YUKON-KUSKOKWIM HEALTH CORPORATION

REPORT TO THE PEOPLE 2017

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Cover photo: Musk ox at Toksook Bay by Mitchell Forbes.
**Mission:** Working Together to Achieve Excellent Health

**Vision** — Through Native Self-Determination and Culturally Relevant Health Systems, we strive to be the healthiest people.

**Values** — Optimism • Compassion • Pursuit of Excellence • Personal Growth • Importance of Family • Trust • Elder Knowledge
YKHC administers a comprehensive health care delivery system for 50 rural communities in southwest Alaska.

The system includes community clinics, subregional clinics, a regional hospital, dental services, behavioral health services including substance abuse counseling and treatment, health promotion and disease prevention programs, and environmental health services.

YKHC is a Tribal Organization authorized by each of the 58 federally recognized Tribal councils in its service area to negotiate with the Federal Indian Health Service to provide health care services under Title V of the Indian Self-Determination and Education Assistance Act of 1975.

YKHC, along with 22 other Tribal Organizations, is a co-signer to the Alaska Tribal Health Compact, a consortium which secures annual funding agreements with the federal government to provide health care services to Alaska Natives and Native Americans throughout the state.
Elected by the Tribal Councils of each of the 58 federally recognized Tribes in the YKHC service area, the Board of Directors is the chief policy-making body of the corporation, exercising overall control, management and supervision.
YKHC Board Committee Appointments

Executive Board
Esai Twitchell, Jr., Chair
Gloria Simeon, 1st Vice Chair
Marvin Deacon, 2nd Vice Chair
Patrick Tall, Secretary
Geraldine Beans, Treasurer
Chris Larson, Sgt.-At-Arms
Adolph Lewis, 1st Additional Member
John Uttereyuk, 2nd Additional Member
Dan Winkelman, Ex-Officio

Governing Body
Walter Jim, Governing Body Member
Patricia Yaska, Governing Body Member
Bonnie Persson, Governing Body Member
Michael Hunt, Governing Body Member
Mary Ayunerak, Governing Body Member
Wesley Pitka, Governing Body Member
Joshua Cleveland, Governing Body Member
James Sipary, Governing Body Member
James Nicori, Governing Body Member
Phillip Peter, Governing Body Member
Stanley Hoffman, Governing Body Member
Unit 8, Seat B (Vacant)
Gloria Simeon, Executive Board Representative

Standing Committees

By-Law Committee
James Sipary
Joshua Cleveland
Michael Hunt
Adolph Lewis
Phillip Peter
Patricia Yaska
Esai Twitchell, Jr., Ex-Officio
Dan Winkelman, Ex-Officio

Policy Committee
Unit 8, Seat B (Vacant)
John Uttereyuk
Joshua Cleveland
Wesley Pitka
Esai Twitchell, Jr., Ex-Officio
Dan Winkelman, Ex-Officio

Human Studies
Gloria Simeon
Adolph Lewis
Mary Ayunerak
John Uttereyuk
James Nicori
Esai Twitchell, Jr., Ex-Officio

Finance Committee
Geraldine Beans
Stanley Hoffman
Marvin Deacon
Patrick Tall
Michael Hunt
Esai Twitchell, Jr., Ex-Officio
Dan Winkelman, Ex-Officio

Board Appointments

ANHB: Marvin Deacon
Gloria Simeon
ANTHC: Esai Twitchell, Jr
1st: Gloria Simeon
2nd: Dan Winkelman
LifeMed: Esai Twitchell, Jr
Patrick Tall
Dan Winkelman

Special Committees

Corporate Compliance/ Quality Assurance
Mary Ayunerak
Patricia Yaska
Walter Jim
Chris Larson
Esai Twitchell, Jr., Ex-Officio
Dan Winkelman, Ex-Officio

William Morgan Legend Award
Esai Twitchell, Jr.
Gloria Simeon
Marvin Deacon
Dan Winkelman

Compensation Committee
Wesley Pitka
Stanley Hoffman
Phillip Peter
Bonnie Persson
Geraldine Beans
Esai Twitchell, Jr., Ex-Officio
Dan Winkelman, Ex-Officio

Board Branding
Cultural Crafts & Photo Acquisition
Phillip Peter
James Nicori
Chris Larson
Peter Atchak

Traditional Quotes & Signage
Bonnie Persson
James Sipary
Walter Jim
Lotti Jones
Veronica Winkelman

Board members Stan Hoffman, Hugh Snyder and Gloria Simeon at the dedication of the Ayagnirvik Healing Center in January, 2017.
Waqa! 2017 was another great year for YKHC in many different ways. We made numerous service and operational performance improvements throughout the company.

Our continued focus on recruiting and retention of hard-to-fill positions led to an additional five providers in our Bethel outpatient clinics. This increased the availability of appointments by 16% over 2016. Approximately 60% of the customers that call will receive an appointment the same day.

We also had five additional dentists join in August of 2017 which fully staffed our dental clinic and increased appointment availability both in Bethel and across the Delta with increased village visits.

In our member villages, we hired 45 health aides and four new health aide training instructors in 2017. This complemented our 93 dental village visits, 74 medical provider village visits and 26 physical therapy village visits.

Financially, we had another great year. We were again able to have annual raises for employees, make much needed capital equipment purchases and pay for other important investments for our customers.

Lastly, after two years, a team of about 50, made up of members of the Board of Directors, employees, lawyers, bankers, architects, general contractors and other experts, finished securing all short and long term financing for the $340 million Paul John Calricaraq Project.

This public-private partnership is primarily between YKHC, the U.S. Indian Health Service, U.S. Department of Agriculture, Alaska Municipal Bond Bank, Alaska Industrial Development and Export Authority, Raymond James and other private banks. Many thanks to all of our teammates and partners for accomplishing this herculean effort!
Employees of the Quarter

The Senior Leadership Team launched a new employee recognition program in the final quarter of 2017, nominating employees who have gone above and beyond in exemplifying our mission, vision, and values.

Raymond Atchak, Medicaid Enrollment Specialist
Raymond set new benchmarks for excellence in productivity. During the fourth quarter of 2017, the Medicaid Enrollment team helped 663 applicants. Raymond personally helped 250 of those applicants—a small village worth of people who didn’t previously have Medicaid.

Sally Thompson, Charge Nurse on Northwing
When Northwing was without a nurse manager, Sally was willing to step in to the interim role. She took her new responsibilities seriously, immediately beginning work on nursing schedules, approving PTO requests, dealing with payroll issues and attending various cross-division meetings.

Mark Reynolds, Victoria Hardwick, and Judith Burks, Dental
Mark, Victoria, and Judith stepped forward to provide leadership during a time of transition in the Dental Clinic. Their efforts more than doubled the number of staff dentists. They recruited the providers, trained and integrated them into the clinic and region. The Dental Clinic is now able to spend more time traveling to villages, engage in more community outreach, and work towards YKHC’s corporate goal of improving children’s oral health.

Napartet Strategies

As we look to 2018 we will be guided by a new strategic plan. After reviewing the priorities of our 58 tribes that make up YKHC’s membership, our Board of Directors completed our strategic plan.

Our 2018 strategic plan continues to have four strategies, each with accompanying goals. They are:

1. Healthy Community
   • Extend and sustain water and sewer projects
   • Advocate for public funding and new projects

2. Healthy People
   • Improve our children’s oral health
   • Reduce drowning, unintentional injuries and suicides
   • Reduce tobacco use

3. Care Delivery
   • Implement a new model of care
   • Successfully complete the Paul John Calricaraq Project
   • Strengthen village health programs
   • Focus on quality
   • Improve patient experience

4. Corporate Capability & Culture
   • Improve recruitment and staffing
   • Shape culture to support high reliability
   • Develop a strong Alaska Native workforce
   • Continue to improve cash flow

It is through these four strategies that YKHC will work to achieve its mission, vision and values. Quyana.

Sincerely,

Esai Twitchell, Jr.,
Board Chair

Dan Winkelman,
President & CEO
Delegates from throughout the YK Delta came to Bethel April 5 & 6 for the 24th Tribal Unity Gathering.

Along with setting healthcare priorities for the coming year, delegates and guests were shuttled to the Dr. Paul John Calricaraq Project construction site for a dedication ceremony, officially blessing the inauguration of the $300 million hospital expansion and clinic construction project.

The theme, “Elluarillerkamtenun Calirrlairarluta: Continually Working to Improve Healthcare,” highlighted YKHC’s increased focus on improving the customer experience—from developing an integrated model of care to constructing a new state-of-the-art facility that will serve the region for years to come.

YKHC’s leadership provided updates on the programs and initiatives supporting this effort. President and CEO Dan Winkelman discussed the company’s adoption of Napartet Strategies to guide and concentrate the vision of becoming the healthiest people.

The strategies focus on four areas: Healthy Community for environmental concerns like water-sewer projects and solid waste management; Healthy People, emphasizing prevention efforts to curtail tobacco use and dental disease; Care Delivery for health clinics and hospital programs; and Corporate Capability and Culture for the health of the company itself, without which the rest of it would not be possible.

Vice President of Hospital Services Jim Sweeney gave a presentation on how efforts to improve appointment availability and a new model of care will impact the Care Delivery component. Teams of care managers and care manager assistants will work with patients and their providers to ensure appointments meet the patient’s expectations and address overall health as well as specific complaints.

Vice President of Village Health and Workforce Development Rahnia Boyer, with members of her team, provided an update on the Community Health Aide Program and explained YKHC’s new policy of having a totally tobacco-free campus starting next year.
Putting these efforts into perspective: Dr. Joe Klejka’s Health Status Scorecard update points to cancer as the number one killer in the region, with lung cancer still the biggest of them. Other leading causes of death include heart disease and injuries.

Taking the presentations into account, delegates—tribal council representatives from communities throughout the region—voted to prioritize focus on training and hiring more health aides, better evaluation of patients before discharge and improving cancer screening.

Top 3 Priorities

**Overall for 2017/2018**
1. Increase number of Health Aides & Health Aide Floats
2. Better evaluation of patients before discharge
3. Improve cancer screening
Dr. Paul John Calricaraq Project

Dedication

Joined by tribal delegates at the 24th annual Tribal Unity Gathering in Bethel, YKHC leadership dedicated the construction site of the Paul John Calricaraq Project April 6, 2017. President & CEO Dan Winkelman, Board Chair Esai Twitchell, Jr. and Honorary Board Member James Charlie, Sr. led the dedication of the $300 million project, which will expand and improve health care services.

The project is being built under the Indian Health Service’s Joint Venture Construction Program, which provides funding for additional staff as long as the organization finances the construction. The final pieces of the financing packages have fallen into place and the dedication ceremony on April 5 celebrated the “go-ahead” for construction of the new clinic and hospital renovation.

After the ceremony at the site, project funders and partners congratulated YKHC Board and leadership and expressed their excitement and enthusiasm in being able to be a part of the project.

Tribal delegates and guests sign interior sheetrock panels that will be built into the structure.

January: Installed piling, thermoprobes, thermistors.

May: 1,000 tons of steel and staff housing modules arrived in Bethel.

September: AVEC temporary power; curtain wall framing; air handlers in penthouse.
Calricaraq and Clinic Construction

To represent the region’s culture and identity, the clinic and hospital environment will:

- Reflect diverse cultural ways and languages.
- Acknowledge cultural relationships and family centric support system.
- Include culturally respected holistic practices in the model of care — spirit, mind, body, and emotion.
- Engender pride and ownership.
- Promote traditional healthy living.

The Paul John Calricaraq Project (PJCP) includes the construction of a 205,000 square-foot three-story clinic, remodel of the existing 85,000 square foot Bethel hospital, and construction of staff housing.

The hospital remodel will occur as the clinics move out of existing locations into the new facility. The new clinic will include primary and specialty care, dental, behavioral health, vision, audiology, infusion, pharmacy, wellness, and inpatient services of acute care, labor and delivery, and c-section surgery.

**February:** Established Art/Cultural Committee.

**March:** final project financing.

**April:** PJCP Dedication Ceremony. Pile cap welding completed.

**June:** Ground insulation installation and backfill.

**July:** Completed erecting steel for new clinic and central utility plant.

**August:** Concrete slab on metal deck floors completed.

**October:** Began interior wall studs on the clinic level 1 and metal siding.

**November:** Completed clinic and central utility plant roof.

**December:** 95% Construction Document review.
Health Studies—helping us learn how to keep you healthy

A warm thank you to all who have participated in studies throughout the YK Delta. Your time and participation are of great value and help answer tough questions about health. By volunteering to join studies, we show that we are hopeful for a more healthy future.

Who?
Who can volunteer to be in a research study? Anyone. It really depends on the study. Some research only allows children or only allows adults. Usually, the flyer or screening form shares who may be eligible to join.

Who conducts the study? Sometimes outside entities (like the National Cancer Institute) fund studies. Other times, there is no funding available, so researchers donate their time. Some researchers are our own YKHC providers. Other researchers collaborate with YKHC and Alaska Native Health Consortium (ANTHC) or the Centers for Disease Control (CDC). Many researchers are in an academic setting like the Center for Alaska Native Health Research (CANHR) with UAF/KUC.

What is Health Research?
Research is a systematic way to test an idea and/or review information. The answers found during the study can be replicated by other researchers. Research contributes to generalizable knowledge. It is subject to many laws and regulations. Many protections are in place to check studies for sound science and cultural rigor. In Alaska, studies first must submit protocols through an Institutional Review Board (IRB)/Alaska Area IRB and the YKHC Human Studies Committee.

Before a researcher receives permission to work in a YKHC facility or use YKHC patient health records, the YKHC Board of Directors must approve it. Any study that wishes to use patient identifiable information must obtain a signed approval from that individual as well.

Some studies are chart reviews, some are surveys sent by mail. Other studies include face-to-face interviews and blood draws. One thing that all of the studies have in common is that they are answering questions we have about our health.

When?
Research is happening all the time. There are dozens of approved studies happening right now. Many participants will recognize the names of researchers who have been working and living in the YK Delta.

Why Research?
Much of research starts with questions from patients or doctors asking WHY. For example, research done in partnership with ANTHC started when YKHC and ANMC pediatricians asked why we have high rates of RSV in children.

We do research to improve health care. Better health care service and better health care outcomes begin first by asking WHY and then by conducting studies.

How?
How can you get involved in research? Take note of posters and publications. Research reviewed and approved by YKHC’s human studies committee will have approved advertisements. Keep reading the YKHC Messenger for updates on studies and for other opportunities to contribute.
HEALTHY COMMUNITY

By partnering with our Tribes and other stakeholders, we recognize the interaction between the environment and the impacts it has on human health. We will work toward a safe and clean environment for our people.

- Extend and sustain water/sewer projects
- Advocate for public funding and new projects

Home Water Tank Sampling Project
The YKHC Office of Environmental Health & Engineering Water Lab works with more than 100 public water systems throughout the YK Delta to test treated water for total coliform and E. coli bacteria.

Over the summer, the water lab opened its doors to the public and provided water sampling kits at no cost ($50 value) to Bethel residents with water tanks. For water samples containing bacteria, customers were offered education on tank cleaning best practices and a follow-up water sample.

Total coliform bacteria was identified in nine percent of samples; E. coli was identified in none of the samples. Total coliform bacteria in drinking water are unlikely to cause illness, but they serve as indicators of possible contamination.

If you are concerned about bacterial contamination in your water tank, consider doing a visual inspection to try to find any problems with the water tank. Are there any cracks, leaks, or openings in the tank? Does the lid fit poorly and leave an opening around the top? Is there evidence of birds near the overflow?

For more information, please contact the YKHC Office of Environmental Health & Engineering water lab at 543-6420.

YKHC’s Office of Environmental Health & Engineering launched a campaign in several YK Delta villages to advocate for use of more water: posters and mail-out cards reminding families that clean water is the key to a healthy community.
Tobacco Free Campus Policy

In February of 2017, YKHC announced that, in alignment with our mission and vision, the Board of Directors would adopt a tobacco free campus policy, to take effect a year later on February 5, 2018. As a healthcare organization, YKHC is committed not only to healing illness, but to promoting wellness. We are committed to the health and safety of our employees, patients, and visitors.

Smoking or use of smokeless tobacco by patients, staff, and visitors is no longer allowed on any YKHC leased or owned properties in Bethel and throughout our service area—including village clinics, sub-regional clinics, the Bethel hospital, and residential facilities.

Ash cans and smoke shacks, formerly located outside of West Wing, Qavartarvik Hostel, Ayagnirvik Healing Center, Behavioral Health homes, and CHSB, have been removed from our property. Permanent signage is installed throughout YKHC facilities. And, because enforcement is a team effort, enforcement tools and resources have been made available to all staff.

If you would like to make a positive change and quit tobacco, counseling services are available in both Yup’ik and English. You can enroll by walking in to Tobacco Prevention, by asking your provider to make a referral, or by calling 907-543-6312 or 1-800-478-3321 ext. 6312.

Results from an August 2016 employee survey indicated nearly 94 percent of employees surveyed believe a tobacco-free campus policy supports our mission as a healthcare organization.
Dental Department now offering Silver Diamine Fluoride

YKHC is now offering a new dental service for our patients. We can paint a liquid, called silver diamine fluoride, onto our patients’ teeth that stops cavities from getting any bigger and helps prevent decay from starting anywhere else in the mouth.

The only downside, which is not a very big one, is that it stains cavities dark black. People may start seeing patients with teeth that have cavities stained dark black and wonder what is going on.

Products that protect teeth, like fluoride rinse and fluoride varnish have been around for many years. Now, silver has been added to fluoride products to create an even more powerful cavity-fighting tooth protector.

We can use silver diamine fluoride for patients with many cavities that cannot be treated at one time. Also, for young patients who may not be able to cooperate with a dentist or DHAT. Silver Diamine Fluoride is as safe as water to treat patients with cavities.

DHATs are making a difference!

We hired our first Dental Health Aide Therapist (DHAT) in 2006 and have been working to increase the DHAT presence in our communities ever since.

A new study published August 11, 2017, shows that dental health in YKHC communities served by DHATs is improving.

This chart shows that in communities receiving care from a DHAT: 1—Preventive care is increasing, 2—The number of teeth needing to be pulled is decreasing, 3—Fewer children are needing general anesthesia for full mouth rehab.

In addition to being competent with the skills needed to perform dentistry, DHATs who are from the region that they serve are likely better equipped than people not from the region to provide culturally competent care. YKHC tries to recruit candidates from local communities and support them through the two years of the formal training program that is required to become a DHAT. Scholarships are offered annually. More information can be found at ykhc.org/dhat.
CARE DELIVERY

We will continually strive to increase access and improve the quality of health care services at YKHC.

- Implement new model of care
- Successfully complete the Paul John Calricaraq Project
- Strengthen village health programs
- Focus on quality
- Improve patient experience

Health Aide Hiring and Training

In 2017, 45 Community Health Aides were hired or re-hired for the YK Delta village clinics, as well as five new Office Assistants, addressing the number one priority identified by 2017 Tribal Gathering delegates.

In addition, four new basic training instructors were hired for the Community Health Aide Training Center, with the goal of increasing health aide training cohorts from 6 to 12 per cohort by early 2018, vastly increasing the Training Center’s capacity to tackle the training backlog encountered in recent years. As of April 2018 all cohorts for each session will have 12 seats available.

Field Supervision provided pre-session training for 26 new community health aides and offered two coping skills workshops for 13 health aides to provide help with traumatic events and their after-effects.

The Community Health Aide Training Center (CHAT) provided seven cohort sessions during the year, with 35 CHA/Ps successfully completing all requirements for the sessions attended.

Sessions offered included two sessions level I, one session level II, one session level III, and three sessions level IV. Each session includes multiple weeks in classroom and clinical practice with basic training instructors, who are highly experienced mid-level providers (NPs or PAs). In addition, health aides complete 200 clinic hours, and a minimum of 60 patient encounters between sessions. Each health aide trainee requires detailed supervision and clinical skills follow-up in the field in order to be considered ready for practice.

CHAP Itinerant Provider Program

In June 2017 the CHAP Itinerant Provider Program was launched to increase mid-level provider (FNP or PA) visits to non-SRC clinics.

These provider services are rotated to villages at least three weeks out of each month, serving patients with chronic or higher acuity medical needs. This program is in addition to other provider visits from the SRCs as well as Bethel-based providers.
Immunizations/Well-Child

During the year, the Immunization Department distributed 26,742 doses of vaccines to over 40 village clinics, five SRGs, and to YK hospital clinics for a total value of vaccines distributed of more than $1.2 million.

During the months of June, July, and August the Immunization Department, in partnership with Public Health Nursing and CHAP, visited five villages and vaccinated approximately 150 children between the ages of 2 months and 18 years, with approximately 300 immunizations given. This new campaign— "Just for the Health of It Outreach Program"— was launched with the goal of improving the immunization rates for the YK Delta Region, especially children. The program will continue in the spring of 2018.

Health Aide Graduation

On May 5, 2017, eight Community Health Aides earned their Certificate in Community Health from the University of Alaska Fairbanks. They have also reached the final level of training and have earned the designation as a Community Health Practitioner (CHP).

These CHPs will continue to work and provide much needed care to the people of the YK Delta. The Community Health Aide Program is very proud of these CHPs and we are thankful for their dedication.

Substance Abuse Treatment

The opening of a new drug and alcohol treatment center in Bethel was celebrated January 11 as Board Members, funders, YKHC staff and community guests gathered for a ribbon cutting. The YK Ayagnirvik Treatment Center, formerly PATC, is a 16-bed facility with separate wings for men and women, providing alcohol and substance abuse treatment programs, including opioid addiction treatment.

Honorary Board Member James Charlie and First Vice Chair Gloria Simeon cut the ribbon commemorating the opening of the Ayagnirvik Healing Center while fellow board members look on.

Calricaraq Counseling

YKHC’s behavioral health clients can now opt to receive traditional Yup’ik treatment, also known as Calricaraq, a first in YKHC’s history. The Calricaraq way is a holistic approach to instill the necessary tools and skills for survival and living a healthy and balanced life.

Clients now have a choice between traditional Yup’ik counseling sessions or the standard western method.

Traditional Yup’ik counselors will be on the front lines counseling clients using the traditional Calricaraq beliefs. Sophie Jenkins and Emma Smith, along with Andrew and Sarah Jasper, are the front line counselors who treat individuals and facilitate healing groups.

CORPORATE CAPABILITY & CULTURE

We will maintain financial and human resources to ensure the organization has the capability to continue to offer customer-oriented services throughout the region.

Financial Status

YKHC was caught in a triple trap financially five years ago. The Federal Government declared a Sequester and reduced the Indian Health Service Compact Funding by five percent in 2013. This reduced anticipated funding by almost $3 million.

At the same time, YKHC was required to convert to an electronic health record system. This purchase and installation cost YKHC $15 million and was unfamiliar to everyone. This resulted in far lower numbers of charges being available to bill for services. Some services were not billed due to inexperience with the financial operation of the new system, but even those services that were billed to Medicaid were often rejected by the new State payment system.

These problems left YKHC with a cash flow shortage and it took about two years for the state to correct their payment system. Fortunately, billing for patient services increased and the state’s payment system was repaired, leading to cash collection increases of 29% in 2014 and 31% in 2015. In 2016 and 2017 we collected almost double the amount of collections in 2013 and so far in Fiscal Year 2018 collections have exceeded Fiscal Year 2017.

In 2017, YKHC completed the financing package for the $300+ million hospital expansion and renovation with some of the most favorable interest rates available anywhere. That means we have all of the funds in hand that may be needed to complete the largest non-government remote hospital construction in the world and have enough reserves to continue operations for years in case of any acts of nature or other problems that might complicate the completion of the project and cause delay of the additional funding to be received after its completion.

The completion of the project will almost triple the hospital facility in Bethel that will be available to care for all of the people of the Yukon and Kuskokwim Delta region. The new and totally renovated facility will allow YKHC to not only provide more services but will also allow us to collect more for those services as well as increase the funding from the Indian Health Service in the future.

To make Medicaid-paid travel more efficient for patients of YKHC and more affordable for the State of Alaska, YKHC has started taking over the prior authorization and scheduling of Medicaid-paid travel. Because the volume has been much greater than anticipated, additional personnel have been added and it is our commitment to provide an answer on authorizations within 30 minutes for same day travel and within 24 hours for future travel. When fully implemented this will greatly reduce the amount of time clinic personnel and care managers have to spend on the phone making travel arrangements for patients.

Thanks to increased attention to collections for services and closely monitored expansion of expenses, YKHC has experienced the most profitable operations in its history and has accumulated a record amount of net assets. The Tribes of the Yukon Kuskokwim Delta have a right to be proud of the facilities and services they are providing for the care and benefit of our people.
Recruiting and Retention

In 2017, the employee turnover rate was 35%. There will always be a turnover rate because our medical staff mostly comes from outside of the region, but we are working to reduce the rate. We hire as many in-state nursing school graduates as we can and actively pursue training of health aides and dental health aide therapists. Human Resources is partnering with a professional recruiting firm to assist in the hiring of the professional staff needed now and in the future.

779 personnel were hired in FY 2017, with 407 Native for a percentage of 52%. At the end of September 2017, there were 1,384 employees working for YKHC. 837 of these were Native.

Lean Success in St. Mary’s

St. Mary’s SRC Operations Manager Gail Alstrom provided an overview of the clinic’s Napartet Visual Board during a site visit by the acting director of the Indian Health Service and his staff June 7.

She described the Lean tools YKHC has implemented and offered background on the clinic’s A3 project—improving the rate of control of high blood pressure in YKHC patients diagnosed with hypertension. In March 2017, the control rate of hypertension in patients of the SRC was 49 percent. Through increased focus on the goal, the St. Mary’s SRC’s control rate improved by 10 percent, to 59 percent, by the end of May.

“We are getting patients in, making sure their blood pressures are right, and setting up physicals or labs where necessary,” Alstrom said. “This improvement is directly related to staff using our A3. We are meeting about it and focusing on it so we can help our patients.”

Customer Service

In the early summer of 2017, the Human Resources Department started a Customer Service Training initiative in response to customer feedback that indicated a weakness in this area.

All employees in the organization received this training in 90 full-day sessions. A total of 1,172 employees were trained. New Hire Orientation now includes a second day of customer service training. The goal is to provide all employees with the tools needed to provide a higher standard of communication and assistance to all customers. Further, customers are identified as everyone—not only the patients and people we serve, but also fellow employees and community members.

Compass Program

The Compass Program provided to the Native employees at YKHC focuses on the development of management skills. There are two levels, the first is geared toward basic management skills and expectations, the second is offered to supervisors and level one graduates to enhance their skills. In 2017, 11 students successfully completed the Compass programs.
Here for You and Your Family

Whether it’s the providers and health aides who directly care for patients or behind-the-scenes staff, YKHC’s family of employees are dedicated to the well-being of you and your family.

These efforts have not gone unnoticed. We are grateful for the comments from patients who have taken the time to comment on their care. Here are a few—

“I am impressed with the care received from Tamara at first contact on the phone; and expedited response from Mary Jackson when seeking medical help for my dad…”

“I would like to applaud the Kwethluk Health Aides for their hard work and dedication when they took care of me during my emergency crisis. All the Health Aides were professional, explained things well, and had excellent team work while caring for me at the Clinic.”

“I am thankful for my Treatment here at the Bethel Regional Hospital. I feel better. I want to thank all the nurses and their aides for the wonderous angelic work that they’re doing for their patients.”

“I really liked the care provided by Dr. Eggimann and Surgery Dept. staff today. They are so knowledgeable, friendly and courteous. Thank you for all that you do and providing excellent care.”

“I would like to say that centering (pregnancy) is the best thing to ever happen on the YK delta! Very informative, kind, caring providers. Centering gives me a sense of peace and calmness through this amazing pregnancy of mine.”