses tobacco products is taking in nicotine and carbon monoxide which decreases the amount of oxygen a baby gets. Nicotine constricts blood vessels that bring blood to the baby causing less blood to flow to the baby. This means less oxygen and less nutrients. Carbon monoxide in the blood also makes it so less oxygen gets to the baby. Less oxygen means slower growth. Less oxygen to a baby’s developing brain can also mean brain damage for the baby.

Tobacco Use Increases the Risk of Premature Birth

Tobacco use while pregnant can cause different complications in the pregnancy including placenta previa and placental abruption. The placenta is how the baby receives nourishment so any problems with the placenta can cause premature birth. A baby needs to be fully developed in order to have the best chance at being healthy when he or she is born. Premature babies have a higher chance of Sudden Infant Death Syndrome (SIDS), breathing problems, and heart problems.

When Tobacco Can Instantly Kill Someone

It’s widely known that tobacco products are bad for you. Not only do they cause health problems like bad teeth and gums, breathing problems, heart problems and cancer but they also are highly addictive. What makes them addictive is the chemical called Nicotine. When your brain is exposed to nicotine, it releases a hormone that makes you feel good. For some, it makes the person happy, some it relaxes, and some it takes away stress. Brains are smart. When they’re exposed to something that they know will make the person feel good enough times, it will “want” more. The more it’s exposed to the Nicotine, the more it wants it and then a person becomes addicted.

But did you also know that when a person (especially a child) is exposed to too much nicotine it can make them sick and even kill them? This is called Nicotine Poisoning. Nicotine itself is a very toxic poison, one that is used in pesticides. Nicotine poisoning can cause abdominal cramps, agitation, restlessness or excitement, muscular twitching, rapid breathing, stop breathing, burning sensation in mouth, coma, confusion, convulsions, depression, difficulty breathing, drooling, fainting, headache, pounding heartbeat, high blood pressure that suddenly drops, vomiting and weakness. These are serious symptoms that must be addressed quickly if too much nicotine is ingested.

If you use tobacco and have children and/or babies around, do not leave your tobacco product in a place that it can be reached by the child (like the floor). Especially do not leave Blackbull or Iqmik, which has a much higher potency of nicotine than other tobacco products. If someone is exposed to too much nicotine and may be experiencing poisoning, please be sure to contact a health care provider as soon as possible.

Quitting tobacco and that addiction to nicotine can be a very difficult and personal journey and it is your choice.

The Nicotine Control and Research department is available to help when you make your decision to quit.

To see a Nicotine Dependence Treatment Counselor, please see your local healthcare provider and get a referral for counseling.

If you would like more information, have questions, or for any other tobacco related requests for yourself, family members, and/or friends, please feel free to contact the Nicotine Control and Research department at 543-6312 or toll-free at 1-800-478-3321, ext. 6312.
Is my prescription ready yet?

by Kristen Nelson, Pharmacy Technician

The question “Is my prescription ready yet?” is often heard at the pharmacy counter. Did you ever wonder what is taking so long?

Doesn’t a pharmacist just have to count out the medication you need and put it in a bottle? It shouldn’t take more than a few minutes, not an hour or two.

It may seem like a simple task to fill a prescription, but many steps need to be taken to ensure you receive the correct medication at a safe and effective dose. So, what exactly happens to your prescription after you leave the clinic…and why does it take so long?

After your doctor writes your prescription in your chart, it is the nurses’ responsibility to bring it over to the pharmacy. The prescription can go in one of three directions when it arrives at the pharmacy, depending on if you told your doctor you wanted to wait for the prescription, if you did not want to wait, or if it is being sent to your village directly.

If you decide to wait for your prescription your chart is given directly to a pharmacist to start the process of filling the prescription. It is the pharmacist’s job to review the doctor’s notes about your visit and make sure the medications the doctor is prescribing are appropriate for you.

The pharmacist also needs to check your most current lab work because some drugs need to be monitored and can affect different lab values. The pharmacist also needs to check the dose the doctor prescribed for you. Some drugs are dosed based on weight, age, lab values, and sometimes drugs are dosed based on the type of infection the doctor is treating you for.

Another important step the pharmacist does in reviewing your prescription is he or she looks at other medications you are taking and makes sure they will not interact with the new medication the doctor prescribed for you. After the pharmacist is done checking the prescription he or she will enter it into the computer. The computer does a second check, similar to the pharmacist’s initial check, to ensure that everything is correct and safe for you.

After the prescription is put into the computer, a pharmacy technician fills the prescription with the correct medication and packages the medication to be dispensed to the patient. Then your prescription is ready for its final check with a pharmacist. The pharmacist who does the final check of the prescription ensures that the correct medication is in the bottle, the directions on the label are correct, as well as the dose, and duration.

After the final check the prescription is ready to be dispensed to you. The pharmacist then sits down with you and counsels you on how to take your medication and possible side effects that you may experience. This is the time that you can ask any questions you want so that you feel comfortable taking your medication.

So what could slow your prescription down?

The nurse could get tied up in the clinic and not be able to run the prescriptions over right away.

There could be a miscommunication between you and your doctor about if you wanted to wait for your prescription or get it sent to your village.

The pharmacist could have questions for the doctor about a certain drug or dose he or she wrote. A lab value could be too high or low for a certain medication in which the pharmacist has to notify the doctor that a change needs to be made.

The pharmacist could find a drug interaction with the new prescription and your other medications that the pharmacist needs to talk to your doctor about.

When the technician goes to fill the prescription the drug may not be in stock and then the doctor may need to write for a different medication.

When the final pharmacist checks the prescription he could find errors in the label or maybe the technician filled the prescription with the wrong medication.

Another factor that needs to be considered is that the pharmacy is not only filling your prescription. The pharmacist also has to fill everyone else’s prescriptions and answer questions from other health care providers and patients.

Although it may seem easy to fill a prescription a pharmacist needs ample time to review the prescription and ultimately make sure it is safe for you. Some days the wait may be a little longer than others, but in the end it is our job to ensure that you are receiving medication that is both appropriate and safe for you.
Turkey Bake with Whole Wheat Pasta

Ingredients (Yield 8 servings)
1 (16 oz.) container low-fat ricotta cheese
1 (8 oz.) package shredded low-fat mozzarella cheese
2 cloves garlic, minced, or more to taste
salt and ground black pepper to taste
1 (1 lb.) package whole-wheat penne pasta
1 lb. turkey meat
1 (13.5 ounce) jar spaghetti sauce

Directions
Preheat an oven to 300 degrees F (150 degrees C).

Stir the ricotta cheese, mozzarella cheese, garlic, salt, and pepper in a bowl; set aside on counter to allow to come to room temperature.

Bring a pot of water to a boil; cook the penne in the boiling water until cooked through yet firm to the bite, about 11 minutes. Drain and transfer to a large mixing bowl.

While the pasta cooks, place a skillet over medium heat. Crumble the turkey into the skillet; cook and stir until the turkey is completely browned. Drain and add to the pasta.

Spread 2 tblsp. of the spaghetti sauce into the bottom of a 13x9-inch baking dish; stir the rest of the spaghetti sauce into the pasta and turkey mixture. Spoon about half of the pasta mixture into the baking dish; top with the cheese mixture and spread into an even layer. Spread the remaining pasta mixture over the cheese layer. Cover with aluminum foil if desired.

Bake in the preheated oven until slightly brown on top, about 30 minutes.

Source: Allrecipe.com

What is your 2012 New Year’s Resolution Plan?

By Zhi Tai, WIC Dietitian

It's resolution time again. If one of your New Year’s resolutions is to get yourself and your kids fit and healthy, you’ll need a rational strategy to reach the goal. Here are 8 tips that might help your resolution come true:

1. **Start each day with a healthy breakfast.** Studies have shown that kids and adults who eat breakfast everyday are likely to have healthy weight. Also, children who eat breakfast have better performance at school.

2. **Get rid of those big plates and big bowls.** Use a smaller serving plate to control your portion size and resist the temptation to go back for seconds. Enjoy your food, but eat less.

3. **Eat frequent small meals throughout the day.** Eat five to eight “mini” meals throughout the day instead of three big meals.

4. **Make half of your plate fruits and vegetables.** Fill your plate with colorful fruits and vegetables. They are rich in phytonutrients which may help decrease risk for certain cancers.

5. **Make at least half of your grains whole grain.** Compared to refined grains, whole grains have more fiber, vitamins and minerals. Use whole grain flour for baking and also choose whole grain breads and pasta to benefit your body.

6. **Focus while eating your meals.** Try not to allow yourself and your kids multitasking (reading, watching television, chatting on phone etc) while eating. Instead, sit at a table and enjoy every bite of foods.

7. **Control your surroundings.** Stock your house with nutritious foods and keep away from the high-calorie snacks. Avoid buffets, and choose restaurants that offer healthy choices.

8. **Exercise, exercise and exercise.** Get some kind of physical activity each day after meals, even if it’s only for 20-30 minutes. During the winter season, shoveling snow is a sure way to work up a sweat and burn off some of those holiday pounds!

SOBERING, from p. 5

November 1.

The Sobering Center began operating on February 17 of this year. Since then, half of the people served were from Bethel, the other half from surrounding villages. Sixty-six percent were male, 50 percent were under 40 years of age, Tews said.

The YKHC Bethel Sobering Center is a unique concept in Alaska. In collaboration with the Bethel Police Department, the Sobering Center not only provides a safe environment for intoxicated individuals during Alaska’s harsh winter, it also provides a respectful and knowledgeable environment for individuals to begin to come to terms with their alcohol use through the SBIRT* program.

For information about the Sobering Center, call Richard (Rusty) Tews at 907-543-3781.

For information about SBIRT, call 907-543-6724
DHAT Graduation

Amid tears, hugs, flowers and the congratulations of friends family, staff and instructors, four young ladies “crossed the finish line” after two years of dental health aide therapist (DHAT) training. A ceremony was held at the Alaska Native Tribal Health Consortium headquarters in Anchorage Dec. 9. Bethel’s Dr. Bob Allen gave the keynote address, comparing their training to an auto race—complete with warning flags, pit stops and, of course, the checkered “victory” flag. But the finish line is also the starting line and as one endeavor ends, the next begins.

Training included a year of classroom study in Anchorage and a year of practical study in Bethel at Yuut Elitnaurviat.

These new DHATS—Jana Schuerch, Kiana (Maniilaq); Shannon Hardy, Ft. Yukon (Council of Athabascan Tribal Governments); Trisha Patton, Napakiak (YKHC); and Kate Kohl, Bethel (YKHC)—will now be going to different communities in rural Alaska to provide much needed dental care to underserved populations. DHATS work under the supervision of Dentists in a relatively new program that is being watched closely as a model for rural dental care outside of Alaska.

Alaska turns infant mortality rate around

The All-Alaska Pediatric Partnership recently announced that Alaska has obtained the lowest rate of death for babies between 0-28 days of life than any other state in the Nation. And, by Executive Proclamation, Governor Sean Parnell acknowledged that YKHC played a big role in achieving it.

Senator Lisa Murkowski, Congressman Don Young, and Senator Mark Begich each wrote letters in support of YKHC playing a major role in going from “Worst to First” in the Nation. Alaska is no longer ranked last for its neonatal mortality rate – instead, based on data just released from 2008, Alaska’s rate is the lowest in the nation.

Patient thank-you rewards Village Counselor

Behavioral Health Village Clinical Supervisor Greg Bell recently received this voice mail message. Greg, now based in Bethel, provided many years of counseling at the Saint Mary’s subregional Clinic. The message is an indication of how important Behavioral Health services can be for our regional villages.

“Hey, Greg Bell this is _______. I am just calling to let you know that I am up here with my children now and things are doing really good and I just called to tell you thank you for all the help that you gave me during the course of the last two years and I really do appreciate all the help that you did there. You went above and beyond the call of duty, in my opinion and you really helped me out there to….. helped me to start to see what things that I need to do, so…. thank you, that’s all, bye.”

Q&A, from p. 5

agencies and to establish networks to begin strong collaborative efforts. We are now actively engaging regional partners to establish a community behavioral health system that involves elders, faith-based groups, schools, and criminal justice. Meanwhile there are current efforts in place to enhance our suicide prevention services and this begins with bringing on board a Director of Prevention Services who can lead in our work to reduce the occurrence of suicides in the YK region.

Q What ways do you advise/recommend to communities who are making a direct impact/difference in elevating the health status of the members of their community?

A Cultural values and teachings are crucial towards making a difference. I would recommend that community leaders and providers facilitate teaching of these values and teaching to younger community members. I’ve been volunteering, in the evenings, with two Bethel support groups, on sexual abuse and family violence, where Yupik value and teachings are a major part of facilitating positive change with the group participants. I’m impressed with the positive approaches being used and the strong motivation by the participants to learn and change their behaviors.

Q How do you personally align with the mission/vision and values of YKHC?

A The mission and values of YKHC, when I saw them, strongly influenced my decision to join YKHC and participate in a proactive manner towards improving healthcare in the region.
Southcentral Foundation receives 2011 Baldrige Award

Alaska Native-owned health care earns highest presidential honor for performance excellence

(ANCHORAGE, ALASKA) – Southcentral Foundation is Alaska’s first health care organization to receive the Malcolm Baldrige National Quality Award, announced today by the U.S. Secretary of Commerce.

The U.S. Congress created the Baldrige Performance Excellence Program and the award in 1987 to identify and recognize the country’s most innovative organizations, and then disseminate and share best-practice performance strategies. The goal is nationwide advancements in innovation and quality.

This year, the Baldrige Performance Excellence Program received 69 applications (two manufacturers, three service companies, two small businesses, eight educational organizations, 40 health care organizations and 14 nonprofits/governmental organizations). The applicants were evaluated rigorously by an independent board of 553 examiners in seven areas: leadership; strategic planning; customer focus; measurement, analysis and knowledge management; workforce focus; operations focus; and results.

Of the 69 applicant organizations, Southcentral Foundation and ten others were selected for a site visit in October. The examiners spent between 300 and 1,000 hours assessing each of the 11 finalists’ strengths and opportunities for improvement before reaching their decision. Southcentral Foundation was one of the four organizations able to meet the nation’s highest standards and receive the 2011 award.

“This award honors the collective effort of our tribal leadership, customer-owners, and employees who have pursued excellence, systematically, in all aspects of Southcentral Foundation’s Nuka System of Care,” said James Segura, chair of the Southcentral Foundation Board of Directors. “Our ‘commitment to quality’ is a corporate goal and we work tirelessly to continuously improve.”

“We are very proud of this achievement,” said Southcentral Foundation President/CEO Katherine Gottlieb. “It is an affirmation that we are achieving our mission and vision through best management practices.”

The award will be presented by President Barack Obama in April.

About Southcentral Foundation

Established in 1982, Southcentral Foundation’s (SCF) mission is to work together with the Native Community to achieve wellness through health and related services. The nonprofit health care affiliate of Cook Inlet Region Inc. (CIRI), SCF has grown in its 27 years, from a single dental clinic to an internationally recognized, award-winning health care organization that employs more than 1,400 people and manages more than 60 health care programs and services.
so happy to work with people and help them with their health care needs. It's really tough when they're away from home, and when home becomes the hospital, that's where it becomes even more important for us to be like a second family to our patients.”

Real Life Elves – giving back to the community
In addition to long-standing nurse and Napartet Champion from Northwing, Melody Jordan—who decorates the halls (literally) with each passing season (notably Halloween and Christmas)—there are other elves of Northwing who deserve great credit for giving back to the community.

Sally Thompson, nurse and colleague of JC Crews (also from Geneva, Alabama) got her family together to give back to the YK Delta community for a good cause.

“Every year our family has a chance to speak up about what charity they want to give to. I proposed that we help the elementary school here in Bethel (Mikelenguut Elitnaurviat) in their annual coat and hat drive to help benefit some children in need who maybe didn't have enough warm gear to last the winter.”

Needless to say, Sally’s idea got the vote from her family and colleagues to go forth with the contribution. Marissa Taylor, JC Crews, and many others (apologies if we can't name them all!) from Northwing and the Geneva, Alabama, community put together book bags and purchased warm coats, hats and gear to benefit local school children.

So what makes the work so rewarding? We asked Linnea Stein, a nurse of North Wing who will celebrate nine years with YKHC this month (second-longest serving behind Melody Jordan), and she said, “ultimately, it's the patients. The patients are wonderful; they are very caring and they appreciate anything you do for them.”

JC Crews agreed about the patient-care aspect and the importance of family when caring for the sick. “I see a nostalgic sense of family. Relatives come in, bring food, check in on their loved ones. We don't even see that in the patient-care aspect in Geneva, Alabama. The YK Delta is so special in that sense.”

“After seeing my sister’s care in dealing with pancreatic cancer and the level of engagement and care her nurses provided to her (before her passing) it changed my life…”
—JC Crews, Northwing Nurse

Welcome Aboard!
Sharon Sigmon—Associate General Counsel
Sharon began her attorney career in 1990, first being licensed in Arkansas and then in Alaska.

In Arkansas, Sharon worked in a private firm on Social Security Disability claims, workers’ compensation and family law matters. Later, she opened her own law office and practiced family law, real property, wills and estates and criminal law.

Sharon also has experience in domestic violence prevention, first as the Executive Director of the Arkansas Coalition Against Domestic Violence and then teaching domestic violence intervention and anger management classes at a mental health nonprofit.

Sharon moved to Alaska in 2005 to become the Bethel City Attorney, and then worked in the child in need of aid section of the Alaska Attorney General’s office, also in Bethel. While at the City of Bethel, Sharon worked on ANCSA land matters, public health protection issues, employment and union negotiation matters, and other City operations issues.

At YKHC, Sharon will focus on health, employment and contracts law matters.

Please join me in welcoming Sharon to YKHC.

—Dan Winkelman, Vice President for Administration & General Counsel

Rahnia Boyer—CHAP Director
I am pleased to announce that Rahnia Boyer (nee Parker) has accepted an offer to become the CHAP/Education Director.

Rahnia, as many of you know, has successfully managed our Nicotine Control & Research Program since mid-2010. For five years previous to joining YKHC she managed the Chronic Care Active Management & Prevention Department for the Norton Sound Health Corporation.

Rahnia brings great energy, strong leadership skills and a solid understanding of regional healthcare needs to CHAP, and I invite you to join me in welcoming her to CHAP and to her new position.

—Bill Schreiner, MPH, Village Operations Administrator
Vital Few Goals for 2016

In addition to the annual Napartet Goals, Senior Leadership and the Napartet Goal Team—with approval of the YKHC Board of Directors—have identified a set of long-range strategic goals, components of a vision for healthy people that call for more comprehensive planning and structure development than year-to-year improvements. We call these the Vital Few Goals for 2016, which we will be pursuing over the next five years within each of our five Napartet Pillars.

**Patient Centered Excellence**

**Goal:** Improve Oral Health in Children 0-5 years.
Decrease number of children 0-5 years of age requiring full mouth dental rehabilitation in the Operating Room to 50 percent.

**Goal:** Improve survival rates for patients diagnosed with cancer.
Improve colon, cervical and breast cancer screening rates to meet or exceed Healthy People 2020 goal and decrease tobacco usage to 25 percent.

**Goal:** Improve protective factors for our communities to decrease suicide.
Within five years we will decrease our suicide rate to meet or be less than the Alaska state average

**Goal:** Improve provider and patient relationships.
Establish a medical home for each patient and provide continuity with that home 80 percent of the time

**Alaska Native Workforce Development**

**Goal:** Increase number of Natives in higher level staff positions.
Identify, train and mentor 20 percent of Native staff into higher level positions.

**Employee Focus**

**Goal:** Increase employee satisfaction by 1 percent per year identified through the employee satisfaction survey.
Increase Employee Satisfaction by 5 percent over 5 years.

**Community Partner Satisfaction**

**Goal:** Increase Community Partner Satisfaction to 90 percent.
Identify opportunities among our Tribal Councils, communities and partnerships to obtain feedback on how we can maintain, strengthen and enhance our presence with them.

**Goal:** Increase YKHC presence in communities through volunteerism.
We will have 5,000 community volunteer hours dedicated to YK Delta communities we serve each year.

**Financial Viability**

**Goal:** Provide for organization sustainability and growth for the future utilizing positive operating margins to finance current and future operations.
Achieve a 5 percent operating margin by the end of year five through a combination of revenue enhancement and expense control measures.

**Goal:** Collect 102 percent of FY11 from $56.9 million to $58.03 million.
Reduce Accounts Receivable Days from 71 to 68. Increase Medicaid/Medicare service population from 51 percent to 55 percent. Increase enrollment forums for public/private assistance programs.

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**Who do I call?**

**911**
- State Trooper 1-800-764-5525
- or Village VPSO

**Life-threatening emergency...**
- Active suicide attempt, overdose, incident involving weapons, possible serious harm to somebody, person threatening to kill or seriously hurt themselves or somebody else

**543-6300**
- or 1-800-478-2642
- YKHC Emergency Services for Behavioral Health on-call Clinician

**Mental health situation...**
- Somebody might need to be committed to psychiatric hospital in Bethel or Anchorage—acting bizarre, out of touch with reality, maybe seeing/hearing things that are not there, “talking crazy,” maybe talking about suicide

**1-866-465-8930**
- ComPsych Employee Assistance Program

**Personal or family problems...**
- A YKHC employee or family member needs help dealing with an alcohol or drug problem, depression, job stress, marriage or financial problems, grief issues, domestic abuse, or similar problems.

**1-800-478-3321**
- or 543-6100 in Bethel
- Behavioral Health Critical Incident Stress Management Program

**After a disaster or tragedy**
- There’s been a terrible event in my village—a suicide, bad accident with injuries, multiple deaths, etc. and we need help coping with all of this
YKHC Messenger, website due for a makeover

by Michael Faubion, Public Relations Senior editor

The Messenger newsletter started out in 1991 when YKHC took over control of the Bethel hospital under PL 93-638—The Indian Self-Determination and Education Assistance Act. As an Indian Health Service contractor we were obliged to periodically publish reports to our Tribal membership, and the Messenger continues in that role today.

It was originally printed on the company’s Xerox machine on bright yellow paper, hand-stamped and mailed to several hundred people around the YK Delta. As times have changed, so has the Messenger. It has evolved in style and appearance over the years and circulation has grown to include all the box holders in the YK Delta and many other friends, former employees, government officials, tribal organizations and interested people throughout the country.

It has been published with very few interruptions every month for the past 20 years. In recent years the monthly issue has been distributed on our website, www.ykhc.com, with a magazine-style issue printed and mailed quarterly.

We don’t believe the printed word is obsolete, but we do feel it’s time to bring the Messenger up to date.

In just the past few years there have been great changes in the way people are getting information. Not just the internet, but the advent of social media such as Facebook, Twitter, and YouTube, has increased the pace of information delivery—and the public appetite for video and other electronic media.

Another very big development on the horizon is the promise of high-speed broadband internet service in the YK Delta. GCI has been building a land-based fiber-optic and microwave datapipe to connect Western Alaska with the rest of the cyber-connected world without the aggravating delay of a long satellite hop to outer space and back.

With this new development we anticipate that more and more of our Messenger readers will be going to our website to find out what’s new at YKHC, so we are taking this opportunity not only to update the Messenger, but to completely redesign and modernize our website—complete with photo galleries, video links, Facebook sharing, comment and feedback opportunities, and all the rest that today’s internet users have come to expect.

The stories, articles, profiles and health tips you’ve been getting in the Messenger will be available on the website, with links to additional information that can’t always fit into a print publication.

We don’t intend to stop printing the Messenger altogether, but we will be changing its shape. It will be coming to you every other month in a more compact format designed to keep you informed about important changes and innovations at YKHC, the health issues affecting the people of our region and prevention information to help you and your families stay healthy. The new Messenger and the new website will launch simultaneously early in the New Year.

We look back with fondness, some nostalgia, and a certain degree of pride at the history of the YKHC Messenger, seeing how it reflects YKHC’s own growth in commitment to improvement and striving for excellence. We hope the Messenger has been, and will continue to be, an important connection between the corporation, the staff and providers, and the people we serve. As always, we invite your comments and suggestions and look forward to Working Together to Achieve Excellent Health.
Top Ten Messenger stories of 2011

Here's our Editor's Pick for the big stories at YKHC this year (not necessarily in order of importance)

1. Assisted Living Home Groundbreaking

New facility will provide care for elders and disabled closer to home

YKHC Leadership, board members and invited guests took shovels in hand Aug. 22 to break ground for the region's new Long Term Care Facility and Assisted Living Center. Such a facility has been a top priority for YKHC’s Tribal leaders and residents for years.

"This facility will be a visual reminder of our commitment to the elders of this region who have been requesting this, as well as the Tribal priorities of the people who have wanted this health service available to them in our region," said YKHC President/CEO Gene Peltola.

2. Tribal Gathering XVIII

Suicide prevention top priority at Tribal Unity Gathering

Delegates from Tribal Councils throughout the YK Delta region are asking YKHC to focus health care efforts on preventing suicide. The tragedy of suicide, especially teen suicide, was identified as the number one health concern at YKHC’s eighteenth Tribal Unity Gathering held at the Yupiit Piciryarait Cultural Center in Bethel April 6-7.

Health Aide of the Year

The theme of the Tribal Gathering was "Honoring our Health Aides: The YK Delta's First Line of Care." Presentations described the work of Dental and Behavioral Health Aides as well as medical Health Aides. Phyllis Andrews of Kotlik was recognized as Health Aide of the Year.

3. Sobering Center Opens

January 11 ribbon cutting dedicates new facility to safety, compassion

Full operations began in mid-February, providing a safe shelter for intoxicated people who previously passed through the jail and hospital emergency room. The facility is the result of years of work by partners YKHC, the Alaska Department of Health and Social Services (DHSS), the Alaska Mental Health Trust Authority, Bethel Community Services Foundation and the City of Bethel.

4. Prematernal Home

Governor retains Legislature’s capital budget appropriation

After more than 20 years of holding Bethel’s aging Prematernal Home together with “duct tape and bailing wire,” funding was finally approved for a new facility. Expectant mothers who come into Bethel for their last month of pregnancy will have a new, safe, modern home to stay in while they await delivery.

5. Suicide Prevention funding

Youth Sobriety Project included in state capital funding

The Qungasvik Youth Sobriety Project was approved for funding in the FY12 State capital appropriations for $1.6 million. The research-based cooperative project in partnership with the University of Alaska, tribal, federal, and state entities, is an evidence-based practice to prevent suicide and alcohol abuse for the region’s youth.

6. New Clinic openings

Kasigluk, Nunapitchuk, Mtn. Village

These communities celebrated the opening of new health clinics during the year. More than 35 new village clinics and 5 subregional clinics have been built in the YK Delta during the past 15 years.

see TOP TEN, p. 20
7. Break-up on the Kuskokwim

Spring Flooding damages homes, forces evacuation at Crooked Creek

Flooding affected more than 25 homes, with the evacuation of a reported 53 residents to nearby Donlin Creek.

YKHC mobilized medical supplies, including medications, first aid kits, hand sanitation, float coats, satellite communication equipment, etc. As flooding and ice jams were reported, administrators continually assessed clinics and patient populations in Aniak, Chuathbaluk, Upper and Lower Kalskag.

8. Capital Improvements

Crew finishes new hospital roof ahead of schedule

The Yukon-Kuskokwim Delta Regional Hospital completed a $2.8 million roof replacement project ahead of schedule. The new roof stops leaks, but more importantly will save hundreds of thousands a year in heating costs.

9. Dental Care

Prenatal Dental Prevention program launched

The Prenatal Dental Program's goal is to reduce the cavity rate by ridding new mothers of cavity-causing bacteria and by educating them on how to help keep their baby's mouth clean and healthy.

10. Community Service

Employees, community, come together for doctor's South Sudan project

YKHC employees were among the major contributors at a summer fundraiser for Dr. Jill Seaman’s medical clinic project in South Sudan. The gala event, with live and silent auctions, raised more than $20,000.

Blood drive pulls in volunteers for donation of life

Bethel's first community-organized blood drive in nearly 10 years took place at the Yupiit Piciryarait Cultural Center on September 13 and 14.