



Employees of the Quarter

Recognizing exceptional employees for incredible contributions this Spring



Bertha Chase, Community Health & Wellness. "Because of Bertha's hard work, WIC customers receive their benefits on time and Health Aides know that if they send an application to our office it will be taken care of." —Shane Paulson, Community Health and Wellness



Evangelina Paul, Finance/TMC. "...when requesting travel or other arrangements for staff, board members and patients... Evangelina responds to requests promptly and is on top of her game." —Virginia Blake, Travel Management



Hosea Jones, Support Services. "Hosea has been instrumental in improving the cleanliness of the hospital and specifically deserves recognition for overseeing Dietary during the transition of our executive chef." —Deanna Latham, Support Services



Linda Weisweaver, Quality Improvement. "Her tireless duties responding to litigation requests, making sure that YKHC is represented in the best possible light, is critical." —Dr. Joe Klejka, Quality



Valerie Thomas, Accounting. "The work that Val provides to the Accounting Department is always with high accuracy and she is always willing to take any questions for further research." —Kadishe Lamani, Accounting



William "Chet" Ford, FNP, Village Health. "Chet quickly adjusted to 'life on the road,' traveling from village to village to provide patients with the best care close to home, preventing unnecessary and inconvenient travel." —Asela Calhoun, CHAP

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FYI

Coming Soon: Improvements in Patient Registration

Beginning in November, YKHC Registration will replace the current "take-a-number" patient registration process with "QLess."

Using QLess, patients will have the ability to register virtually from an on-site kiosk in the Registration waiting area, the YKHC website, or from their mobile phones.

This new system will text patients, telling them where they are in line, when it's time to be seen, and predicted wait times. This will allow patients to return to the clinical area when it is their turn to be seen.

QLess is expected to improve customer satisfaction, reduce wait times and cut waiting room crowds.

Stay tuned for more information about QLess and patient registration improvements!

RESOURCES

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
 Irvnik Birthing Center 543-6346
 Behavioral Health Services 543-6100
 Substance Abuse Treatment 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 543-6013
 Travel Management 543-6360

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

This institution is an equal opportunity provider.

ATTENTION: If you speak Yup'ik, free translations services are available to you. Call 907-543-6603.

YKHC BOARD OF DIRECTORS

Unit 1



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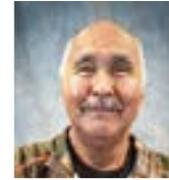


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Unit 11



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Member



James Charlie, Sr. Toksook Bay

Message from the President & CEO



President and CEO
Dan Winkelman

Congratulations to all current and former Community Health Aides and Health Practitioners! This month is the program’s 50th birthday. I offered the comments below to YKHC’s Health Aide graduating class in 2015. Thank you for letting me share it with you again.

My Grandma Rose was a Health Aide for over 20 years. She passed on a few years ago after blessing us with her love for 93 years.

I was thinking a few days ago about being at her house when I was very young and what I understood about her job from that perspective. She was in one of the first classes of Health Aides and practiced in the McGrath region.

One thing that stood out was her high level of organization and daily routine. She established a routine to get everything done for the day—up early to cook breakfast for three of her 10 children who were still at home, plus one high school boarder (my cousin from Georgetown), and then get them all to school. Then she’d get herself to work.

Back again at 12:05 p.m. for lunch (her house was across the street from the old McGrath clinic). When I was there visiting in the summer and fall she’d quickly cook, then it was back to work.

After 4:30 p.m. I’d run over and see her at the clinic to walk her home. Sometimes she’d send me down to the NC store to get her something she needed for dinner.

I remember her taking Health Aide calls after work and my mom telling me not to bother Grandma the next day because she was tired from being up part of the night. I remember the serious things that affected her, us and the village—like the accidents, assaults, drownings and suicides.

How she dealt with the death of patients really helped us to do the same because her patients were our friends and neighbors and, in some cases, our relatives. Her Health Aide training was instrumental in helping her and others develop the skills to cope with the incidents.

I also remember the tremendous sense of accomplishment and reward she had from helping her patients.

It was the “thank-yous” that she really worked for . . . right?

I remember being at the store with her and a patient would thank her for something and she’d get a big smile on her face. At the end of the day, it is really the “thank-yous” that we get into this business for. The importance of helping others really stood out.

And I saw it all the time with her. Some of it was at her clinic, but much of it was at her house too.

Everyone from Stony River to Nikolai would stop at her river house to see my Grandma. All were her patients at one time or another.

They would warm up from their cold river ride, have coffee or chai, get breakfast or dinner, sometimes they’d ask her for a hot shower (her house had running water in the 1970’s) or a couch to sleep. Or sometimes they would stop to just visit.

And when they left, there was always a “thank-you” and a big smile for my Grandma Rose.

So remember when you encounter a high work load or an emergency—be organized and rely upon your training. YKHC is there to support you with our provider teams when emergencies happen. So always rely on your training and your physician consult support, which is only a phone call away. Second, take advantage of discussing any major incidents with your supervisor, or your designated behavioral health counselor, or our confidential 24/7 employee assistance counselor—all are dedicated to supporting you. Lastly, remember to keep that smile because we all really got into this business as health care providers because of the “thank-yous” and when you render great care like my Grandma Rose did, you too, might get a big smile and a thank you!

Quyana.



Health Aide Rose Winkelman third from left with one of the first graduating classes.

BREAST CANCER AWARENESS MONTH

October is Breast Cancer Awareness Month, an annual campaign to raise awareness of risks, the value of screening and early detection, and available treatment options.

More than 249,000 people in the United States are diagnosed with invasive breast cancer every year, and nearly 41,000 die from the disease.

Over the years, a loop of pink ribbon has come to symbolize breast cancer awareness and today the image of a pink ribbon can be found emblazoned on thousands of products, from apparel to dishware to office supplies. But there's more to awareness than just wearing pink.

At YKHC's Women's Health Grant (WHG), we believe that early detection, education, and support services are the best prevention. This is how YK Delta women are kept strong. Our mammography department accepts walk-in appointments at the Bethel hospital. If you live outside of Bethel you may qualify for travel assistance from the Women's Health Grant so that you can make it to your appointment.

Early Detection is Key to Treatment Success

Self exam: Once the breasts appear fully developed, check monthly

- Look and feel for lumps, change in shape, abnormal nipple discharge, inverted nipples. (Breast pain that comes and goes is NOT a sign of cancer; it usually occurs because of changes in hormonal levels or the amount of caffeine consumed.
- Pain (not tenderness) that is continual, with no apparent cause, should be checked by a professional.
- Have mammograms every year or every two years, based on family history.

Mammograms: Although some providers may say you can stop having mammograms at a certain age, if you want to remain safe with early detection, continue having mammograms. Women are more likely to get breast cancer as they get older.

For additional information with pictures, stop by the YKHC Imaging Department and request a free copy of *Weaving Breast Health into Our Lives*.

Breast Cancer in Children

This is very rare, but there is an 8-year-old girl in Utah with breast cancer. If it only happens once to someone you love, it is a tragedy. So, if you see a lump on a child's chest (this can be little boys as well as little girls), look closely to see if it is a bug bite, a spider bite, or something that looks like a puncture wound. If you can't determine that is what it is, then take the child to a health care provider and request a breast ultrasound, just to make sure it is not one of those rare cases.

Young Women (teens, 20s and 30s) with abnormal breast symptoms, like younger children, should first go for a breast ultrasound, not mammogram. Ultrasound is safer during the child-bearing years.

Breast Cancer in Men

This is uncommon, but it does occur. Any abnormal changes in the breasts should be checked. Some medications, heavy alcohol use, weight gain, or marijuana use can cause non-cancer-related enlargement of the breast—but that normally occurs in both breasts. If the detected change is only in one breast, don't wait. Have it checked out by a health care professional.

Education and spreading the word among family and friends helps get everyone informed. You may just the life of someone you care about by sharing this information.

If you are between the ages of 45 and 70, you may need a mammogram. Call the Women's Health Grant at 907-543-6990 to schedule an appointment today.

WINTER HEALTH TIP: Only use medications you need

Antibiotics will only help our bodies fight a *bacterial* infection. They are not needed for colds or sinus, throat and ear infections caused by a virus. Providers will prescribe antibiotics only when we really need it. We should not have to ask for them.

Using medicine when we don't need it can cause unwanted side effects like a rash or diarrhea. Taking an antibiotic when it is not needed gives bacteria the chance to build up a defense against it the next time. Sometimes we may hear this called resistance and this is how "superbugs" begin to develop.



October 2018

DR. PAUL JOHN CALRICARAQ PROJECT

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

PJCP DESIGN

The team continues to work on exterior building signage, designing head-walls for labor and delivery, wayfinding signage and supporting the art procurement.



Aerial of the hospital and new PJCP health clinic.

PJCP CONSTRUCTION

Insulated metal panels were completed at the penthouse and are being installed at the central utility plant west walls. Sand blasting and repainting of the fuel oil tanks has begun after the existing tanks were refurbished and upgraded. Arctic pipe installation, supports and hangers continues for the waterline and sewer. Rigid insulation was placed and backfilled at the perimeter of the new lift station building; interior grouting and appurtenances within the well were installed.

Casework installation continues as areas become available on the first floor. The HVAC contractor is installing trim and diffusers; electrical contractor is roughing in lighting and installing fixtures. Plumbers continue installation of radiant heat panels.

At the second floor, electrical rough-in for overhead wires and seismic installation is in progress. Cable tray and HVAC rough-in is progressing ahead of the ceiling system grid. Lighting rough-in is being installed in the ceiling. GWB installation continues, followed by mud and tape on the walls.

Ceiling grid installation continues as areas become available on the third floor. Low voltage cable is being pulled in cable trays ahead of the ceiling grid. Radiant panel installation is beginning as first floor panels are completed. The labor and delivery tubs are being installed.

In the Penthouse, plumbers are roughing in heat supply and return lines and appurtenances for the air handler units. The sprinkler crew completed work to tie-in standpipes and hose connections for the building's exterior.

HOSPITAL RENOVATION

Electrical switchgear, transformers and transfer switches are being tested in preparation for permanent power connection in late September. HVAC and electrical rough-in continues ahead of the housekeeping ceiling grid system. Wall protection is being installed in the cooler and kitchen areas, along with electrical rough-in ahead of the ceiling grid system. For the CT Scan area, the HVAC contractor is roughing-in ahead of high wall sheathing; plumbing and electrical in-wall rough-in is occurring ahead of GWB sheathing. Rough-in of conduit and

plumbing continues in the interstitial space and below the buildings.

SPECIAL INSPECTIONS

YKHC is providing final inspections for fireproofing and firestopping work prior to covering in Phases 1 and 2, and electrical rooms of the Hospital, along with other areas

throughout the Clinic. A welding inspector was on site August 28th to visually inspect various welds at the Clinic connection to the Hospital, areas within the Hospital interstitial space, reuse heat pipe joints and above ceiling light supports in five rooms of the Clinic.

OTHER PROGRAM ELEMENTS

Medical FF&E: Arcadis and YKHC continue to refine the medical equipment specifications and procurement list prior to purchase. YKHC is negotiating contract terms with the two selected vendors.

Dental FF&E: Proposals were received from three dental equipment providers for cassettes and dental tools. YKHC will review and award contract.

Furniture: Manufacturers have begun producing furnishings for the Clinic floors 1 and 3 and Hospital phases 1-3. Furniture began shipping to Bethel in September.



Installing insulated metal panels on the west walls of the Central Utility Plant

A Closer Look

Healthy Relationships

by Eileen Arnold, Executive Director, Tundra Women's Coalition

Domestic violence requires a close analysis. It requires us to look underneath the tip of the iceberg and wonder, who's doing what, to whom, with what purpose.

Domestic violence can take different forms. Verbal abuse is using words to discourage or put down a partner. Physical abuse uses physical force and might be hitting, grabbing, restraining, hair pulling, or anything that leaves a mark or hurts. And Sexual abuse is ANY unwanted sexual contact or attention. Financial abuse is taking away, controlling, or keeping money (or benefits) from a significant other or family member. And spiritual abuse is not allowing a partner to participate in their culture or their healing activities, such as church or dancing. These types of abuse are used to control a partner so that the abuser feels power.

We know about the different kinds of abuse and what they can look like, but we usually don't hear about the different sorts of violence that might be present in our communities. This may cause us to pre-judge a situation and not give it the kind of attention it needs, which can be very damaging. There are five types of violence that can be present in families, though different types of violence can be happening at the same time.

Battering: Battering is when one partner uses violence against their partner or family, but the abuse is recurring—a pattern. The violence is used by the perpetrator to feel powerful and in control. In battering relationships there is not equal power between partners—and it is unlikely that the victim in the relationship will be able to change the behavior of their partner.

Reactive: Reactive violence is where someone reacts to violence or the threat of violence in self defense. This is important to understand because sometimes there are incidents in which someone (usually the woman) reacts to violence or threats to protect herself, and can get arrested or go to jail, even though she was not the primary aggressor.

Situational: Situational violence non-recurring and usually involves both partners, such as fighting, or brawling between partners. There is usually equal power between partners in these situations and it is not part of a pattern to establish dominance and control.

Organically Induced: This is when the perpetrator of violence is not in a stable mindset. This can be due to mental disability, alcohol, or drugs. For example, someone who is controlling or violent ONLY when they are drunk and might need help with substance use.

Generalized: The perpetrator uses violence in every situation as a method to get what they want or to meet their needs—this means it's not targeted to one person in particular.

It's important to understand that these types of violence can occur together. There may be both organically induced violence and battering violence in a relationship. Knowing what sort of violence is at play in a relationship can help us clarify our values and work together to protect victims and survivors—and offer help to those who use violence to harm others. For instance, if a person practices battery they might need a program like batterer's intervention. If a person is only violent when drinking, they might need to abstain from alcohol or attend substance misuse treatment.

The elders in this region say that “there is always a place of turning around,” and knowing what sort of help you might need is a good place to start.

There is help! TWC has a 24-hour crisis line: 907-543-3456 or 1-800-478-7799. TWC has many other services for women, children, and men—check our website at www.tundrapeace.org. YKHC, ONC, and AVCP all offer Healthy Families classes for parents looking to increase their strengths through this Yup'ik-created curriculum.

PUTTING AN END TO EARLY CHILDHOOD CARIES

by Curtis Krumlauf, RDA, RDH, BSDH and Tiffany Krumlauf, RDH

What is Early Childhood Caries (ECC)?

ECC is the presence of one or more decayed, missing, or filled teeth in children age 5 years or younger. A child’s teeth can get decay as soon as they begin to come in. ECC is an infectious disease and a serious health problem.

What are some of the major causes of ECC?

Diet: Diets that are high in sugar, carbohydrates, and acid causes the outer layer of the tooth called enamel, to break down, allowing bacteria to enter the tooth. When bacteria enters the tooth, it can cause cavities. If the cavities are left untreated, they can cause infections/abscesses.

Not Enough Tooth Brushing: Tooth brushing physically removes the bacteria that cause cavities.

Not Enough Exposure to Fluoride: Fluoride makes the teeth stronger and more resistant to acid and bacteria.

Caretakers Having a Lot of Cavities: Bacteria that cause cavities can be passed from person to person.

What can be done to prevent ECC?

Avoid giving your children sugary drinks: These include juice, soda, sports drinks, energy drinks and powdered drinks such as Tang and Kool-Aid. Water and Milk are the best choices for a child to drink to avoid ECC.

Milk should be given to a child with caution. Milk, even breast milk, contains sugar. This can become a problem if it sits on the teeth for long periods of time. Avoid putting a child to bed with a bottle that is filled with milk. When the child is old enough, make the choice to put water in the night-time bottle instead. If you do breast feed or give a bottle with milk right before bed-time, make sure to wipe the child’s teeth and gums before laying them down.



Dental Health Aide Therapist Bonnie Hunt shows proper brushing techniques at the Bethel Dental Clinic.

Brush your child’s teeth: Make sure to brush or wipe your child’s teeth every day to remove any plaque. Plaque is a mixture of food debris and bacteria that builds up on teeth and is responsible for causing cavities.

Take care of your own teeth: Decreasing the amount of cavities present in mom’s mouth and the mouth of any one caring for the child will decrease the risk of the child developing ECC.

Fluoride application: Unfortunately, most of the water in our region does not contain fluoride. This makes it especially important for you to use a small smear of fluoride-containing toothpaste when brushing your child’s teeth along with bringing them to the clinic for applications of fluoride by a healthcare provider every three months.

Schedule your child an appointment to see a dental provider as soon as their first tooth erupts: A dental provider can help you prevent ECC with things like sealants, fluoride applications, nutritional counseling and finding and treating cavities when they are still small.

STEPS TO IMPROVING DENTAL HEALTH

HOME CARE	PROFESSIONAL	COMMUNITY
Dietary Habits Oral Hygiene Fluoride Toothpaste Transmission of Bacteria	Early Detection of Caries Diet Counseling Fluoride Application Pit and Fissure Sealants	Health Education Community Development Water Fluoridation

Healthy Living

Know Your Medicine, Know Your Pharmacist

Knowing which medications you are prescribed and why you are prescribed them is a very important aspect of maintaining your health.

Talk with your pharmacist or provider if you are unsure of why a specific medication is being prescribed, how often you should take it, or any other questions you may have about your medications.

It is especially important to remember which medications you take as this information could be critical in the case of an emergency, if you switch to a new provider, or even if you need to call in for refills on your medications. Having a hard time remem-

bering? Ask your pharmacist for a wallet card medication list to fill out with all of the medications you are taking!

As important as it is to know what medicines you are taking, it is also important to know who your pharmacists are. Having a good relationship with your pharmacist will make it easier for you to get the information you need. Below is a list of all of the pharmacists at YKHC along with some fun information to help you get to know them better!

Elizabeth Tressler

How long have you lived in Bethel? 10 years.

Where did you go to Pharmacy school? University of the Sciences in Philadelphia.

What is the most fun thing you have done in Bethel? Camping and silver salmon fishing.

One fun fact about yourself: I had never been west of Pittsburgh, Pennsylvania, until I flew to Bethel, Alaska in 2007.



Ashley Hunsucker

How long have you lived in Bethel? Two months.

Where did you go to Pharmacy school? Midwestern University College of Pharmacy, Glendale, AZ.

What is the most fun thing you have done in Bethel? Fishing, attempted moose hunting, and berry picking.

One fun fact about yourself: I love dogs and have two Australian Shepherds.



Kathryn Reynolds

How long have you lived in Bethel? Over 4 years

Where did you go to Pharmacy school? Duquesne University in Pittsburgh, PA.

What is the most fun thing you have done in Bethel?

Camping at Bogus Creek to assist with the K300!

One fun fact about yourself: I have 3 adorable YK Delta mutts.



Alicia Harrison

How long have you been in Bethel? Over a year.

Where did you go to Pharmacy school? Lake Erie College of Osteopathic Medicine in Bradenton, Florida.

What is the most fun thing you have done in Bethel?

Attending Camai Festival, berry picking and salmon fishing. I also learned how to filet salmon.

List a fun fact about yourself: I love to cook and try different types of foods.



Paul (PJ) Kulesa

How long have you lived in Bethel? A little over a year (moved here July 2017).

Where did you go to Pharmacy school? Purdue University (same class as Dan and Kaylene).

What is the most fun thing you have done in Bethel?

Running on the frozen river to Napaskiak and back.

One fun fact about yourself: I'm currently training for a boxing match in Anchorage.



Kaylene Woods

How long have you been in Bethel? Since November 2017.

Where did you go to Pharmacy school? Purdue University.

What is the most fun thing you have done in Bethel?

Kayak the Kuskokwim.

List a fun fact about yourself: I love to travel! And I especially love to take pictures of all the places I travel to.



Bowen Liu

How long have you lived in Bethel? Two years, 11 months, one day and counting.

Where did you go to Pharmacy school? Albany College of Pharmacy and Health Sciences.

What is the most fun thing you have done in Bethel?

Ice fishing during winter with my colleagues.

One fun fact about yourself: I'm from New York and work in Bethel and my interest is in Behavioral Health Pharmacy.





October is American Pharmacist Month and Pharmacy Technician day is October 16 . Pharmacists play a vital role in the health care of our patients at YKHC. Just as important to the services the pharmacy department provides are all the employees who support the pharmacists and interact with our patients every day. There are 22 members of the pharmacy team who are not pharmacists. There are pharmacy technicians, an inventory analyst, billing specialists, an office manager and an administrative assistant. All of these important people keep the pharmacy running smoothly.

Susan Wheeler

How long have you been in Bethel? 12 years
Where did you go to Pharmacy school? Washington State University.
What is the most fun thing you have done in Bethel? A float trip on the Goodnews River. It was 10 days of camping and fishing (and getting rained on), but it was a lot of fun and I would love to do it again.
List a fun fact about yourself: I love to bake, it's a little bit of an addiction for me.



Nick Berres

How long have you been in Bethel? Five years
Where did you go to Pharmacy school? University of Wisconsin - Madison
What is the most fun thing you have done in Bethel? Salmon fishing – I originally moved to Bethel because I wanted to fish the salmon runs
List a fun fact about yourself: I'm from Richland Center, Wisconsin



Amy Aumann

How long have you been in Bethel? Two years.
Where did you go to Pharmacy school? University of Wisconsin - Madison.
What is the most fun thing you have done in Bethel? Going boating with friends.
List a fun fact about yourself: I adopted an adorable dog named Chubs and made an Instagram account for him: tealaskan-chubs.



Jason Vild

How long have you been in Bethel? I have been traveling to Bethel for three years.
Where did you go to Pharmacy school? Virginia Commonwealth University.
What is the most fun thing you have done in Bethel? Ice fishing on the river where we caught a couple of pike.
List a fun fact about yourself: I like to travel and appreciate different people and cultures.



Daniel Jenkins

How long have you been in Bethel? Since July 2017
Where did you go to Pharmacy school? Purdue University.
What is the most fun thing you have done in Bethel? Traveling on the river to fish in the summer and playing basketball in the winter.
List a fun fact about yourself: I enjoy playing softball and volleyball at the park.



Bridget Alem

How long have you been in Bethel? More than 16 years.
Where did you go to Pharmacy school? Howard University.
What is the most fun thing you have done in Bethel? Salmon fishing with native friends.
List a fun fact about yourself: I was a nurse for 10 years before becoming a pharmacist and I love to travel all over the world to see different cultures.



Emily McNally

How long have you been in Bethel? Since September 2018
Where did you go to Pharmacy school? Albany College of Pharmacy and Health Sciences
What is the most fun thing you have done in Bethel? Moved into my new apartment!
List a fun fact about yourself: I have 3 younger sisters and we were all involved in Irish dancing



Jason Barrett

How long have you been in Bethel? Since July of 2015.
Where did you go to Pharmacy school? Thomas Jefferson University School of Pharmacy.
What is the most fun thing you have done in Bethel? I really enjoy working out and doing crossfit in the mornings before work.
List a fun fact about yourself: I met my wife here in Bethel and we now have a daughter named Everly. We also got a dog while living here named Fin.



CHAP NEWS

Community Health Aide Program

JULY 2018 HEALTH AIDE OF THE MONTH: Melody Deacon, CHP from Grayling

Melody Deacon, CHP from Grayling, is a great asset to the Community Health Aide Program.

Melody takes calls for communities that do not have a Health Aide. She has been on call for 4-6 villages, including her own village of Grayling. In doing this, she ensures that patients get further evaluation as needed. Melody works well with office assistants and health aides from other villages. During emergencies she has helped the office assistant or Health Aide trainee stay calm by talking them through what they needed to do.

Melody gives great direction and is always eager to help. She exemplifies YKHC's Mission of "Working Together to Achieve Excellent Health." Thank you, Melody, for everything you do. Thank you for continuously showing that you care. You are a valued employee at YKHC and we appreciate your commitment to your patients!



Melody Deacon

CELEBRATING THE 50TH ANNIVERSARY OF THE COMMUNITY HEALTH AIDE PROGRAM!

The Community Health Aide Program was recognized and funded by Congress in 1968.

The Yukon-Kuskokwim Health Corporation opened a Community Health Aide Training Center in 1969. Several additional training centers were formed throughout the state during the 1970s.

The program has undergone many changes over the years, including milestones like developing the Statewide CHA Curriculum (through the University of Alaska Fairbanks) in 1976, the development of a Community Health Aide basic training curriculum in 1984, the development of the Community Health Aide Practitioner Manual (CHAM) in 1987, and the Village Drug Reference in 1988.

The 1990s were growing years for the program with the 1994 Alaska Tribal Health Compact and expanded training opportunities for Tribal Health Organizations throughout the State. Training curriculum was standardized in 1993 and the Federal CHA program Certification Board Standards and Procedures were established in 1998. The CHAM has undergone multiple revisions over the years, including an electronic version.

The history of the CHA/P program is rich in culture, community, stories, and successful provision of care in our communities by Health Aides who are part of the community. The enormous success of this unique model of care for our rural commu-



YKHC's first group of health aides: Abby Stephanoff, Russian Mission; Dorothy Okitkun Aloysius, Kotlik; Paula Ayunerak, Alakanuk; Nellie Joshua, Mekoryuk; Mary Phillips, Akiak; Martha Pavil, Kwigillingok; Sam Alexie, Eek; Yako Slim, Kasigluk.

nities can be attributed to many things, including unwavering commitment and hard work by tribal health organizations, UAF, basic training instructors, and many others.

But it is our Community Health Aides who deserve the most credit—for giving their hearts and lives each day to caring for others. They deserve the highest honor for serving as the backbone and heart of healthcare systems throughout rural Alaska.

The Yukon Kuskokwim Health Corporation wants to recognize and acknowledge the service and commitment of our Health Aides, in these 50 years, to families and communities in the YK Delta. They are fundamental to all of the health initiatives at YKHC.

Quyana to all of our Community Health Aides and Community Health Practitioners!

—Asela M. Calhoun, CHAP Director

VOTE

NOVEMBER 6 IS ELECTION DAY IN AMERICA

- ✓ **Exercise your RIGHT as a Citizen to participate in Democracy**
- ✓ **Vote for your Congressional Representative in Washington D.C.**
- ✓ **Vote for Alaska’s Governor and State Legislators**
- ✓ **Vote Yes or No on Ballot Measure One – The Stand for Salmon Initiative**

VOTING INFORMATION ON WWW.ALASKA.GOV

There are many options for voting besides casting a ballot at your local precinct on election day, and options for voters with disabilities, voters who need translation services and voters who are on military duty overseas.

Alaska’s **Division of Elections website www.elections.alaska.gov** has information on all these options. You can also contact the Absentee and Petition Office toll free at 877-375-6508

Voters With Disabilities—Get accessible versions of forms and applications, audio versions of ballot measures and candidate statements, and voter registration and informational videos with ASL interpretation.

Language Assistance—You can get information about the language assistance program and election information in Tagalog, Spanish, Yup’ik, Siberian Yupik, Iñupiaq/Inupiaq, Koyukon Athabascan, and Gwich’in Athabascan

Early and Absentee Voting

Vote in person — Vote an early or absentee in person ballot beginning 15 days before Election Day at an absentee voting location.

Vote by personal representative—Unable to vote in person due to age, serious illness or disability? Have a personal representative pick up a ballot for you beginning 15 days before Election Day.

Vote by mail — Have a ballot sent to you in the mail.

Vote By Fax — Have a ballot sent to you by fax.

Vote By Online Delivery—Have a ballot sent to you by online delivery.

REVIEW THE OFFICIAL ELECTION PAMPHLET

The Official Election Pamphlet (OEP) is prepared to assist Alaskan voters in making informed choices prior to Election Day.

The pamphlet includes biographical statements prepared by candidates. Views expressed in the biographical statements are from the candidate and not endorsed by the Division of Elections.

The OEP also contains information about any ballot measures appearing on the ballot, how to vote, voting locations, absentee voting and voter rights, etc.

The OEP is mailed to every voter household no later than 22 days prior to Election Day.

The OEP is available online in a PDF format no later than 22 days prior to Election Day in English, Spanish, Tagalog and targeted Alaska Native Languages.

The OEP is made available in audio format provided by the Talking Book Center no later than 22 days prior to Election Day. For additional audio assistance, the Talking Book Center can be contacted at (907) 465-1315 or toll-free at 888-820-4525 (within Alaska), by email or by visiting their website.

WHO'S COMING TO A CLINIC NEAR YOU?

The following providers will be bringing healthcare services closer to your home in the coming months. To schedule an appointment time, contact your village health clinic.

Dates are subject to change dependent on weather.

October 2018

DENTAL

Mtn. Village: Bernadette Charles, DHAT 10/1-12
Crooked Creek: Carrie Tikiun, DHAT 10/1-5
Chevak: Sadie Green, DHAT 10/1-5
Alakanuk: Bonnie Hunt, DHAT 10/8-12
Anvik: Conan Murat, DHAT 10/8-12
Hooper Bay: Erin Feller 10/7-9
Pilot Station: Bernadette Charles, DHAT 10/15-19
Russian Mission: Carrie Tikiun, DHAT 10/15-19
Kotlik: Renee Cheemuk, DHAT 10/15-19
Scammon Bay: Sadie Green, DHAT 10/15-19
Kipnuk: Kristen Santuria and Cameron Randall (Dr. Chi's Dental Study) 10/18-21
Chefornak: Kristen Santuria and Cameron Randall (Dr. Chi's Dental Study) 10/21-23
Kotlik: Bonnie Hunt, DHAT 10/22-26
Holy Cross: Conan Murat, DHAT 10/22-26
Mtn. Village: Bernadette Charles, DHAT 10/23-11/31

FAMILY MEDICINE

Hooper Bay: Colleen Britt, FNP 9/24-10/5
Kotlik: Chris King-Talley, FNP 10/8-11
Hooper Bay: Dr. Robert Tyree, MD 10/8-12
Kipnuk: Anne Komulainen, PA-C; Crystle VanCor; Kim Fisher, DO; Sarah Vernig 10/1-4
Kongiganak or Kasigluk: Dr. Alexander Judy, MD 10/15-18
Marshall: Anne Komulainen, PA-C 10/22-25
Akiachak or Tuntutuliak: William Miller, FNP 10/22-25
Akiak: Dr. Gilbert Steffanides, MD 10/29-31

PHYSICAL THERAPY

Hooper Bay: Amy Spatz, PT 10/23-25
Emmonak: Jesse Gefroh, PT 10/30-11/1
Behavioral Health St. Mary's: Kylee Davies, Clinician 10/15-17

November 2018

DENTAL

Mtn. Village: Bernadette Charles, DHAT 10/29-11/23, 30
Upper Kalskag: Conan Murat, DHAT 11/5-9
Nunam Iqua: Renee Cheemuk, DHAT 11/5-8
Chevak: Sadie Green, DHAT 11/12-16
Grayling: Conan Murat, DHAT 11/26-30
Kotlik: Renee Cheemuk, DHAT 11/26-30
Russian Mission: Victoria Hardwick, DDS 11/26-30

FAMILY MEDICINE

Akiachak: William Miller, FNP 11/5-8
Marshall: Denise Tran, NP 11/5-9
Alakanuk: Rachael Youngblood, FNP 11/12-16
Pilot Station: Eileen Lawson, PA-C 11/13-15
Scammon Bay: Rebekah Diky, PA-C 11/13-15
Chevak: Linda Hewett, NP 11/27-29
Tuntutuliak: William Miller, FNP 11/26-29

PHYSICAL THERAPY

Emmonak: Jesse Gefroh, PT 10/30-11/1
St. Mary's SRC: Eliza Caquiao, PT 11/27-29

HEALTH AIDE TRAINING

Kwethluk: Brandon Nelson 10/26-30

December 2018

DENTAL

Mtn. Village: Bernadette Charles, DHAT 12/3-7, 17-21
Shageluk: Carrie Tikiun, DHAT 12/3-7
Kotlik: Dr. Jill Calvert, DDS 12/7-20
Lower Kalskag: Conan Murat, DHAT 12/10-14
Scammon Bay: Sadie Green, DHAT 12/10-14
FAMILY MEDICINE Scammon Bay: Steve Bertrand, PA-C 12/4-7
Nunam Iqua: Holly Lybarger, FNP 12/10-14
Pilot Station: Denise Tran, NP 12/4-6
Chevak: Linda Hewett, NP 12/18-20
