

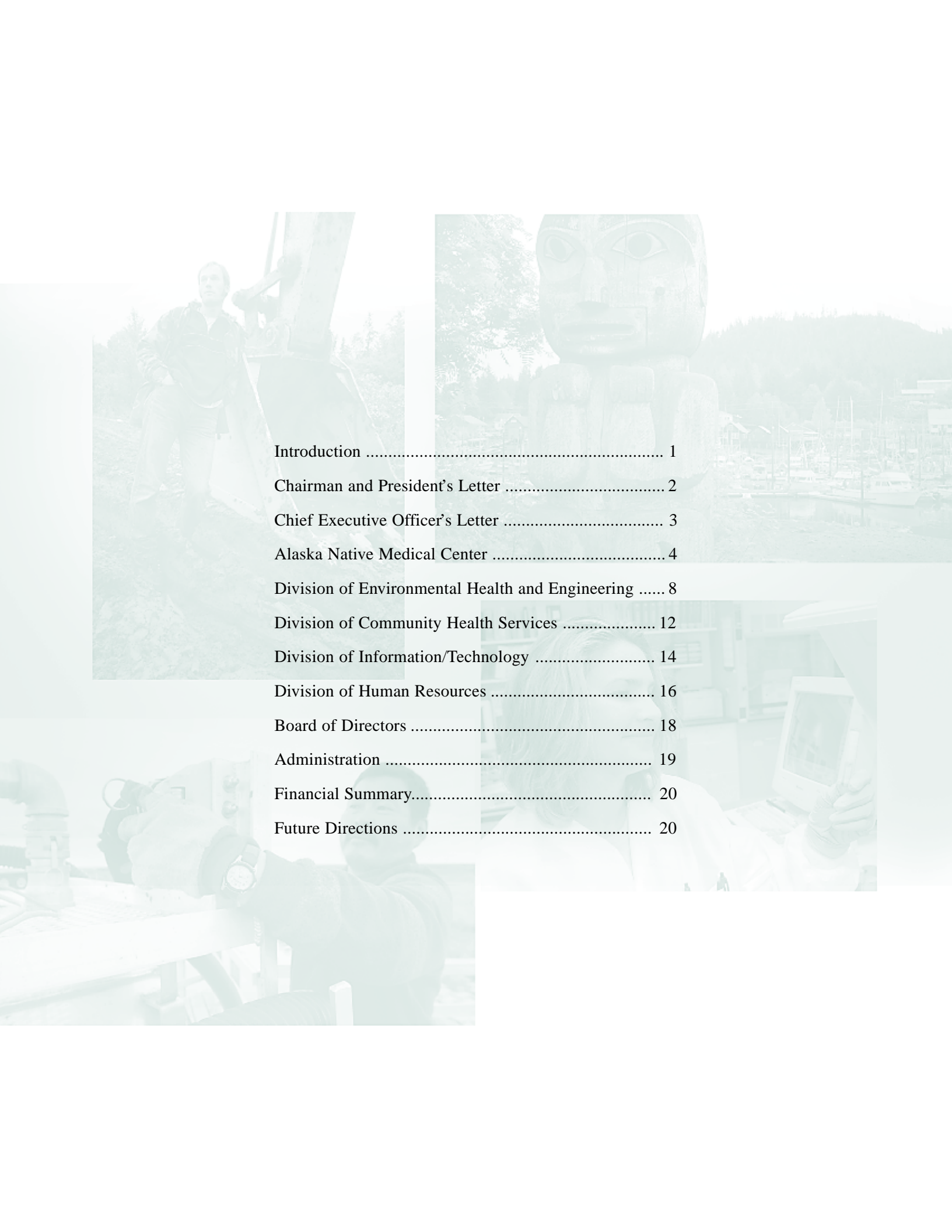


Committed to
EXCELLENCE
in health services



**ALASKA NATIVE
TRIBAL HEALTH CONSORTIUM**

2003 Annual Report



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ANTHC

Committed to EXCELLENCE in health services

When the Alaska Native Tribal Health Consortium assumed management of statewide programs from the Indian Health Service, we inherited programs with many strengths. These include a dedicated work force, and experienced partners in the tribal health organizations.

We also have visionary tribal health leaders, some of whom have achieved recognition at the national level. ANTHC board chair and president Don Kashevaroff serves as the chair of the Indian Health Service Tribal Self-Governance Advisory Committee. Our board vice-chair, H. Sally Smith, of Dillingham, was elected chair of the National Indian Health Board.

These and the other tribal health leaders on the Consortium board have a vision: for Alaska Natives to achieve the highest health status in the world. That's a lofty goal, but with a strong commitment to excellence, the guidance of our customer-owners, and dedication of our employees, it's achievable.

We look to Alaska Natives, our customer-owners, to set the direction, recommend which activities will get us to our goal, and tell us whether we're on course.

We work to focus energy and resources on activities to carry us toward our goals. We encourage everyone to pull together in the same direction. We measure progress to see that we are on course, and adjust our course as needed.

Our board members still need to hear from all Alaska Natives about what is working well, and about opportunities for improvement. Talk with your regional health organization staff and board members to become informed. Talk with Consortium board members about how we can improve health care services.

Remember, too, that as people work to improve, they need to know that someone appreciates their efforts. Praise people who do a good job. Together, we can achieve excellence.

This 2003 Annual Report is a summary of the Consortium's efforts to build excellence in health services and its goals for the coming year.

Letter from the Chairman and President



To all Alaska Natives:

In FY03, the Alaska Native Tribal Health Consortium renewed its commitment to excellence. We looked for ways to do better. Why? We did this, in part, because our commitment to excellence has great rewards.

For instance, the Consortium has won several national awards and certifications of excellence – for nursing excellence, care of patients with traumatic injury, innovative technology, epidemiology, and environmental health. These awards show that an objective, outside entity has reviewed an aspect of our operations and found it meets the highest industry standards.

Yet, achieving awards is not the main reason we are committed to excellence. We simply work to provide the best health services possible, and the awards come. We also are proud of more subtle signs of our accomplishments:

- A new use of telemedicine helped save a woman's life in Kotzebue.
- Our focus on clean water and sanitation systems has made death from gastrointestinal disease a thing of the past.
- The nation's first dental health aides are at work, helping to reduce the disparity in oral disease between Natives and non-Natives.
- Several young people we fostered through an internship or scholarship are now working for us.

For these successes, I thank both our customer-owners and our employees. I thank our customers for their constant encouragement to improve. I thank our employees for their commitment to excellence despite budgets that often do not keep pace with the needs of a growing population. I thank our board members for their vision and guidance.

It is a privilege and honor to serve you. Please feel free to let me know if you have a question or concern.

Sincerely,

A handwritten signature in black ink that reads "Don Kashevaroff". The signature is written in a cursive, flowing style.

Don Kashevaroff

Letter from the Chief Executive Officer



On behalf of the Alaska Native Tribal Health Consortium administration and staff, I am pleased to present this year's Annual Report. Our commitment to excellence is evident across the organization. Here are just a few of the achievements of FY03:

- Improved water and sanitation services at 2,646 homes in 93 communities.
- Developed and expanded training and support for dental and behavioral health aide programs and personal care assistants.
- Expanded support for the Alaska Native Traditional Food Safety Program to monitor the health of mothers and newborns in Arctic regions.
- Planned a Business Resource Center to assist Tribal health organizations with enhanced patient information and billing systems.
- Printed and distributed 55,000 posters encouraging Alaska Natives to make healthy choices about tobacco use, food and activity levels.
- Improved access to specialty clinic services at the Alaska Native Medical Center.
- Obtained funding for development of a tribal health system cancer control plan.
- Launched collaborative planning with University of Alaska Anchorage for a new nursing school and health career-training center in Anchorage.

The Consortium works for you, our customer-owners. We want to hear from you how we are doing and how we can improve services from the Consortium across Alaska.

Sincerely,

Paul Sherry

A handwritten signature in black ink that reads "Paul Sherry". The signature is written in a cursive, flowing style.

Alaska Native Medical Center



Alaska Native Medical Center is owned and operated by the people it serves. In the spirit of our mission and unique relationship with the Alaska Native people, the Alaska Native Tribal Health Consortium is committed to excellent quality care and customer service. We work to achieve the highest health status for all Alaska Natives.

The Alaska Native Tribal Health Consortium (ANTHC) and Southcentral Foundation (SCF) jointly own and manage Alaska Native Medical Center under the terms of Public Law 105-83. These parent organizations have established a Joint Operating Board to ensure unified operation of Alaska Native Medical Center.

Alaska Native Medical Center continues to experience significant growth, up seven percent in some services. In 2003, ANMC provided 341,420 clinic visits, 6,422 inpatient admissions, 1,283 infant deliveries, and 10,595 surgical procedures.



Level II Trauma Certification verifies that ANMC surgeons, emergency physicians, surgical specialists, pediatricians, nurses, and other staff are fully trained and available to provide immediate care for any type of injury. Here, Dr. Richard Brodsky and Margaret Bolger, RN, demonstrate techniques used to provide oxygen to patients with trauma injuries.

ANMC achieves highest honor for nursing excellence

ANMC is the 71st hospital to receive Magnet Status, the highest honor given by the American Nurses Association, the nation's largest such group. This recognition is given to just over one percent of some 6,000 hospitals in the country. Of those 71 Magnet hospitals, ANMC is one of only four with 150 or fewer beds. ANMC is the first Alaska facility, and the first tribal facility to receive Magnet Status.

ANMC achieves Level II Trauma Center recertification

ANMC was recertified as Alaska's only Level II Trauma Center, the highest level possible in Alaska. The designation reflects ANMC's statewide leadership and commitment in fighting the leading cause of lost years of productive life among all Alaskans. ANMC operates a comprehensive emergency service and multi-disciplinary trauma center. It serves as a key regional referral center for all tribal health facilities in Alaska and, as needed, for local private hospitals.

ANMC achieves statewide award

ANMC was recognized by Qualis for its efforts to promote, teach and help institute continuous quality improvement throughout the Alaska tribal health system.

Laboratory accreditation with distinction

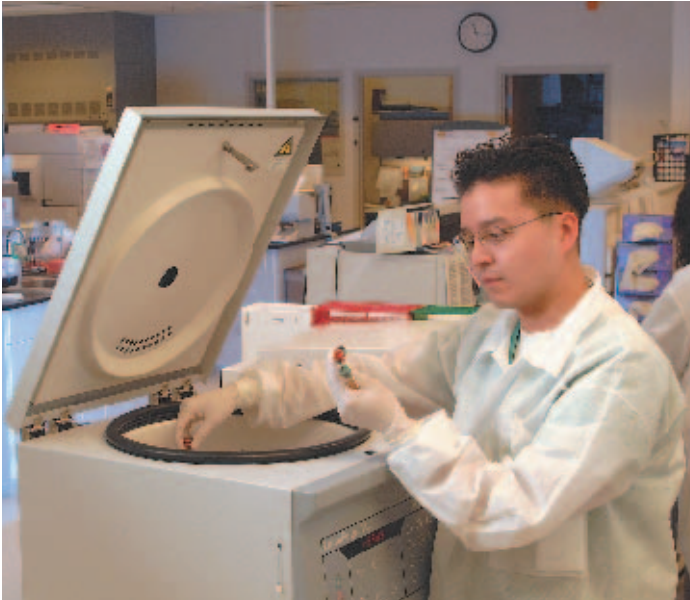
A College of American Pathologists team inspected operations at the ANMC clinical laboratories and awarded it "Accreditation with Distinction," placing it in the top five percent of hospital laboratories nationwide.

Knowledgeable, compassionate care, along with patient education, help ANMC work towards its mission to provide the highest quality health services for all Alaska Natives. Pictured are Christian Webb, patient, and Donna Johnson, ANMC Pediatric Nurse.



The Magnet status award shows that ANMC provides a work environment that fosters leadership, and self-governance, and acts as a "magnet" for nurses. Back-row, left to right, Kayleen Fayer, RN, Day Surgery; Pam Miljure-Bryson, Clinical Nurse, Day Surgery; Kathy Belanger, Nurse Manager, Surgery Support Center; Anita Vogt, Clinical Nurse, Day Surgery. Front-row, left to right, Kristi Rutman, Day Surgery, Intern; Ella Lestenkof, LPN, ANMC Day Surgery; Russelle Wilson, RN, Day Surgery.





Laboratory technician Alan Dela Rosa works in the ANMC lab, which recently was awarded Accreditation with Distinction, placing it in the top five percent of laboratories in the nation.

- Hiring of additional physicians based on patient need
- Added operating room time for surgical services
- Provided telemedicine services to over 2000 patients from tribal facilities across Alaska

Among other results, wait times for scheduled orthopedic surgery have been cut in half, and quicker appointments have cut no-show rates in orthopedics in half.

National firm selected to conduct patient satisfaction survey

ANMC chose a nationally recognized expert to conduct patient satisfaction surveys. ANMC asks patients what they value and need, and what helps or hinders their ability to manage their health. Survey results are used to better tailor services to patient needs.

ANMC Highlight Activities for FY03

ANMC reduces waits and delays

ANMC continues to work closely with internationally recognized experts to improve patient flow and schedules for support services in our specialty clinics. Evidence shows that these initiatives increase patient access to care, decrease waiting times, reduce costs, ensure better outcomes, and improve patient and employee satisfaction.

Steps taken include:

- Increased coverage to allow daily scheduling of eight operating rooms
- Improved use of clinic space with flexible physician-patient scheduling
- Redefined employee scope of work and work processes to streamline clinic office functions



Pharmacy technician Kimberly Martin uses the most recent advances in technology to assure the safe, efficient delivery of pharmaceutical care. Next to her is an automated pill dispenser.



Nurse Manager Kathy Belanger, RN, and Orrenzo Snyder, MD, use the Picture Archival and Communications System, the latest in digital imaging technology. It has reduced patient wait times, improved doctors' access to medical images, and increased clinical efficiencies.

Financial performance — ANMC collects \$103 million reimbursements from alternative sources

ANMC has been successful in meeting its financial targets through several billing improvements and by obtaining full medical insurance information from patients. Annual Medicaid, Medicare, and insurance collections for FY03 reached about \$103 million. Such payments make up about half the ANMC annual operating budget; the rest comes from the Indian Health Service. Money collected from these alternative resources is reinvested in ANMC to improve and expand medical services, add staff, buy new and replacement equipment, purchase medications and supplies, and renovate clinic space.

Sterile processing saves time and money

Our Operating Room, Central Supply and Sterile Processing staff have introduced standardized surgical kits for 27 different procedures. The benefits include immediate availability of supplies and reduced inventory costs.

The latest and best medical equipment and technology

ANMC upgraded the Picture Archival and Communications System (PACS) to keep pace with the latest digital imaging

technology available for patient care in radiology. PACS helps reduce waiting times for patients, improve doctor access to imaging services, and provide greater clinical efficiencies.

Oncology clinic expanded to meet patient demands

To meet patient care demands, ANMC remodeled and expanded the oncology (cancer care) clinic, and hired a Nurse Practitioner to assist the Oncologist. ANMC will later relocate the oncology clinic to a larger space within the hospital as part of the development of a comprehensive cancer care program. The ANMC Tumor Registrar shows that 80 percent of Alaska Native cancer patients receive part of their care at ANMC. About 300 new Alaska Native cancer cases are diagnosed each year as the number of Alaska Native cancer cases continues to rise.

Telepharmacy for rural clinic patients

ANMC uses the most recent advances in technology to ensure the most efficient and safe delivery of pharmaceutical care, including an automated medication dispensing system used at four rural clinics to access prescription medications.

Division of Environmental Health and Engineering



Sanitation Facilities Construction — Through DEHE, 2,646 homes in 93 communities received improved water and sanitation services at a cost of \$55 million.

The Division plans, designs, and constructs safe drinking water and sanitary waste disposal systems for thousands of Native homes each year. ANTHC directed local construction crews in 44 communities in FY03.

These sanitation facilities bring both health and economic benefits. They improve the quality of life in a community and protect the public health. During construction, they create local construction jobs, and later provide

John Borromeo works on an upgrade to the water and sewer plant in Pilot Station. Planning is underway for more upgrades statewide.

As part of the statewide tribal health system, the Division of Environmental Health and Engineering (DEHE) provides sustainable environmental health solutions through an array of programs focusing on health promotion and disease prevention, including:

- Sanitation facilities construction and renovation
- Hospital and clinic maintenance and improvement
- Rural health clinic construction and renovation
- Environmental health coordination
- Institutional environmental control and safety
- Injury prevention
- Water and sewer system operation and maintenance assistance
- Water and sewer system operator training
- Construction skills/career training

The goal of these programs is to work with local leaders and tribal health organizations to develop healthy and safe Native communities.

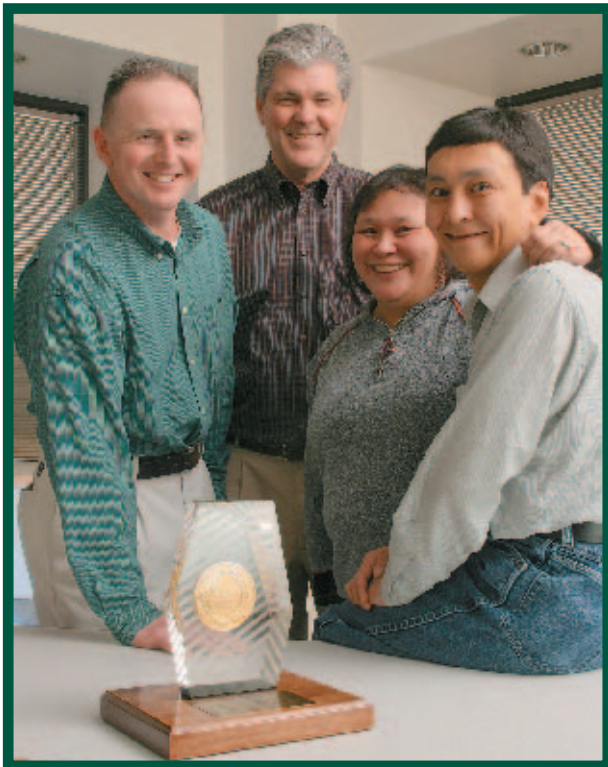


Field crews for Consortium construction projects are about 80 percent local hire, and work closely with tradesmen such as ANTHC carpenter David Anniskett. Pictured here, Anniskett gets ready to place Sheetrock on a wall at Tatitlek's new water treatment plant, in southwest Alaska.

careers for water plant operators. They also increase the potential for economic development.

As just one example, in Western Alaska, local construction crews are building the Kipnuk washeteria under Consortium supervision. It's designed to serve all community residents with central water and sewer service, including laundry facilities and individual bathrooms with showers.

Health Facility Maintenance and Improvement — Through DEHE 11 tribal health organizations received \$10 million for design and construction of 38 hospital and clinic improvement projects.



The Academy of Environmental Engineers awarded DEHE the grand prize in Operations/Management for a five-year, \$12.7-million Savoonga water and sewer system project. Pictured here, left to right, Project Engineer Pierre Costello, Northwest Regional Manager Darryl Alleman, Savoonga Mayor Charlotte (Jane) Kava, and Vice-mayor Jesse Gologergen.

Modern health care facilities are essential to the successful delivery of direct health care services. To maintain and improve health facilities across Alaska, the Division awards facility improvement projects to eligible participating tribal health organizations. These projects provide critically needed enhancements to tribal facilities. They reduce operating costs and improve the delivery of health care services.

Alaska Native Medical Center (ANMC) in Anchorage previously used three electric chillers, with 335 tons of cooling capacity and their associated water condensers and cooling towers, to meet the cooling load of the facility. Maintenance and Improvement (M&I) funding allowed ANMC to replace the chillers with a ground-water cooling system that is expected to save about \$50,000 in annual operating costs.

Last fall, a fire destroyed the insulated water and sewer service lines that run under the Norton Sound Health Corporation (NSHC) pharmacy and into the main part of the Nome hospital. DEHE assisted NSHC in the design and construction of a glycol-traced utilidor system to replace the damaged water and sewer service lines, enabling the completion of the new system prior to the onset of cold weather.



In the northwest Alaska village of Savoonga, umiaks rest near the utilidor that shelters almost three miles of piping for water and waste-water. The project serves about 650 residents. Modern sanitation has greatly improved quality of life for Savoonga residents.



Nunapitchuk Water and Sewer Operator Edward Andrew uses a vacuum truck to empty a home's septic storage tank. Such advances in clean water and sanitation systems have made death from gastrointestinal disease a thing of the past.

Health Clinic Construction—*Forty-two health clinic projects are in the planning, design or construction phases*

DEHE manages a program funded by the Denali Commission that plans, designs, builds, and renovates primary care health facilities in rural communities throughout Alaska. This year, the Division received \$17.4 million in project awards for facility design, construction, or renovation.

A new health clinic funded by the Denali Commission was recently completed in Tetlin. This project provides a 2,000-square-foot building capable of housing both medical and dental services. Construction began in March 2003 and the clinic was completed in November 2003.

Health Facility Program Coordination

DEHE is working with tribal health organizations, the Denali Commission, the Alaska Mental Health Trust, and the state Department of Health and Social Services on a statewide health services and facilities plan. The goal is to develop plans and assessments covering the full spectrum of healthcare services and anticipating future uses, such as the facility needs of behavioral health and dental service delivery. These plans are scheduled for completion in June 2004.

Sustained Operations

Through its Department of Sustained Operations, DEHE assists communities in the day-to-day operation of their water and sewer systems. Historically, this effort has been limited to promoting and funding training for community system operators. In 2003, the Division implemented a demonstration project with the Yukon-Kuskokwim Health Corporation to form a Rural Utility



Using a dosimeter, Lead Utility Systems Operator Roman Albert measures noise levels in the boiler room at Yukon-Kuskokwim Delta Regional Hospital.



Tetlin's new 2,000-square foot health clinic, funded by the Denali Commission and designed and built by the Alaska Native Tribal Health Consortium, will provide health services to 130 residents. The clinic was completed in November 2003.

Cooperative (RUC). The project allows RUC members to benefit from economies of scale, reduction in unit-operating costs, and a knowledgeable utility management. Our manual, "Strength in Numbers - How to Form a Regional Utility Cooperative," is available to help anyone interested in developing a RUC. So far, five communities have joined the demonstration project.

Environmental Services

The Department of Environmental Services was redesigned in 2003 to better align available resources with customer needs. The Safety and Risk Management Program directs efforts toward critical insurance and liability issues integral to supporting DEHE sanitation and clinic construction projects. These staff are also focused on ensuring that value-added safety and health elements are incorporated into all Division activities.

Service Plans

To improve delivery of services, the Radiological and Institutional Environmental Health Program now uses Service Plans developed in consultation with customers. Service Plans were started to focus services on priorities set by tribal health organizations. This initiative established an effective communication network among

hospital safety officers, infection control nurses, and security managers in the tribal health system. The hospital safety officer network has enhanced tribal health organizations' capacity to address issues in accreditation, patient safety, occupational health, and preparedness.

Injury Prevention Program

The Injury Prevention Program works to reduce injuries among Alaska Natives by implementing and expanding injury prevention programs in rural Alaska. The program started a safe firearm storage project with several tribal health organizations. The Injury Prevention Program developed a statewide car seat distribution program that has resulted in more than 1,000 car seats being installed in vehicles in rural Alaska this year. The video "Making Life Safer, Alaska Programs for Preventing Injuries" promotes injury prevention awareness and has been aired statewide as well as at several national forums.



Bristol Bay Times photo by Misty Nielsen

Injury prevention and ATV use is the topic of conversation between Chairman of the U.S. Consumer Product Safety Commission Hal Stratton, left, and Ryan Hill from the Alaska Native Tribal Health Consortium. Stratton visited Alaska in July 2003 and toured four Bristol Bay villages to see how people use ATVs in rural Alaska.

Division of Community Health Services



The CHS Village Training Program is modeled after the Community Health Aide/Practitioners program, which provides essential health care in rural Alaska. Here, Community Health Aide Leslie Vernes tends to Jared Yupanik in the southwestern Alaska village of Saint Mary's.

The mission of the Division of Community Health Services is to elevate the health status of Alaska Native communities to the highest possible level. Community Health Services staff monitor trends in morbidity (illness) and mortality (death) among Alaska Natives, assist in providing community-based solutions for high priority health problems, and improve Alaska Native health research capacity.

New initiatives in Village Health Provider training

In June 2003 the first Dental Health Aides in the nation were certified to practice. ANTHC is sponsoring six students to attend two-year training in New Zealand to serve as Dental Health Aide Therapists, and has selected an additional eight students to begin training in 2004. Funding from the Indian Health Service and the Rasmuson Foundation have made this training initiative possible.

The Consortium will create new Behavioral Health Aide positions in 50 villages beginning in 2004, with Indian Health Service funding. The Consortium will provide funding to 13 regional tribal health organizations to support these positions, and to the University of Alaska to provide the necessary training support.

Community Health Services is working with many regional Native organizations to increase the number of personal care attendants serving in rural communities as well.

Supporting Community Health Aide/Practitioner training

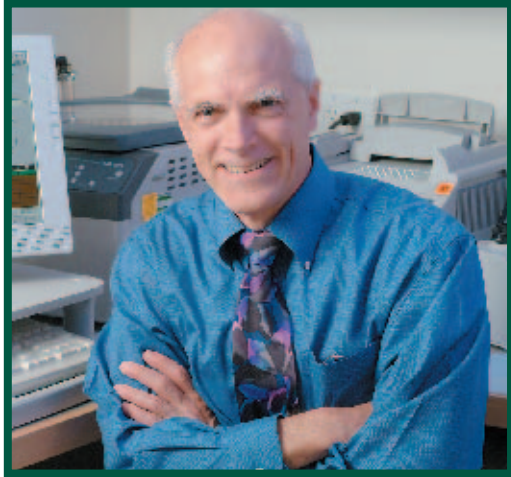
ANTHC is revising the statewide Community Health Aide/Practitioners (CHAP) reference manual, with reprinting scheduled in 2004. The ANTHC CHAP Training Center in Anchorage graduated 54 students in 2003.

Addressing the safety of traditional Native foods

The Alaska Native Traditional Food Safety Program has expanded to include Arctic regions worldwide, monitoring and comparing levels of heavy metals and industrial/agricultural compounds in mothers and infants. Our staff are documenting the benefits of the traditional Native food diet, and watching for any health effects of low-level exposure.

Ensuring high immunization levels

The Community Health Services Immunization program continues to work with tribal health programs statewide to improve immunization rates and provide training on updated vaccination schedules. Our research on pneumococcal meningitis and bloodstream infections shows an 88 percent reduction in these infections among Alaska Native infants after the vaccine was introduced in January 2001.



For his work to halt the spread of hepatitis worldwide, the American College of Physicians, American Society of Internal Medicine presented Brian McMahon, MD, FACP, with the Alvan R. Feinstein Memorial Award in April 2003. Dr. McMahon and his associates' research led to the development of immunization practices for hepatitis B and hepatitis A in Alaska. The World Health Organization has adopted knowledge gained from the work on hepatitis B. In the United States, 14 states use the hepatitis A immunization practices.

Expanding Alaska Native health research

In 2003 our Office of Alaska Native Health Research improved policies and procedures for tribal review and approval of health research protocols and publication. The Native American Research Center for Health (NARCH) has eight research projects underway. These are in the areas of childhood disabilities, maternal nutrition and pregnancy, Hepatitis B, helicobacter pylori, dietary assessment, pneumococcal immunization, colorectal cancer, education and research toward health, and a prospective study of diet and lifestyle factors on chronic diseases.

Increasing education about cancer

In 2003 new grant funding supported increased training about cancer for Community Health Aide/Practitioners, tobacco cessation information for health care providers and patients, and training on palliative/end-of-life care.

Preparing for the possibility of bioterrorism

A new state grant in 2003 supports two staff positions who assist tribal health organizations in preparations to respond to potential nuclear/biological/chemical events in Alaska, and to coordinate tribal health organization preparedness with State and Federal agencies.

Improving support for HIV/AIDS patients and providers

Community Health Services has expanded support for treatment, clinical consultation, and case management for Alaska Natives with HIV/AIDS statewide. Funding is through the Health Resource and Service Administration (HRSA) Ryan White Title III Program.

ANTHC's HIV/AIDS Education and Training Program provides training opportunities for clinicians and other providers associated with HIV medical care and treatment. Funding is through the University of Washington Northwest AIDS Education and Training Center.

Improving transition from corrections

A new initiative called Healthy Transitions is a five-year demonstration project funded by HRSA. This project focuses on improving the successful transition for individuals who have been in corrections facilities, and involves the State Department of Corrections, Norton Sound Health Corporation, and Maniilaq Association.



Community Health Aide/Practitioner Instructor Jean Rounds-Riley shows Jane Martin, of Chickaloon, and Shayne Schaeffer, of Kobuk, how to apply an arm splint.

Division of Information Technology



Alaska Clinical Engineering provides clinical and engineering support services at more than 80 locations in Alaska. Here, Imaging Technician James Thon works on radiological equipment at Alaska Native Medical Center.

Division of Information Technology (DIT) departments all work to improve health care information and technical services throughout the Alaska tribal health system. DIT departments include Health Statistics, Data and Site Support, Alaska Clinical Engineering Services, Wide Area Network, and the Alaska Federal Health Care Access Network office.

Grace Hopper award

In 2003, the Consortium and the Alaska Federal Health Care Partnership (AFHCP) received the Grace Hopper Award for Innovation in Technology. The award recognizes the outstanding new telemedicine system known as the Alaska Federal Health Care Access Network (AFHCAN). The "Gracie" is awarded to federal projects that make exceptional contributions to mission accomplishment, cost effectiveness and service to the public.

History of innovation

While it is wonderful to achieve awards like the Grace Hopper Award for Innovation in Technology, AFHCAN's existence is due to a long history of information and technology innovations designed to provide the best possible health care for Alaska Natives. The dream of being able to provide various types of information and images across the miles of Alaska is older than the original telecommunications satellites high above Alaska. As technology improves, the ANTHC Division of Information Technology and its predecessors have kept on the cutting edge to bring the best possible service to our customers.

Teleradiology: an offshoot of NASA

In the 1970s in rural Alaska, the NASA Applied Technology Satellites Project attempted to prove that usable X-rays could be sent via satellite.

This technology became viable in the 1990s and

has grown into a network of 46 teleradiology sites able to transmit images to consultant radiologists in Anchorage as well as other sites in Alaska and outside Alaska. Installations at all Alaska Native regional sites should be complete in 2004. The process of installing teleradiology in subregional villages also has begun.

Making clinical data available

Also in the 1970s, the Alaska Area Native Health Service was exploring ways to automatically provide patient encounter information at one facility to other facilities serving that patient. The original projects took 10 weeks to provide the information – if all went well. Now more than a million encounters annually are automatically transported, most arriving within a day. This is due to Alaska's participation in the development of the Resource and Patient Management System (RPMS), and our unique use of the Multi-Facility Integration project. In 2003-04, all RPMS systems in Alaska are receiving major software upgrades.

The foundation:

the wide area network

In the 1980s, the Indian Health Service started a wide area network, or a computer network that spans a relatively large geographical area, that included Alaska regional hospitals and health centers. Today, the tribally managed network provides extremely fast service and incorporates a majority of Alaska Native villages as well. This system is the basis for all of DIT's other telehealth systems.

The cutting edge: telemedicine

In the 1990s, as email and similar technologies became prevalent, tribal health organizations began designing a system that could transmit a broad range of medical images to referral clinicians. This has become the Alaska Federal Health Care Access Network (AFHCAN), which is now in use at most Alaska Native health care facilities. In fact, AFHCAN technology has been used in more than 10,000 cases statewide.

This use of telemedicine is several years ahead of general use elsewhere. It is lauded for its innovation, and has put Alaska in the limelight of telemedicine research. This year, AFHCAN is providing major improvements in hardware, software, and support.

Our mission

For DIT, achieving excellence in the quantity and quality of health care information and technical services throughout the Alaska tribal health system is important to providing the best possible health care to Alaska Natives. It is our mission.



AFHCAN received the Grace Hopper award in FY03. Using an AFHCAN telemedicine cart at the Oonalaska Wellness Center in Unalaska, Irene McGlashan transmits electrocardiogram (EKG) results to a referral physician in Anchorage. Telemedicine often speeds diagnosis, saves travel costs, and reduces inconvenience.



Tribal health system providers rely on the computer Resource and Patient Management System (RPMS) for access to medical records. Betty Ruuttila, right, uses RPMS to review Naomi Bahnke's health care records.

Division of Human Resources



Providing opportunities for health career training and education through scholarships and internships is another Human Resources service. Recipients of such services, pictured here from left to right, Aaron Peters, Lenora John, Stephen Beck, and Danielle Pratt.

In FY03, each Division of Human Resources program had a part in successfully changing our internal structure to improve customer service and employee recruitment and retention. The changes involved everything from the hiring process, employee assistance and retirement to benefits. For instance, we created a new Advisory Model to better respond to the needs and concerns of our owner/customers. The new model assigns Human Resource staff to specific customer groups and offer assistance in all program areas.

Retaining employees through improved compensation and benefits

The Compensation and Benefit program implemented a new Wage and Salary Administration Program. It establishes equitable and competitive rates of pay, ensures consistent pay practices throughout the organization, and places ANTHC in a more market-competitive position.



Computer specialist Nancy Butler was honored with the "President's Service Award" for her dedication and commitment to excellence.

Education and Development Department

The Education and Development Department addressed employee retention by redesigning the Employee Orientation and Competency Assurance Program, which prepares staff to serve ANTHC patients and customers. More than 600 individuals completed the program in 2003.

The Department also provides staff development, health careers scholarships, and internships for Alaska Natives. This year, the Consortium gave 16 students \$5,000 scholarships. Another 33 students received Indian Health Service scholarships.

To prepare for the Joint Commission on Accreditation of Hospital Organizations' review of Alaska Native Medical Center, staff audited 1,170 ANMC staff competency folders.



ANTHC administrative assistant Wilma Clayton and Nieves Miljure, director of the Alaska Area Native Health Services Office of Human Resources, review recruitment materials. Recruiting and retention of Alaska Native employees is a top priority in the Human Resources Division.



Auxiliary Patient Services Director Audrey Armstrong describes her childhood in the Athabascan village of Huslia as part of an orientation class that helps new employees learn about Alaska Native cultures.

New computer software helps data gathering

Staff spent many hours building new computer software and data systems that support Human Resources and payroll data needs, and provide unified reports for management decisions. The Lawson Human Resources Information System will be in full use in 2004.

Inviting health professionals to Alaska

The ANTHC Statewide and Northwest Professional Recruiting Program recruited 98 new employees to the Alaska tribal health system in FY03. These include 25 physicians, 57 nurses, and 16 advance practice nurses and physician assistants. The Professional Recruiting program has been particularly successful in promoting the Indian Health Service student loan repayment program. In FY03, the IHS awarded loan repayment to 139 health professionals working with tribal programs in Alaska. The value of these loan repayment awards exceeds \$4.5 million.



Don Kashevaroff (Chairman and President),
Unaffiliated Tribes

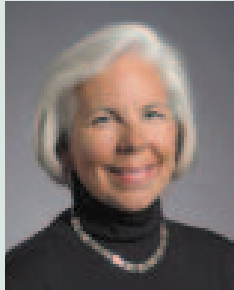


H. Sally Smith (Vice Chair),
Bristol Bay Area Health Corporation



Eileen L. Ewan (Secretary),
Copper River Native Association

Rita Stevens (Treasurer),
Kodiak Area Native Association



Mike Zacharof,
Aleutian/Pribilof Islands Association



Eben Hopson, Jr.,
Arctic Slope Native Association



Robert Henrichs,
Chugachmiut



Christina Westlake,
Maniilaq Association



Frieda R. Damus,
Metlakatla Indian Community

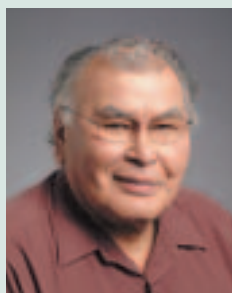
Emily Hughes,
Norton Sound Health Corporation



Katherine Gottlieb,
Southcentral Foundation



Lincoln A. Bean, Sr.,
*SouthEast Alaska Regional
Health Consortium*



Andrew Jimmie,
Tanana Chiefs Conference



Evelyn Beeter,
Unaffiliated Tribes



Fritz George,
Yukon-Kuskokwim Health Corporation

Board of Directors

In 2003 the ANTHC Board of Directors approved:

- Financing and construction of a new 65,000-square-foot office building to house ANTHC administrative and program offices.
- A comprehensive set of corporate compliance policies.
- Creation of a Health Research Review Committee.
- A change in the formula for distribution of health facilities maintenance and improvement funding among Alaska tribal organizations.
- Participation in the Alaska Tribal Health System Memorandum of Understanding.

Administration

The Consortium administration offices provide support for the Board of Directors and administrative support for the operations of the five program divisions, including finance, legal, planning, business development, public communications and networking.

Administration achievements for FY03 include:

- Continuing use of the Malcolm Baldrige National Quality Program criteria to improve Consortium operations.
- Completion of a new wage/salary scale for ANTHC, and a comprehensive employee satisfaction survey.
- Increasing the number of Alaska Natives in supervisory and management positions to a total of 30.
- Planning for a new nursing school and health careers training center in conjunction with the University of Alaska.
- Development of a new Memorandum of Understanding formally recognizing the Alaska Tribal Health System.



An architect's rendition of the Consortium office building under construction at the Alaska Native health campus.

Financial Summary

2003 Revenue (in millions)

1. Indian Health Service (IHS) Compact	102.5
2. Medicare, Medicaid, Insurance	77.7
3. Sanitation Construction Projects	68.4
4. Grants	9.9
5. Facility Maintenance and Improvement	9.3
6. Interest	2.5
Total	270.3

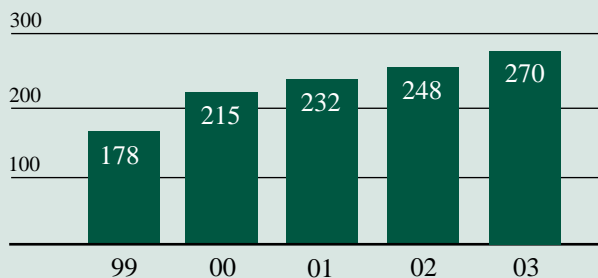
This Financial Summary is preliminary as of 11/1/03 and is subject to a formal audit for FY 2003

2003 Expenditures (in millions)

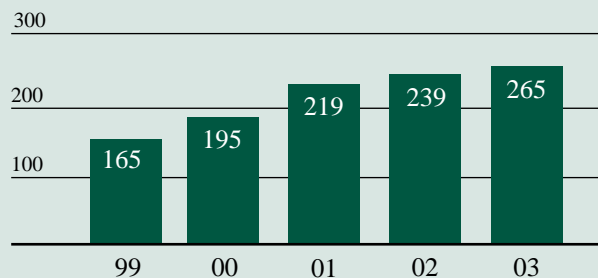
1. Alaska Native Medical Center	141.6
2. Construction Projects	68.4
3. Facility Maintenance Improvements	11.3
4. Environmental Health and Engineering	10.7
5. Administration	10.6
6. Grant Activity	9.9
7. Pass Through Awards	7.1
8. Community Health Services	3.7
9. Information Technology	1.9
Total	265.2

Five year comparison (in millions)

Revenue



Expenditures



Future Directions

For 2004 Consortium initiatives include:

- Creation of a Business Resource Center to assist tribal health organizations with improving patient information and billing systems.
- Completion of an Alaska Health Services and Facilities Master Plan.
- Completion of an Alaska Native elderly services and behavioral health services needs assessment, and a statewide cancer control plan.
- Provision of \$5 million in funding for new Behavioral Health Aide positions in 50 villages.

- Expansion of construction skills training for village-based water, sanitation, and health facilities projects.
- Improvement of access to specialty clinic services at the Alaska Native Medical Center.
- Co-sponsorship of an Alaska Native health research conference.
- Renovation at ANMC to add a fifth Labor/Delivery/Recovery room to accommodate an increasing number of deliveries.
- Renovation of ANMC's Pediatric Intensive Care Unit to provide for increasing numbers of critically ill pediatric patients.

The Alaska Native Tribal Health Consortium was formed in December 1997 to manage health services for Alaska Natives throughout the state. All Alaska Natives, through their tribal governments and through their regional nonprofit organizations, own the Consortium. It is one of 20 co-signers of the Alaska Tribal Health Compact, a self-governance agreement with the Indian Health Service.

The Consortium employs approximately 1,600 people and had operating expenses of \$265 million in fiscal year 2003 (October 1, 2002, to September 30, 2003).

It is based on the Alaska Native Health Campus on Tudor Road in Anchorage.

MISSION

To provide the highest quality health services for all Alaska Natives

VISION

A unified Native health system, working with our people, achieving the highest health status in the world

CORE VALUES

Self-determination

Always learning and improving

Relations based on trust

Respect for cultural diversity

Care and compassion

Honesty and integrity

Wellness in body, mind and spirit

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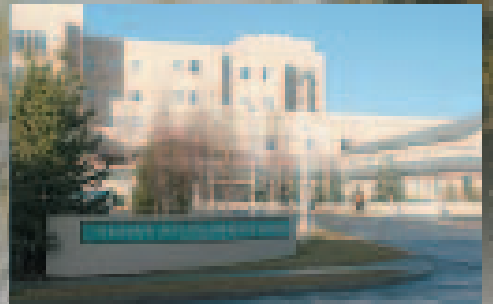
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