



Yukon-Kuskokwim Ayagnirvik Healing Center Opens



On October 18, 2016, staff and patients moved into the new Yukon-Kuskokwim Ayagnirvik Healing Center (formerly named the Phillips Ayagnirvik Treatment Center). This photo, taken October 10 outside the facility's gymnasium, shows construction crews placing the final touches on paint and flooring. A formal ceremony honoring the building's opening is planned for November.

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FYI

Travel Advisory

The U.S. Department of Transportation (DOT) has announced that it is issuing an emergency order to ban all Samsung Galaxy Note7 smartphone devices from air transportation in the United States.

Individuals who own or possess a Samsung Galaxy Note7 device may not transport the device on their person, in carry-on baggage, or in checked baggage on flights to, from, or within the United States. **This prohibition includes all Samsung Galaxy Note7 devices.** The phones also cannot be shipped as air cargo.

PJCP construction is now underway

Work on driving pilings will continue through December. There will be increased noise and heavy equipment traffic during this time. Crews are expected to be working 10 hours a day, six days a week.

We will do our best to minimize disruption to patients, employees, and neighbors. Thank you for your patience.

RESOURCES

YKHC main switchboard543-6000
Toll Free 1-800-478-3321

APPOINTMENTS

Outpatient Clinics (Yukon, Kusko, Delta) 543-6442
Dental543-6229
Optometry543-6336
Audiology.....543-6466

SUBREGIONAL CLINICS

Aniak.....675-4556
Emmonak949-3500
St. Mary's.....438-3500
Toksook Bay427-3500
Hooper Bay758-3500

SERVICES

Inpatient (North Wing)543-6330
Pharmacy.....543-6382
Physical Therapy543-6342
Women's Health543-6296
Irnivik Birthing Center.....543-6346
Behavioral Health Services.....543-6100
Substance Abuse Treatment.....543-6730
Sobering Center.....543-6830
Developmental Disabilities.....543-2762
Emergency Room543-6395
Office of Environmental Health & Engineering
Injury Control & EMS543-6420

ADMINISTRATION & SUPPORT

Administration.....543-6020
Human Resources543-6060
Public Relations.....543-6013
Travel Management.....543-6360
Facilities & Maintenance543-6203

BETHEL & REGIONAL RESOURCES

Public Health Nursing543-2110
Tundra Women's Shelter543-3444
Alaska State Troopers..... 1-800-764-5525

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E-mail: publicrelations@ykhc.org.

Deadline is the 10th of the month, or the preceding Friday if the 10th is on a weekend, for publication on the first of the following month.

The Messenger is also available for download on our website at www.ykhc.org/messenger. Please ask permission to reprint articles or pictures.

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Message from the President/CEO

Setting the Foundation for the Dr. Paul John Calriciraq Project



Dan Winkelman, President/CEO

If you are a Bethel resident or have visited in the last few weeks, you may have noticed our new construction area north of the hospital. This is the future site of the Paul John Calriciraq Project (PJCP), which is a joint-venture construction project with the Indian Health Service (IHS) to build a new primary care center, renovate the existing hospital and build new staff housing. It is not a grant-funded program. Instead, it requires YKHC to use its own funds to build the new facilities, and then IHS will request additional staffing monies from Congress for the new facilities.

Since signing the partnership agreement with the IHS in March, we have purposely fast-tracked the PJCP. Fast-tracking the project means it will be constructed sooner so we can provide services to our customers at an earlier time. To accomplish that, we have been simultaneously working on design and estimation with our architectural, engineering, mechanical, electrical and our general contractor teams, while at the same time completing the last major piece of financing for the project. We expect our financing to be secured by the end of this calendar year.

Remember, the PJCP is not a “go” until our financing is secured. However, the fast-track approach necessitated YKHC to begin site preparation and driving piling early. In a normal project, financing is secured, design is completed, then construction begins. If YKHC elected to follow this traditional method, it would delay the PJCP at least one year and add an additional year to its construction time—in part, due to rural Alaska’s summer-only barge schedules. This significant delay would add risk and result in a substantial increase to the cost of the project. Instead, YKHC chose to accept the relatively low risk of fronting the cost of driving piling early in order to realize the very large gain of significantly shortening the total construction time and thereby reducing the cost of the project by many millions of dollars.

Stay tuned to the Messenger for more PJCP updates.

Quyana,



CEO Dan Winkelman with construction contractor ASKW/Davis LLC Project Managers Jerry Bryant and James Murrell.

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

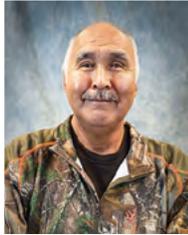


Billy Jean Stewart Kalskag



Betty Turner Lower Kalskag

Unit 4



Phillip K. Peter, Sr Akiachak



Mildred Evan Akiachak

Unit 5



Stan Hoffman, Sr. Bethel



Gloria Simeon Bethel



Hugh Snyder Bethel



Chris Larson Napaskiak

Unit 6



Esai Twitchell, Jr. Kasigluk

Unit 7

Joshua Cleveland, Unit 10 Board Member, is an interim representative for Unit 7.

Unit 8



James Charlie, Sr. Toksook Bay



James Sipary Toksook Bay

Unit 9



Patrick Tall Chevak

Mary Ayunerak, Unit 1 Board Member, is an interim representative for Unit 9.

Unit 10



Joshua Cleveland Quinhagak

Unit 11



Marvin Deacon Grayling

Deb White, HR Director

Please welcome Deborah White as the YKHC Director of Human Resources. Deb has lived in Alaska almost seven years and has been in Bethel for three



Deb White

years. Before joining us, Deb worked at AVCP as the Director of Human Resources and, prior to that, as the Director of Human Resources at Maniilaq Association in Kotzebue.

She holds Bachelor's and Master's degrees in Human Resources Management and has more than 18 years of Human Resource management experience. Deb said she is excited to be a member of the YKHC family and to get back into the healthcare field.

I would also like to thank Larry McGuire for coming to assist in Human Resources leadership over the last several months on an interim basis. His leadership has been invaluable.

—Rahnia Boyer, Vice President Village Health

Peri Sanders, Professional Trainer

We are excited to announce our newest member of the YKHC AHEC department, Peri Sanders.



Peri Sanders

Peri has accepted the position as Professional Trainer. In this role Peri will design, develop and conduct training programs for YKHC. This will include the Compass Program, NEO and HealthStream. We are happy to have Peri on board as she brings new ideas, talent and enthusiasm to this dynamic position.

—Gregory Navitsky, YK AHEC Dir.

November is National Diabetes Month

November is National Diabetes Month and November 14 is World Diabetes Day. This is the month to focus attention on diabetes and the millions of people affected by it. Join the YKHC Diabetes Prevention and Control Department and countless others in raising awareness about this public health crisis.

Did you know?

- Alaska Natives and American Indians are 2.2 times more likely to have diabetes compared to non-Hispanic whites
- There has been a 68 percent increase in diabetes from 1994 to 2004 in American Indian and Alaska Native youth aged 15–19
- 30 percent of American Indians and Alaska Natives have prediabetes
- 700 people in the YK Delta have been diagnosed with diabetes
- 2,500 people in the YK Delta have been diagnosed with prediabetes and are at risk for developing diabetes

How can you help? Participate in this month's upcoming events—

Visit a booth for a free screening, education, and giveaways

- November 3, 11–2 YKHC Hospital Main Lobby
- November 10, 11–2 YKHC Hospital Main Lobby
- November 10, 11–2 KUC
- November 14, 11–2 YKHC Hospital Main Lobby
- November 14, 11–2 AC Value Center 135 Ridgecrest Street in Bethel
- November 17, 11–2 YKHC Hospital Main Lobby

Go BLUE for diabetes

On November 14 wear your favorite blue shirt to promote awareness.

Eat diabetes friendly

This means making sure to boost your intake of lean proteins, fruits, vegetables, and whole grains while avoiding added sugars and fat from sugary drinks and processed foods.

There will be a reduced price diabetes friendly meal in the YKHC cafeteria on November 14 if you're wearing BLUE.

Grocery Store Tour

See how you can increase your fruit and vegetable intake by participating in this free tour.

AC Value Center 135 Ridgecrest Street in Bethel, November 14 from 11 a.m.–2 p.m.

Make an appointment

Encourage your family and friends with diabetes to make their annual appointment. Call the Diabetes Prevention and Control Department at 543-6133 to schedule an annual exam.

Recipe of the Month

Tundra Cranberry & Apple Cornbread Stuffing

Ingredients

- ½ cup oil
- 3 celery stalks, chopped
- 1 yellow onion, chopped
- 6 cups crumbled corn bread
- 6 cups whole wheat bread cubes
- 2 cups chopped unpeeled Granny Smith apples
- 1½ cups tundra cranberries
- ¼ cup honey
- 2 teaspoons dried sage leaves
- 1 teaspoon dried thyme leaves
- ½ teaspoon salt
- ½ teaspoon ground black pepper
- 2 cups chicken broth



Instructions

1. In a large pan heat oil over medium heat. Cook and stir celery and onion about 5 minutes or till tender. Remove from heat.
2. Stir corn bread, bread cubes, apples, cranberries, honey, sage, thyme, salt, and pepper into onion mixture. Drizzle with enough broth to moisten, tossing lightly to combine.
3. Spoon stuffing into a 3-quart baking dish (13x9x2-inch). Bake, covered, at 325 degree F for 35 minutes. Uncover; bake for 15 to 20 minutes more or till heated through and to desired moistness.

Recipe adapted from midwestliving.com

Image source tasteofhome.com

Diabetes facts from the ADA at www.diabetes.org

Join YKHC In the Great American Smoke Out and Great American Spit Out!

On November 17, join with people across the nation as they participate in the Great American Smoke-out and begin a tobacco-free life.

Quitting tobacco and staying tobacco free are not easy choices. Show your support for others along this journey and share tips on how you stay tobacco free via social media and you can be entered to win a prize.

Throughout the month of November, if you post a selfie or photo celebrating a tobacco free lifestyle and use the hashtag **#cravetheworldnottobacco** and post your pledge to quit tobacco or stay tobacco free, you will be entered to win a FitBit. Help inspire others on this journey by sharing the positive things in life you crave instead of tobacco. The contest will close November 30, and the winner will be announced on YKHC's Facebook page December 1.

On November 17, you can stop by the main hospital lobby to take a selfie at our selfie station and do a fun activity to help support your goal of being tobacco-free.

One in four non-smokers in the U.S. are still exposed to secondhand smoke. About 2 out of every 5 children are exposed to secondhand smoke.

Source: <http://www.cdc.gov/vitalsigns/pdf/2015-02-vitalsigns.pdf>

More Alaskans die as a result of tobacco use than from infectious disease, alcohol, car accidents, and suicide combined.

Source: dhss.alaska.gov/dph/Chronic/Documents/Tobacco/PDF/FY14_TPC_AncMatsu.pdf

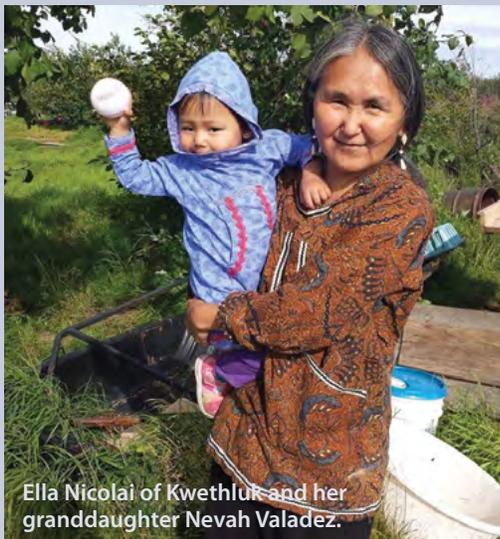
Even if you don't swallow your tobacco spit, from iqmiq or commercial chew, you are still at risk of various forms of cancer such as mouth, tongue, cheek and gum cancer.

Source: www.cdc.gov/tobacco/data_statistics/fact_sheets/smokeless/health_effects/index.htm

Smokeless tobacco use, including iqmiq, can cause early delivery and stillbirth when used during pregnancy.

Source: www.cancer.org/cancer/cancercauses/tobaccocancer/smokeless-tobacco

Your Flu Vaccine Protects Me



Ella Nicolai of Kwethluk and her granddaughter Nevah Valadez.

My Flu Vaccine Protects You

The flu vaccine is safe. You can't get the flu from a flu vaccine. Pneumonia and flu are a leading cause of death among Native elders. Even healthy people can get the flu, and it can be serious. Everyone 6 months and older should get a flu vaccine.

Please get a flu vaccine each year to protect you and your family.

Want to quit tobacco?

If you would like to make a positive change in your life and stop using tobacco, YKHC's Tobacco Prevention Dept. is available to help. Our Tobacco Cessation Counselors **Henry George (left)** and **Moses Ayagalria (right)** are both available from 8 a.m. to 5 p.m. Monday through Friday to help you take advantage of our services.



The program offers counseling support for quitting tobacco as well as optional Nicotine Replacement Therapies including nicotine gum, nicotine patches, nicotine lozenges and prescription aids with your provider's approval. Counseling services are available in both Yup'ik and English, and you can enroll by walking in, asking your provider to make a referral, or calling 907-543-6312 or 1-800-478-3321 ext. 6312.

Spotlight on Process Improvement

YKHC cultivates culture of process improvement

By YKHC Public Relations

In the March 2016 Messenger, President & CEO Dan Winkelman announced YKHC's "journey towards high reliability." A "high reliability" healthcare organization aims to enrich customer experience by:

- Providing the highest quality patient care
- Delivering reliable care
- Offering the lowest cost of healthcare
- Ensuring patient safety
- Attaining high morale for both employees and patients

In order to achieve these, YKHC has begun to cultivate a culture of process improvement throughout the organization by using a method called "Lean." Lean production was used by Toyota automotive to improve and assure high levels of quality. As YKHC's President/CEO said in March, Lean has been adapted by various industries, including healthcare.

The Lean process focuses on how efficiently resources are being used and asks employees what value is being added for the customer in every step of the process (Lawal, et. al.). From front-line service providers to senior leadership, Lean builds new habits, new skills, and a new attitude throughout an organization (Safer HealthCare). YKHC is using A3 Problem Solving, one of the tools of the Lean approach, to begin process improvement.

The A3 Problem Solving eliminates three common mistakes made when addressing a problem:

1. Assuming to know the problem, without seeing what is actually happening.
2. Assuming to know how to fix a problem, without finding the cause of it.
3. Assuming to know the cause of a problem, without confirming it.

This collaborative problem solving method drives employees to recognize the root cause of problems, report them, and offer suggestions for improvement to managers—with the ultimate goal of improving patient experience.

"This process is not top-down, but really it is bottom-up," Jacqueline Marcus-Ledford, YKHC's Performance Improvement Administrator, said. "It's about empowering people and engaging staff, who truly know what the problems



Patient Care Services Administrator Patty Smith and Diagnostic Imaging Manager Brent Lautenschlager model the progress Brent's department has made on his visual board and improving chest x-ray quality.

are, to feel safe to identify problems and offer recommendations to fix them."

So far, YKHC has trained 76 employees in A3 Problem Solving. As the initiative continues, YKHC will train additional employees as well as incorporate the use of other Lean tools, such as Visual Boards and Daily Management.

Visual Boards offer transparency among staff and patients, who will be able to track a department's problem solving, improvement efforts, and goal attainment. Though plans are in place to incorporate Visual Boards throughout YKHC, five model areas have been selected for the initial round of implementation: Diagnostic Imaging, Lab, Finance, Subregional Clinics, and Obstetrics.

"The final piece is the Daily Management," continued Marcus-Ledford. "This is where we are focused on engaging staff daily and weekly in the things we can do to move our metrics, in order to attain the goal we set for ourselves—which is to serve our patients and the community, ensuring those services are safe and of the highest quality."

"We recognize that we can always do better," Winkelman said in March. "YKHC is nevertheless beginning to implement the three building blocks of high reliability by focusing on our quality, safety and process improvement."

References:

Lawal, A. K., et. al. (2014). *Lean management in health care: definition, concepts, methodology and effects reported (systematic review protocol)*. *Systematic Reviews*, 3, 103. <http://doi.org/10.1186/2046-4053-3-103>

Safer HealthCare. www.saferhealthcare.com/lean/process-improvement-and-lean-in-healthcare. October 05, 2016.

People Making it Work

Jaye Marcus-Ledford— Monitoring the Quality of Patient Care

“I have been reading books to try to understand the different cultural values, to learn about the different seasons, about subsistence, how fish are cut, dried, and smoked. Anyone who will teach me anything, I’ve loved.”



Jacqueline “Jaye” Marcus-Ledford is new to YKHC, but she is immersing herself into her new community and region. Jaye was born and raised in Cheektowaga, New York, a suburb of Buffalo. In the late 1970s, her father was transferred to Arizona. “It was a huge difference going from a small town in New York to Arizona,” Jaye said. “It was hot, flat, and sunny. I dressed differently, I talked differently.” But being surrounded by a new place and culture didn’t hold Jaye back.

Jaye attended Northern Arizona University where she studied sociology with an emphasis in social work. She would go on to get her Master’s degree from Arizona State University in social work with an emphasis in program administration and community planning. She has worked in the healthcare field for 25 years, particularly focused on quality improvement in healthcare since 1996.

“After working in hospital discharge planning, home health hospice, case management, and other areas of healthcare, I was pulled into performance improvement,” said Jaye. “I began doing quality audits, root cause analysis of problems, and use of Lean tools for problem solving.”

When a recruiter invited Jaye to Bethel for a site visit at YKHC, she was intrigued by the information she found about the area, the background of the organization and the culture of southwest Alaska. “When I got off the plane in the cold Bethel evening, stood outside, and looked around, all I could think was ‘this is so beautiful.’ The air was so crisp and clean.” By the end of her site visit, Jaye and her husband were convinced they wanted to be part of the YKHC family.

see **JAYE PROFILE**, p. 8

Brent Lautenschlager— Improving Efficiency in Diagnostic Imaging



Brent Lautenschlager was born and raised in Iowa. He served as a photographer in the U.S. Navy from 1992 to 1995 and tried his hand at various careers before settling into healthcare 15 years ago.

“I have used healthcare a lot in my life,” Brent said. “Being a patient, I have seen a lot of good and bad health care delivered and felt I could make a difference.”

In 2001, Brent enrolled in a radiology program. After graduating, he worked as a radiologic technologist at a Des Moines area hospital. During nights and weekends, Brent worked as part of the hospital’s medical team taking patient x-rays. After five years in the technologist position, and feeling ready to explore his career and the world, he learned of an opportunity to teach YKHC health aides radiologic sciences.

Brent arrived in Bethel in 2009, where he began in YKHC’s Diagnostic Imaging department as a Clinical Instructor. He taught radiation safety, patient care, and general radiology (such as chest and spine x-rays) to health aides at YKHC’s subregional clinics. Reflecting on his effort to help build the Health Aides’ confidence in radiology basics, Brent said, “They taught me as much as I taught them. I learned so much about local culture, language, and beliefs.”

Nearing his eighth year at YKHC, Brent is now the Diagnostic Imaging Manager. He still teaches health aides, but also runs the mammography program with Breast & Cervical Program Director Roxanna Anderson and oversees a team of eight staff. The Diagnostic Imaging department offers patients local standard x-rays, computed tomography (an advanced type of radiation imaging), ultrasound (primarily for expectant mothers), mammography (for breast cancer screening), and limited fluoroscopy (a type of live x-ray).

“What has been most rewarding is seeing the difference we

see **BRENT PROFILE**, p. 9

JAYE PROFILE, from p. 7

In April 2016, Jaye joined the organization as the Performance Improvement Administrator. Her team is responsible for ensuring that YKHC meets federal, state, and Joint Commission requirements. These requirements include access to care, quality and safety, and monitoring health indicators (like immunization rates, testing for Diabetes, and more).

By the time Jaye arrived in Bethel, YKHC had begun to incorporate Lean into the way it does work. “Lean is a philosophy that started in manufacturing,” explained Jaye. “It’s a method of looking at and solving problems.”

“Lean philosophy focuses on patient safety and quality,” Jaye said. “We, as an organization, focus on patient safety and quality. They are very important to us. They are important to our regulators. It all ties together.”

As YKHC adopts the Lean tools for problem-solving and performance improvement (See ‘YKHC cultivates culture’ on page 6), Jaye’s experience with the methods, her enthusiasm and appreciation for the region and people will help carry the company to improve the customer experience for patients and employees.

There are three Lean tools being implemented throughout the organization: A3 Problem Solving, Visual Boards, and Daily Management.

Jaye and her team continue to oversee YKHC’s various performance measures and standardization of work (policies, procedures, and how to’s for various positions), in addition to the ongoing implementation of Lean. Though new to YKHC, Jaye’s experience in Lean has prepared her to hit the ground running.



Jaye Marcus-Ledford answers questions about the Diagnostic Imaging (DI) visual board to DI Support Technician Nate David.

Health Aide of the Month

September, 2016 — Faith Attatayuk, CHA III from Akiak

Faith was recognized by CEO Dan Winkelman and Dr. Klejka for doing an excellent job managing a patient and assisting with the delivery of a healthy baby in September. Although YKHC discourage village deliveries for the health of mother and baby, Dr. Klejka had nothing but great things to say about Faith. Faith has been the only health aide in Akiak for more than a year. She has managed to keep up with all of the daily duties at the clinic such as maintaining quality assurance forms and sending immunization and medical supply orders on time while tending to the on-call phone.

As the only Health Aide on-call for over a year, she has proven her dedication and willingness to provide emergency care to anyone in need.

Akiak is a very busy clinic with a growing population and Faith works tirelessly; she is the rock of the clinic. The community of Akiak is very fortunate to have Faith as a caring, dedicated, and reliable Community Health Aide Provider.

Quyana, Faith, on behalf of YKHC and CHAP, keep up the great work!



Faith Attatayuk, Akiak.

BRENT PROFILE, from p. 7

make in peoples' lives every day," said Brent. "It is those 15 minutes after an appointment, when I get a smile from a patient, that really serves as my bread and butter."

At an Association of Medical Imaging Management conference, Brent was introduced to Lean Six Sigma (a basic workshop about root-cause problem analysis, waste reduction, and quality improvement). So when President & CEO Dan Winkelman announced in March 2016 that YKHC would incorporate Lean into the organization's daily management, Brent had a little bit of a head start.

His official training in Lean philosophy was at an A3 problem-solving workshop in August 2016. "A3 is the size of the paper we use to do problem solving," Brent explained. "One half of the sheet is used to identify the problem and the other half is where we map out the solution, identify steps needed, how to review it, and test it."

The benefit of this process, Brent says, is to identify and break down a problem into doable parts. "The biggest misconception is we often believe we know what the solution to a problem is before we've broken down the problem," Brent said. "Don't try to solve a problem before you actually understand what it is."

Lean in action

Brent chose to focus on measuring and improving the department's chest x-ray quality. Most commonly, chest x-rays are taken to determine the cause of a patient's cough or fever, to screen for tuberculosis, and sometimes before operations. A good quality exam, he described, would include good inspiration in the lungs, all margins of the lung field would be present, minimal rotation of the body, good history on the exam, a technology marker identifying who took the image, and appropriate exposure of the x-ray.

Brent believed a quality challenge might be stemming from subregional clinics, where x-rays are done much less frequently and staff may need continuing education. "I had a preconceived notion about what was wrong," Brent said. "But after reviewing data, it showed that Bethel had a larger margin for improving x-ray quality."

Beginning in October, as part of his first A3 problem-solving solution, Brent began spending 20 minutes a day evaluating 10 chest x-rays from the previous day. On average the Bethel hospital does 25 chest x-rays a day. Before October, Brent found around 78 percent of chest x-rays conducted at the Bethel hospital were good quality exams. However, after implementing 20 minutes a day of evaluating quality, the department has consistently exceeded an 85 percent good-quality exam goal.



Brent Lautenschlager offers an overview of the Diagnostic Imaging visual board during Lean training with several of YKHC's managers.

"I felt vulnerable at first," Brent said. "This process puts your problems and recommended solutions visible

to staff, other departments, and administration. But it gives me a more real time snapshot of how we are doing. And I can work with my team daily to offer coaching and management."

The quality exam improvement ensures that a patient receives timely care, allows for more patients to be seen (due to less additional time taking another x-ray), and saves the organization time and money.

"All of this work relates to the patient: how we care for them, how we are able to manage ourselves to be more productive, waste less where possible," Brent continued. "And to, most importantly, improve their experience. Sometimes the Lean process is stressful because I hate to admit failure. But some of this work is going to show a certain amount of not achieving a goal. That just drives me to work harder, to achieve the goal, and work with my team to achieve excellent health for our patients."

Airport Shuttle Schedule

RT #	DEPART HOSPITAL	DROP OFF YUTE	DROP OFF RAVN	DROP OFF GRANT	PICK UP YUTE	PICK UP RAVN	PICK UP GRANT	RETURN TO HOSPITAL
1	10:00 AM	10:08 AM	10:16 AM	10:24 AM	10:30 AM	10:38 AM	10:46 AM	10:55 AM
2	1:00 PM	1:08 PM	1:16 PM	1:24 PM	1:30 PM	1:38 PM	1:46 PM	1:55 PM
3	2:00 PM	2:08 PM	2:16 PM	2:24 PM	2:30 PM	2:38 PM	2:46 PM	2:55 PM
4	4:00 PM	4:08 PM	4:16 PM	4:24 PM	4:30 PM	4:38 PM	4:46 PM	4:55 PM

November 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

Cultural Influence Comments and Suggestions

YKHC's Community and Partner Satisfaction goal for FY 16 was to make sure all regional tribes had an opportunity to comment and contribute to the cultural design and program changes for the PJCP. Here are a few of the comments and suggestions received from our Talking Walls, comment boxes, email and cultural workshops during the past two years.

What Cultural items could we include in the new buildings to represent all YK villages?

Yupik, Cupik, Athabascans are different. We would like to see each group represented as they are. We are different for a reason. We are region-specific on our subsistence traditions. We should embrace it.—Emmonak

Subsistence, jewelery, native dance fans/regalia—Akiak

Crafts, pictures of elders and youth. Seems like in our culture we value more the elders and youth. Elders because they know better than us. Youth is because we can teach them at this age for their future.—Kwethluk

Photos from the past.—Kipnuk

What is unique to your Tribelarea that you would like to be included in the project?

To help the Youth - Teens - Young Adults keep out of "mischief."—Alakanuk

Artifacts from before our time: fish wheels, fish traps, dog teams.—Chuathbaluk

The wilderness that could help teach the young if their willing to listen. —Aniak

More Yup'ik speaking employees.—Napakiak

Learn the knowledge of subsistence way of life and more interpreters.—Quinhagak

If there were 1 or 2 YK cultural things you could wish for in this new facility, what would they be?

Traditional Dancing, Elder gathering like the qasgiq with YK leaders.— Mountain Village

Words of wisdom from elders.—Mekoryuk

Village pictures both past and present for all villages. TV monitors can flash pictures of people doing subsistence from all villages. Pictures to change and be relevant to season. Music, artifacts on display—blackfish trap, Eskimo head dresses, story knives, baskets, kayak, Eskimo dancing periodically.—Toksook Bay

What in your YK culture could we use to help you make you feel more "Welcome"?

Friendly faces, positive attitude, respectful introductions.—Mountain Village

Greeters/Welcomers to ask everyone that enters if they want any assistance, make people feel at home with all visits, and heard.—Kongiganak

How can we make patients trust YKHC to provide quality care?

The patient is the number one priority.—Bethel

Suggestions for room design/things in rooms

Design for kids with Coloring books/crayons, puzzles, water, Injury prevention store, public phone, soda/water machine, tissue, books to read to children, magazines for adults to read.—Nunapitchuk

How would you like your Tribe to influence the project?

Involve our children.—Scammon Bay

Pile driving has begun



PJCP webcam shows the pile driver at work.

Work on driving pilings is starting on the Dr. Paul John Calricaraq Project and will continue through December. There will be increased noise and heavy equipment traffic during this time. Crews are expected to be working for 10 hours a day, six days a week.

We will do our best to minimize disruption to patients, employees, and neighbors. Follow progress at www.ykhc.org/pjcp or by liking YKHC's Facebook page!



Talking Wall Question of the Month:

What will you say about your healthcare in five years?

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

Honoring Nations selects Calriciraq for top award

Mark Anaruk, Calriciraq Program

October 12, YKHC's Calriciraq Program was presented the Honors Award at the National Congress of American Indians (NCAI) convention in Phoenix, Arizona, by the Honoring Nations Program—the Harvard Project on American Indian Economic Development. Calriciraq's application was one of 84 original applications submitted earlier this year and, after several stages of review and a site visit to Hooper Bay in July, Calriciraq was recognized as one of the top six programs in the country.

Attending the award ceremony from YKHC were our Elder, Francis Charlie; Dan Winkelman, President/CEO; Rose Domnick, BH Prevention Director; and Calriciraq staff Jim Chaliak, Sophie Jenkins, and Mark Anaruk.

The Honoring Nations website says, "At the heart of the Honoring Nations award is the principle that tribes themselves hold the key to positive social, political, cultural, and economic prosperity—and that self-governance plays a crucial role in building and sustaining strong, healthy communities. Honored programs serve as important sources of knowledge and inspiration, and our experience shows that they are drawn upon by communities throughout Indian Country and far beyond."

This award is an honor for the Calriciraq Program to receive. It is encouraging that the work of the Calriciraq staff is recognized as a best practice intervention by tribal leaders in Indian Country.

During the award ceremony presentation, Regis Pecos (Cochiti Tribe), Chairman of the Honoring Nations Board of Governors and Co-Director of the New Mexico Leadership Institute, said these programs represent "those throughout Indian country who are guided by our core values, and represent the many who continue the legacy of our forefathers for the sake of our children."

Rose Domnick accepted the award from Andrew Lee, an Honoring Nations Board Member from the Seneca Nation. In his presentation of the award, he said, "Calriciraq participants are becoming better sons, daughters, fathers and mothers, transforming themselves into healthy, strong individuals who are poised to make the world a better place, and is an inspiring story of how traditional lifeways can lead to a more optimistic future."

At the heart of Calriciraq is the understanding of the need to heal ourselves from past experiences and abuses, and then we can begin to re-learn and embrace those ancestral tradi-



Rose Domnick accepts the Honoring Nations award for Calriciraq.

tions that made our Native Culture a source of strength. The Honoring Nations Board of Governors know that our tribal communities have an inner strength, based on these traditions, that can heal us and help us live healthy lives and lead our communities to ways of wellness.

All of the staff at the Calriciraq Program would like to thank our Elders who guide us in everything we do and those of you who have partnered and worked with us to make this program a success. This is an award presented to all of you for the hard work you've done to make Calriciraq a success in your community. Thank you!



Attending the Honoring Nations award ceremony: staff Jim Chaliak, President CEO Dan Winkelman, BH Prevention Director Rose Domnick, Elder Francis Charlie, Sophie Jenkins, and Mark Anaruk.

Kasigluk Health Aides manage outbreak like heros

by Asela Calhoun, BS, MA, PhD, Director, Community Health Aide Program/Education

Congratulations to the team of Health Aides, CHA trainee, and other YKHC providers who came together last month to care for a large number of patients in Kasigluk during a possible foodborne outbreak of mild to severe GI symptoms.

During this emergent situation, Wassilene Andrew, CHA, was on call. She worked from the time she received the first call early morning Friday, Oct. 21, until evening. She then went to Bethel to take her son to ER while Sharon Slim, CHP, worked with patients at the clinic. Immediately afterward, she returned to the village to care for patients throughout the weekend.

Sharon Slim, CHP, was across the river from the clinic site Friday when the calls began to come in; she found a boat ride and went across the “unsafe” river and immediately went to work at the clinic, calling and seeing patients continually. She calmly did her job even though she was alone until Theresa and Wassilene were able to join her.

Theresa Twitchell, CHP, was on PTO that week, but when she arrived at the village late Friday she immediately responded to help Sharon with the growing number of patients. Since Wassilene had been without sleep for close to 24 hours, Theresa volunteered to take over the on-call Friday night so Wassilene could sleep a bit before returning to help with patients.

Renee Keene, CHA Trainee, was working as Office Assistant at the time. Each time we called for updates she was able to

give a detailed report of progress and on-going patient care. Renee was flexible, helping with phones, maintaining patient flow, and supporting the Health Aides and phone triage by Dr. Hodges. Everyone worked under the Providers of YKHC hospital by constantly communicating with them for many hours. According to the SI, not one person complained that they were tired or seeing too many people.

In my view this was a heroic effort by all of the Health Aides and our CHA trainee, that went beyond their required duties. They deserve kudos for their positive, can-do attitude, amazing teamwork, mutual support, and collaboration with all other providers involved. Very few patients had to be flown to Bethel for follow-up; most were treated and discharged from the clinic. The Health Aides also welcomed and collaborated with the OEH and Epidemiology team sent to collect samples and support the outbreak containment on Saturday while the clinic was used as a staging area.

An added note of thanks to Brian Lefferts and Alyssa Gustafson of the Office of Environmental Health who coordinated the support team sent to the clinic on Saturday; Dr Ellen Hodges who conducted phone triage for patients and gave provider oversight support for the Health Aides; Martha Attie, SI, who was available on-call throughout the night and weekend offering support and follow-up as needed; and also Herman Geffe, Field Supervisor, who ensured that needed saline bags, IV supplies, and suppositories were sent to the clinic immediately for patient care.

This is a team to be proud of indeed!

Energize Bethel

On Saturday, October 1, the Diabetes Prevention & Control Department hosted Energize Bethel at Gladys Jung Elementary School. The event included family-oriented health and wellness activity booths that were provided by several YKHC departments and community partners. The event was a non-traditional health fair that engages families in learning about healthy lifestyle activities rather than just receiving educational brochures.

Diabetes Prevention & Control would like to thank our internal partners—Dental, AHEC, Injury Prevention & Control, Public Relations and the McCann Treatment Center; Our external partners—Bethel’s Public Health, UAF Cooperative Extension, the Bethel Fire Department, ANTHC’s Diabetes Program, and the Kuskokwim Learning Academy students who showed up ready to help.

—Ray Petersen, Diabetes Outreach Specialist

