



Tribal Unity Gathering XXIII

Pikaniralria Cody Westlake and second grade dancers from Ayaprun Elitnaurvik—the Yup'ik Immersion School—entertained the audience at the opening ceremony of the 23rd Tribal Unity Gathering in Bethel April 6–7.

Read more about the Gathering inside on pages 6–7...

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SAVE THE DATE

- May 6–12 National Nurses Week
- May 15.....Next Messenger Deadline
- May 15–21 National EMS Week
- June 11 Bethel Half Marathon

National Nurses Week

This nationwide observance begins each year on May 6 and ends on May 12, Florence Nightingale's birthday.



The nursing profession has been supported and promoted by the American Nurses Association (ANA) since 1896.

This year, YKHC is proud to acknowledge the dedication their nurses have had in delivering compassionate, quality, and safe care to those individuals in this and surrounding communities in the YK Delta.

This year the Nurses Week theme isw "Culture of Safety, it starts with you." Please join us on these dates and recognize YKHC's outstanding nurses that light the way to quality safe patient care.

RESOURCES

YKHC Website: www.ykhc.org

YKHC main switchboard 543-6000
Toll Free 1-800-478-3321

APPOINTMENTS

Outpatient Clinics (Yukon, Kusko, Delta) 543-6442
Dental 543-6229
Optometry 543-6336
Audiology 543-6466

SUBREGIONAL CLINICS

Aniak 675-4556
Emmonak 949-3500
St. Mary's 438-3500
Toksook Bay 427-3500
Hooper Bay 758-3500

SERVICES

Inpatient (North Wing) 543-6330
Pharmacy 543-6382
Physical Therapy 543-6342
Women's Health 543-6296
Irnivik Birthing Center 543-6346
Behavioral Health Services 543-6100
 Substance Abuse Treatment PATC 543-6730
 Sobering Center 543-6830
 Developmental Disabilities 543-2762
Emergency Room 543-6395
Office of Environmental Health & Engineering
 Injury Control & EMS 543-6420

ADMINISTRATION & SUPPORT

Administration 543-6020
Human Resources 543-6060
Public Relations 543-6038
Travel Management 543-6360
Facilities & Maintenance 543-6203

BETHEL & REGIONAL RESOURCES

Public Health Nursing 543-2110
Tundra Women's Shelter 543-3444
Alaska State Troopers 1-800-764-5525

The Messenger is a monthly publication produced by the Yukon-Kuskokwim Health Corporation's Public Relations Department as a report to Tribal Members.

For questions, comments, submission of articles, or subscription information, write to Messenger Editor, Yukon-Kuskokwim Health Corporation, P.O. Box 528, Bethel, Alaska 99559; or call 907-543-2232. E-mail: michael_faubion@ykhc.org.

Deadline is the 15th of the month, or the preceding Friday if the 15th is on a weekend, for publication on the First of the next month.

The Messenger is also available for download on our website at www.ykhc.org/messenger.

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Message from the President/CEO

May is National Mental Health Month



Dan Winkelman,
President/CEO.

In this month's Messenger we recognize the importance of our behavioral health clinicians, the various behavioral health programs we offer and how our customers can access them.

As the national association, Mental Health America, says—the purpose of the outreach during the month of May “allow[s] people to speak up about their own experiences, to share their point of view with individuals who may be struggling to explain what they are going through—and help others figure out if they too are showing signs of a mental illness. Sharing is the key to breaking down the discrimination and stigma surrounding mental illnesses, and to show others that they are not alone in their feelings and their symptoms.”

Several months ago, I accompanied our Director of Behavioral Health, Ray Daw, to meetings with various villages that needed increased access to YKHC's behavioral health programs. YKHC assisted the villages and its leadership for several months to ensure wellness within the communities. I saw for myself the expertise, commitment and compassion exhibited by our clinicians in working with the villages. Our behavioral health teammates worked tirelessly away from home, on weekends, day and night and did whatever was asked of them. For that, I thank each and every one of them for the dedication and devotion they shared with our villages.

Quyana.

**Umyuarpeggun cakviuquvet
qayaagaurlutun ikayuastekavnek**

**Call for help if you're
having a tough time**

**543-6499
or toll-free 844-543-6499**

YKHC BEHAVIORAL HEALTH

YKHC Board of Directors

Unit 1



Mary Ayunerak Alakanuk



Michael Hunt, Sr. Kotlik

Unit 2



Geraldine Beans St. Mary's



James C. Landlord Mtn. Village

Unit 3

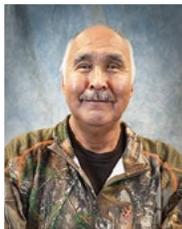


Billy Jean Stewart Kalskag



Betty Turner Lower Kalskag

Unit 4

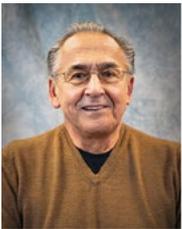


Phillip K. Peter, Sr Kwethluk



Mildred Evan Akiachak

Unit 5



Stan Hoffman, Sr. Bethel



Gloria Simeon Bethel



Hugh Snyder Bethel



Chris Larson Napaskiak

Unit 6



Esai Twitchell, Jr. Kasigluk



Robert Enoch Tuntutuliak

Unit 8

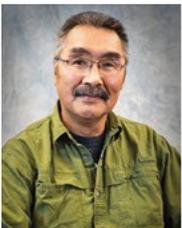


James Charlie, Sr. Toksook Bay



James Sipary Toksook Bay

Unit 9



Patrick Tall Chevak



Maria Theresa Friday Hooper Bay

Unit 10



Joshua Cleveland Quinagak

Unit 11



Marvin Deacon Grayling

Health Aides of the Month

February: Nathan Lake, Session II, Chevak

In February, Nathan assisted with an OB patient at the clinic who went into early labor in the village. During this time, he was an avid communicator with the physician in Bethel, calling every 15 minutes to report new vital signs and had all of the medications prepared for the appropriate administration to the patient.



Nathan Lake.

He remained calm and documented a complex situation appropriately, working to keep mom and baby safe. This is just an example of the manner in which Nathan makes himself available for emergencies. He is determined and willing to help all hours of the day and night and also goes above and beyond with things like assisting with getting supplies.

Recently, Nathan had kindly volunteered to mentor a new Health Aide trainee as he works in the clinic and attends Health Aide training. Thank you, Nathan, for all your hard work and dedication!

March: Jeremy Woods, Session II CHA, Marshall Clinic

Jeremy is utilizing the knowledge and skills he learned in ETT and it is paying off. Jeremy saw a patient who had multiple fractures to his pelvis, a fracture to one rib and thoracic vertebra. The patient was also diagnosed with acute Pneumothorax. Jeremy was the only health aide in the



Jeremy Woods.

see HEALTH AIDES, p. 10

Get Ready for Getting Out on the River

by Jennifer Amigliore, YKHC ICEMS

The rivers are breaking up here in the Yukon-Kuskokwim Delta! The YKHC Injury Prevention program is dedicated to educating the community and providing resources to reduce the amount of preventable deaths in the Yukon-Kuskokwim Region. Unfortunately, drowning from water related activities causes a high number of Alaskan deaths each year, and it is a leading cause of death in our region.

To prevent your child from drowning, follow the Alaska state regulation passed in 1992 that all children under 13 must wear a PFD while in a boat. Good supervision and wearing a correctly fitted PFD vest when near the river or lakes are a great ways to prevent drowning for all ages. When on, in, or around water, please wear a Personal Flotation Device (PFD). Accidents can happen at any time, and being prepared with wearing a PFD can help keep a simple spill from being fatal.

Preparation before every river trip can be the difference between a fun-filled time or a preventable tragedy. Here are some ways to make sure you are prepared for your river trips.

Check weather reports and the search and rescue river warnings.

Be sure to pack extra warm clothes in a dry bag, extra food and first aid gear in case of an unforeseen delay or accident.

Double-check that you have all needed equipment and that it is secured to your boat.

Tell a reliable person at home your trip itinerary, so they may report you missing and your planned route if you do not return.

Preparing for unforeseen delays is very important, especially when you are hunting and may extend or change your trip plan.

Another way to stay safe while traveling on the river is to take a CPR/First Aid course. These courses can help prepare you for a life-threatening event in the remote wilderness. CPR is used not only for heart attacks but also for drowning and severe choking. The First Aid course teaches how to control life threatening cuts, stabilize broken bones and what to do in case of a suspected spinal injury. One of the most important lessons the course teaches you is also what not to do. Taking a CPR/First Aid course is a first step for many in becoming a first responder.

Becoming a first responder is not only beneficial for you in the case of an emergency, it also benefits your village if you happen to come across an injured traveler.

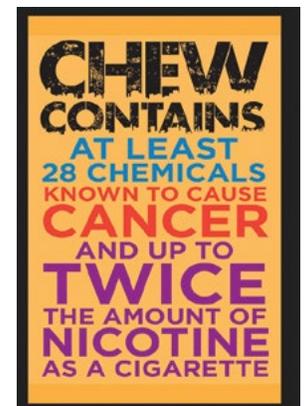
For more information about water safety or where to buy a PFD, call YKHC Injury Prevention at 1-800-478-6599 or visit The Injury Prevention Shop in the first floor of "New YKHC." The shop provides free shipping to villages in the YK Delta! A website where you can find excellent information on water safety is www.watersafety.org.



Want to quit tobacco? Try the Quitline

Alaska's Tobacco Quit Line is a free service that provides Alaska adults ages 18 and over with confidential support services to help them quit tobacco. Those thinking about or trying to quit can call the Quit Line as often as they like and are eligible to receive four support calls from a quit coach. Alaska's Tobacco Quit Line also offers free nicotine replacement therapy to all eligible Alaskans who enroll in the program.

Enrollment is easy and can be done over the phone at **1-800-QUIT-NOW** (784-8669) or online at www.alaskaquitline.com.



Diabetes Health Tip

How To Travel Well

Healthy habits are easy to forget at home. This month's Health Tip is all about how to stay well while traveling! Keep these tips around while you're packing, when on the road, and when at fish camp!

Remember Medications: If medications are a part of your health needs, get your refills! Make sure you have enough supplies to last the whole time you're gone.

Keep Snacks Handy: It's easy to get caught hungry when you're away from home. To avoid an impulsive purchase, think ahead. Stash healthful snacks—full of nutrients and fiber—in your travel bag. Think dried fish, granola bars, dried fruit, nuts, hardboiled eggs, bananas, apples, and carrots.

Drink Plenty of Water: It is very important to keep your body healthy by drinking 8–10 cups of water every day. Try keeping a bottle with you at all times when you're out and about.

Choose Wisely at Restaurants: If you're traveling in an area with restaurants, knowing healthful options can help you stay on track with goals. Always VEG OUT with veggies, try lean meats like chicken and fish, and choose low fat cooking methods like baked, broiled and grilled.

Get Plenty of Rest: Sometimes when we're tired it's easy to make poor choices. Aim for at least seven hours of rest a day to stay alert, oriented, and steadfast in your health goals.

Recipe of the Month

Snack On-The-Go: Spicy Sweet Potato Hummus

Sometimes a little dip goes a long way in healthy traveling. Try this recipe to spice up your snacking! Just remember – keep servings to 3 ounces to get through airports.

Ingredients:

- 1 sweet potato
- 2 cups cooked chickpeas
- ¼ cup tahini
- ¼ cup lemon
- ¼ cup olive oil
- 1 tsp salt
- 1 ½ tsp cayenne pepper
- ½ tsp paprika
- ½ tsp cumin



Instructions:

Preheat oven to 400. Bake sweet potato for 45 minutes. Let sweet potato cool and remove skin. Food process with remaining ingredients until smooth. Serve! Try with whole wheat crackers, carrot sticks, celery or snow peas!

Start Training Now For the Bethel Half Marathon!

When is it?

Saturday, June 11, 2016.

The run starts at 6 p.m. and the walk starts at 4 p.m.

Why is it in the evening?

First created in 2003, the Bethel Half Marathon began as a celebration of summer solstice, the longest day of the year. "Midnight runs" are popular all around Alaska as a celebration of long daylight hours.



How far is a half marathon?

A half marathon is 13.1 miles! As the name suggests, it's half the 26.2 mile distance of a marathon.

How do you run 13.1 miles on Bethel's limited roads?

The Bethel Half Marathon follows a diverse and scenic course that covers MUCH of Bethel! The route includes highway miles, sand pit adventures, a tour of the boat harbor, and ends with some incredible river views.

How do you train for a half marathon?

The easiest way for new runners or walkers to train is to follow a training plan. A training plan will help you get fit, be ready for the big race, avoid injury, and feel prepared. We love Hal Higdon's training plans! There's a training plan for everyone—walkers, walk/runners, new runners, and even advanced runners. **Important note: start training for a race EARLY (right now)!** <http://www.halhigdon.com/training/51130/Half-Marathon-Training-Guide>.

How long does it take to finish a half marathon?

Elite runners may finish in just over an hour, but many runners finish in 2–2.5 hours. Walkers typically complete the course in three or more hours (which is why the walk start time is earlier). If you've run other race distances, you might want to check out an online race predictor. <http://www.runningforfitness.org/calc/racepaces/rp>

It sounds like a fun event! How can I help?

Volunteers are needed both before and during the race. Consider volunteering to help mark the trail before the race. Or you might enjoy staffing an aid station during the race. Local organizations can support the race by donating healthy snacks, drinks, or prizes for race participants. To volunteer or for more information, please contact Jenni (545-3241) or Chris (545-2038).

Tribal Unity Gathering XXIII

Nearly 90 delegates from villages throughout the YK Delta participated in the 23rd Annual Tribal Gathering—taking in reports on YKHC’s healthcare service improvements from the previous year and setting priorities for the upcoming year. Hiring, training, and supporting Health Aides in village clinics was voted high among the priorities identified for action.

The theme this year, “Building Wellness Together,” continued throughout the conference as President/CEO Dan Winkelman announced news that the Indian Health Service (IHS) and YKHC signed the final Joint Venture Agreement to move ahead with the proposed Dr. Paul John Calricaraq Project (PJCP)—a comprehensive health care improvement project that includes a new primary clinic, inpatient unit and major hospital renovation. Keynote speaker Jim Nordlund, State Director of the US Dept. of Agriculture Rural Development, described the role of the Alaska office in securing a \$165 million loan to help finance the PJCP and invest in the potential of the YK region.

During the first day of the conference, YKHC leadership and program directors reported on new developments and continuing issues being addressed at the Bethel hospital and in village clinics.

MyYKHealth – Susan Wheeler, Interim Chief Information Officer

Patients are encouraged to sign up for YKHC’s internet patient portal, myYKHealth, where they can access personal information from their medical record, send their health care team secure messages, request refills of medications from the pharmacy, print immunization records, and receive appointment reminders and health messages. There is also a new iPhone app called HealtheLife. Using the portal only requires an email address. Some folks may only have cell phones with texting but not email—perhaps one of the reasons only 1,700 patients out of our entire population have signed up so far.

Hospital Services – Jim Sweeney, VP Hospital Services

Within the past several months, following medical appointments, patients have been asked to take a brief survey on a tablet. This gives administrators instant feedback that helps them improve services and resolve issues quickly. Over the next year, more tablets will be introduced in more locations. The hospital formerly used an after-visit survey that was sent out by mail several weeks after a patient’s visit. They were long and very few responses were returned. The hospital is using a phone survey service to follow-up with patients. The phone call surveys are legitimate and only used within YKHC to help us target problems and improve service.



Unit 1 delegates work on their priority list with YKHC staff facilitators.

Community Health Aide Program – Rahnia Boyer, VP Village Health

Village Health Aides have a difficult job and deserve the support and respect of their communities, but sometimes they are criticized and underappreciated. This leads to burnout and high turnover. A shortage of Basic Training Instructors compounds the problem, making it difficult to keep up with training new Health Aides. This makes retention of trained Health Aides very important. Many village clinics are one or two health aides short of the budgeted staff. Small gestures of appreciation from the people they care for remind Health Aides why they are there and can make the difference in helping them to want to stay.

Healthy People Pillar – Matthew Scott, Community Health & Wellness Director and Dane Lenaker, Dental Director

This new Napartet Pillar brings attention to two of the Delta’s biggest public health problems: tobacco-related and dental diseases. In the RAVEN electronic health record system, improved screening of all patients for tobacco use, accompanied by convenient options for referral to YKHC’s prevention program, is having dramatic results towards meeting a goal of enrolling more people in the program. DHATS in the subregional clinics are taking the lead in making sure infants and children in the villages get dental exams and treatments. The Dental Dept. is actively recruiting for more dentists to be able to make longer village visits.

Behavioral Health – Raymond Daw, Behavioral Health Administrator

Utilization reviews and outcome evaluations are resulting in the redesign of clinical services, particularly in response to traumatic deaths and incidents. The new PATC alcohol treat-



President/CEO Dan Winkelman welcomes delegates, staff, guests and presenters to the Gathering, held at the Yupit Piciryariat Cultural Center

ment facility will open in the fall, with increased capacity and new opportunities for inpatient treatment. Also, an active and culturally appropriate prevention program, outpatient services with stronger regional access, 24/7 crisis response capability and continuing study of the connection between nutrition and mood problems, are elements of YKHC’s Behavioral Health service plan.

Day Two: Tribal Gathering Priorities

Every year, delegates at the YKHC Tribal Gathering work in small groups (organized by sub-region) to create a list of health-focused priorities for the upcoming year. This year delegates were asked to consider actionable items that YKHC could work on at every level of our four-tiered health care system—within village clinics, subregional clinics, at the Bethel hospital, and when referring patients to Anchorage health care partners and beyond.

Once subregional priorities were set and reported out by each unit, conference organizers input the results into a text- and tablet-based polling system. Delegates were asked to vote on their highest priorities per tier, and finally, overall. The following results capture the final top three priority results, as well as context provided during the small group work sessions.

Top 3 Priorities

1. More Village Health Aides

Ensure there are enough health aides on staff to accommodate a patient’s ability to get an appointment with ease. Improve hiring and long-term retention of health aides and health aide floats, particularly in villages that do not currently have a full-time health aide or when a village’s health aide is asked to float to another village. Continue to provide health aide support and counseling to prevent burn out or after a trauma occurs. Where necessary, develop a process to deliver health care in

villages without health aides, to ensure medical needs are met.

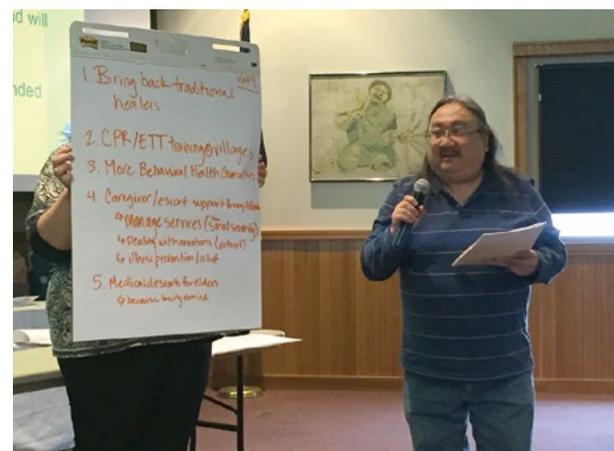
2. Village Doctor visits at least two times per year

Improve access to health care by increasing frequency of doctor visits to villages, bringing access directly to patients’ communities. In addition to more doctor and mid-level primary care providers, delegates requested increased visits by dental and eye care providers.

3. Decrease ER wait times

Overall, many unit delegates felt the wait time in the ER was too long. Delegates requested adding triage staff and ER doctors, as a means to shorten wait time.

Quyana to our delegates, our volunteers, our staff and the Yupit Piciryariat Cultural Center for contributing to a well-coordinated and successful Tribal Gathering!



R.B. Slats reports Unit 9’s list of priorities.

May, 2016

Dr. Paul John Calricaraq Project

For more information about PJCP, visit our website: www.ykhc.org/pjcp



Guiding Principles: Represent the Y-K region's Culture & Identity | Promote Customer Centered Care | Affordable Cost & Sustainable Operations

YKHC and IHS Sign Joint Venture Agreement

YKHC signed a Joint Venture Agreement with the Indian Health Service (IHS) March 29, securing increased funding to hire additional providers and paving the way for YKHC to build a new primary care clinic, remodel the existing hospital in Bethel and build staff housing. Current estimates anticipate this agreement will more than double the IHS funding for staffing and operations by 2025.

With the Agreement in place, YKHC will now secure its last major piece of financing in order to begin construction on the 188,000 square-foot primary care clinic, renovation of the existing 105,000 square-foot Bethel hospital and new staff housing.

“This public-private partnership with IHS and our financiers will exponentially increase access to health care, while at the same time improve our quality and reliability for the people in the Yukon-Kuskokwim Delta for the next 50 years,” President & CEO Dan Winkelman said. “With more providers at the new regional primary care clinic and hospital, YKHC will be able to address demand in Bethel and the villages by sending providers throughout its service area more frequently.”

YKHC Chairman Esai Twitchell said, “Our region has outgrown our current facility. The PJCP is going to allow us to provide many of the services that have been on our Tribal priority list for some time now.”

Several legislative milestones were completed in 2015, making the Joint Venture Agreement and progress on the PJCP possible. U.S. Congressional action was needed to transfer ownership of the hospital from IHS to YKHC. Senate Bill 230, and its companion House Resolution 521, were sponsored by the Alaska Delegation and signed into law by President Barack Obama.

In 2015, Senate Bill 46, sponsored by Senator Lyman Hoffman, with companion House Bill 101, sponsored by Rep. Bob Herron, authorized regional health organizations access to low interest bonds for capital improvements through the Bond Bank Authority. The anticipated \$102.5 million loan from this authority to YKHC is expected to save over \$50 million in comparison to other potential funding alternatives.

“The Bond Bank looks forward to implementing Senator Hoffman and Representative Herron’s legislation to provide lower cost financing for YKHC’s PJCP, and all of Alaska’s regional



YKHC President/CEO Dan Winkelman, Principal Deputy Director of the IHS Mary Smith, and YKHC Board Chair Esai Twitchell sign the papers to formalize the Joint Venture Agreement that will fund personnel and housing for the PJCP. YKHC Board Members, Senior Leadership and IHS officials look on.

health organizations, in their mission of bringing improved health care to Alaska,” said Deven Mitchell, Executive Director of the Alaska Municipal Bond Bank Authority.

The U.S. Department of Agriculture Rural Development (USDA RD) is a federal agency that offers loans, grants, and loan guarantees to support essential services, such as clinics and hospitals. The federal agency made a funding commitment to provide \$165 million in low interest loans to YKHC for the PJCP in October 2015.

James Nordlund, the Alaska State Director for USDA RD, said, “The commitment we made to YKHC’s project is the largest Community Facility loan our agency has ever made nationwide. We found this to be a very solid proposal because of the tremendous need, the financial viability of the project, and the quality of the management team.”

Groundbreaking is tentatively scheduled for this summer.

More About PJCP Online

Design plans for the new clinic and hospital renovation, along with background information, all the back issues of the PJCP update, and the full text of this article, can be accessed on our website at www.ykhc.org/pjcp. You’ll find a link there to our comment email. Please send us a note and let us know what you’re thinking about the Dr. Paul John Calricaraq Project.

Talking Wall Question of the Month:

Tell us about the carvings, baskets and masks of your region.

Write on the Wall, or call into our suggestion line: 907-543-6600 or send an email to ykhcproject@ykhc.org.



Spotlight: Behavioral Health**Suicide is Not Normal**

No matter how it feels here in the YK Delta, suicide is not normal. Being close to a person who takes their own life gives us a different perspective—one where our emotions can be overwhelming and our perspective easily altered. It is necessary to keep a healthy outlook, no matter how difficult it may be.

There is a Time to Grieve

For those elders who pass away after having lived a long life, we have sadness to deal with. For those people who die in a tragic event we have shock mixed with the sadness, which makes the grieving more difficult. For those people who take their own life we have confusion and conflicting thoughts, mixed with the shock and the sadness, compounding the grief even further.

There is purpose to grieving. It is to honor the life of the person who passed, to remember them in a healthy way, and to package our emotions appropriately so that we can live well. Grieving is a healthy process.

Avoiding grieving adds to our own struggle. Drinking, self-pity, dwelling on suicide, silence—these actions are not healthy, and take the problem of suicide and allow it to grow into other problems.

Alcohol Causes Problems

To state the obvious—what causes problems is a problem. If alcohol causes a problem, then it's an alcohol problem. If we dismiss the alcohol use, or downplay its role by not taking it seriously, then we allow the problem to grow.

Many people who attempt to kill themselves don't look as though they have any depression or obvious risk factors. Their attempt is done while under the influence of alcohol. When they realize afterward what they have done, they are grateful that they are alive, and wish they hadn't done it. But if the drinking isn't addressed, then the problem grows.

We all know that small problems become big ones if not given our attention. An open wound, bed bugs, debt and plumbing to name a few. But also alcoholism. If suicidal thoughts or behaviors enter into a person's drinking, just once, the drinking problem needs to be clearly identified as life-threatening.

We Get Better at What We Practice

The principle of “practice makes perfect” holds true for healthy ways of living, as well as unhealthy ways of living. The more a person practices dealing with sadness, the more emotion-

ally healthy they become (a great example is Pixar's movie “Inside Out”). The more a person practices sobriety, the more improved their relationships become. The more a person practices suicide, the more likely they are to kill themselves.

Every Living Thing has a Survival Instinct

When hunting caribou or moose, if the bullet doesn't immediately drop the animal, then it immediately goes on a run in an attempt to get away from the danger. When pulling a fish out of the river, it flops in a desperate effort to get back into the water in order to live. Even when swatting at a mosquito, it flies away in an effort to not die. To go against that survival instinct is as close to “not being in your right mind” as there is.

We are Only as Sick as the Secrets We Keep

The start of change is the conversation. What one person thinks may not be what another perspective can offer. If the conversation doesn't start, however, then all we are left with is just our own thoughts. The hard truth is, our best thinking got us here. Our best thinking, in isolation, fuels the problem—because it continues the secrets. Quiet people, introverts and those who need time alone, need to make an extra effort to reach out to trusted people. Those people whose hurt is profound need to talk openly in a safe environment. Honesty with others is powerful.

Sometimes we don't trust our hurt and our pain, or those things that we wish were not a problem (but we know that they are), with others. The confidentiality that professionals can offer is a great place to start.

We need each other. And in honest and respectful communication, there is real hope. Reach out to each other. Reach out to us.



New PATC Facility Expands Treatment Opportunities

The new PATC Building is expected to open this fall—rebuilt after a fire destroyed the framework under construction more than a year ago.

Phillips Ayagnirvik Treatment Center was originally built in the early 1970s. At the time, it was owned and operated by the City of Bethel. In 1984 the “new” residential side was built. We have been in continual operation since. The mission of PATC is to eliminate alcohol and other drug abuse in our region through outreach, education, counseling opportunities, community development, positive role modeling and individualized support systems.

During the history of the program, we have seen hundreds of people come through the doors. All of these people had serious problems with alcohol. Many of them are now sober, and leading productive, healthy lives.

PATC operates an ASAM Level III.3 treatment facility with 16 beds for both men and women. We have an “open enrollment” model, with an average six-week length of stay. The program is fully capable of treatment for co-occurring mental health issues along with all kinds of substance abuse and addiction.

We host AA meetings several nights a week and all team members are committed to helping others.

Our Therapeutic Court is a collaborative effort of YKHC/BH/PATC, the Bethel District Court, the District Attorney, Public Defender Agency and Probation Department. The program provides outpatient alcohol and drug treatment, intensive



psychotherapy, close monitoring of abstinence, case management and community services, and weekly review of treatment progress in front of the presiding judge.

The new PATC facility will have expanded room not only for residential services with both men’s and women’s wings, but also outpatient services and the therapeutic court and overall better service for those seeking treatment.

New Features

- Three Group Therapy Rooms
- Half Court Basketball/ Large Room
- Exercise Room
- Crafts Room
- Family Visitation Room
- Video Conferencing Equipment

Program Improvements

- Effective, Evidence Based Treatment
- Matrix Model
- Motivational Interviewing
- Cognitive Behavioral Therapy
- Moral Recognition Therapy
- Trauma Informed Therapy
- Traditional Modalities

We will also be able to offer treatment for opioid addiction, which is a growing problem in our communities and region. Medication Adjunct Therapy, combined with more traditional treatments, is now considered “Best Practice” for opioid addiction.

The Healing Center comes after many years of work from the YKHC Board of Directors, staff and administration who had a vision of a new place for people to help themselves recover from the devastation of alcohol and drugs and mental health issues. Thanks to all the people who have supported the funding and construction of the new building.

HEALTH AIDES, from p. 3

village when he responded to the patient. The patient was in terrible pain and Jeremy did his best to manage the pain and keep the patient calm until the medevac arrived. That same day right before this incident Jeremy assisted a patient who was extremely dehydrated and inserted an IV successfully and the patient felt better after they received fluids.

Jeremy didn’t go home for lunch or dinner that day. He had worked a long 14.5 hours to take care of patients. He worked tirelessly throughout the day without going home or taking a break to eat. He did not complain and continued to have a positive attitude towards the patients and the ER staff. Thank you Jeremy for all the effort you put in to care for the people in Marshall. YKHC and the Community of Marshall are fortunate to have you serve our people. Keep up the great work!

Behavioral Health Village Services

Our primary goal is to provide excellent service to clients in their home communities. However, limited staff and our large coverage area challenge our effectiveness.

To counter these obstacles, video teleconference (VTC) equipment was installed in many village clinics—and we have been successfully providing telehealth service—but this also has its limitations.

Many of our clinics either have inoperable/outdated VTC equipment or none at all. The recent purchase of \$50,000 worth of telehealth equipment will allow us to reach underserved populations and provide a broader range of telehealth capability, in turn promoting healthy individuals, families, and communities.

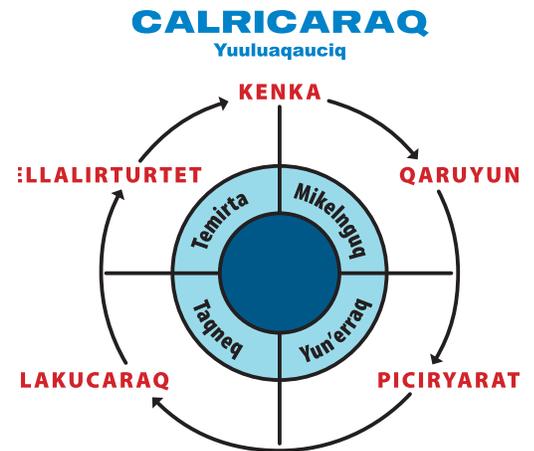
Additionally, this purchase will allow us to stay within Medicaid guidelines and mitigate client travel, saving state money.

Village Services is staffed with eight Behavioral Health Aides (BHAs) and two clinicians. The grant that funds our department allows us to have a total of 14 BHAs. But it's been hard to fill vacant BHA positions. The large caseloads that our clinical associates maintain, coupled with the vicissitudes associated with this line of work, can lead to burnout and ultimately resignation.

Despite the issues, our current BHAs have shown diligence and devotion in fulfilling the roles and duties of their jobs, focusing on substance-related legal involvement and providing services that are evidence-based best practices.

Preventative Services

Calricaraq— Involving the Community In Cultural Healing



YKHC’s Preventative Services Department provides traditional, community-based Calricaraq (Indigenous Healthy Living Promotion & Practices) in communities throughout the region in partnership with regional, tribal and local organizations. These mental health services are available for all YK Delta communities upon request.

Calricaraq activities are provided with Elders’ guidance and are designed to meet community needs, such as: response to a crisis or teaching traditional coping and life skills to schoolchildren. Three-day gatherings may be held in a community at the invitation of the local Tribal Council or school district. All activities are designed for delivery in culturally aligned care systems, ensuring safety and respect for the wellbeing of participants.

Calricaraq addresses three primary areas, including: historical trauma and mental health challenges, Qaruyun (traditional healing), and Calricaraq (the cycle of life).

Historical Trauma and Mental Health Challenges: This work focuses on negative impacts resulting from the loss of culture, language, identity, spirituality, parenting skills, autonomy, and self control. It provides us with an understanding of lasting dysfunction and hurtful behaviors, continuing to impact our families and communities. Descendants of those originally traumatized by historical events can now be traumatized by patterns that are recycled in families and communities today. Understanding where our health and mental health challenges come from moves us to address these issues through our own cultural approaches.

Qaruyun/Traditional Healing: Qaruyun is our Yup’ik medicine that restores balance. Qaruyun helps us understand the process of healing and teaches life skills to cope with challenges and trauma. Storytelling, and utilizing cultural activities to process our history, across generations and within our lifetimes, allows us to move beyond trauma.

Calricaraq/Cycle of Life: Yup’ik ancestral wisdom, values, and teachings provide appropriate and healthy life skills. Within our indigenous worldview are teachings and values that provide skills for healthy living. Reinforcing what we already know as Yup’ik people, combined with restoring the values of our cultural identity, promotes healthy living.

For more information, contact YKHC BH Preventative Services office at (907) 543-6741

Yukon-Kuskokwim Health Corporation
P.O. Box 528
Bethel, Alaska 99559
907-543-6000

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EMS STRONG CALLED TO CARE

**EMERGENCY MEDICAL SERVICES WEEK
MAY 15-21 2016**

*THANK YOU for the late nights and
early mornings, dedicating your time
and energy to caring for others. You
are a vital link in the EMS system.*

Quyan'aq vaa

From The YKHC Injury Control & EMS Department

