

*Our People, Our Strength*



1986 - Hope for the people's  
grandchildren • 1989 - Customer service standouts  
• 1990 - Birth defects preventable: Support available during pregnancy • 1991 -  
'Healthy Babies' is goal of new treatment center • 1991 - Headed by Southcentral Foundation, FAS treatment facility to open March 1  
1995 - Alaska Native people honor healer, friend: Elders, performers remember psychiatrist lost off Russia last night • 1996 - Personal in-  
teract: Breast cancer brochure and videos make powerful impression with Alaska Native women • 1997 - 'Healthcare' Conference  
1997 - CIRI helped out big for outpatient care • 1997 - Coming to life: New Native health center ready • 1997 - 'Beyond the walls  
medical miracle' • 1998 - 'Healing' will be a reality for Alaska Native's 'safe place to heal' hospital: More than  
1,000 laud Alaska Native center • 1999 - Metro News: Southcentral Foundation lauds Stevens, CIRI • 2000 - 'More for healing: Alaska Na-  
tive health clinic expansion underway • 2000 - Troubled teen gets a 'safe place to heal', project also adds new building for pregnant women •  
2000 - Pathways: Alaska Native program shares similarities with San Francisco rehab approach • 2001 - Harried doctors try to ease big delays  
and rushed visits • 2001 - Child Abuse Prevention Month ends with the success stories • 2001 - Streamliner: Goal is to see customer owners

## Southcentral Foundation 30-Year Report







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## MESSAGE FROM CIRI

On behalf of the CIRI Board of Directors and all of us in the CIRI family, I congratulate Southcentral Foundation on its 30th anniversary. Meeting the health care needs of our entire Alaska Native community is important to CIRI, and we have been fortunate to be well served by Southcentral Foundation over the years.

All Alaska Native regional corporations formed under the Alaska Native Claims Settlement Act of 1971 desire to promote the well-being and self-sufficiency of Alaska Native people. CIRI embraces these goals today as it did 30 years ago when the CIRI Board of Directors established Southcentral Foundation as a vehicle to use CIRI's tribal authority to provide health care and related services to Alaska Native and American Indian people living in Southcentral Alaska.

Southcentral Foundation was created with a vision to build a sustainable, Alaska Native-owned and -operated health care system. Through the efforts of many remarkable people, the organization has flourished and grown to address physical, mental, emotional and spiritual needs of 60,000 Alaska Native and American Indian people annually. It employs more than 1,500 people and offers more than 65 health-related programs in Southcentral Alaska and rural Alaska villages.

Southcentral Foundation is a model health care service provider that garners attention from health care organizations across Alaska, the nation and world. I am proud of this CIRI-founded organization, and I pay tribute to all of the individuals whose efforts enabled Southcentral Foundation's past, current and continuing success.

A handwritten signature in dark ink that reads "Margie Brown". The signature is fluid and cursive, with a large, stylized "M" and "B".

Margie Brown  
*President and Chief Executive Officer*



## MESSAGE FROM SOUTHCENTRAL FOUNDATION

Southcentral Foundation (SCF) is celebrating 30 years of service!

We give our thanks to the many people and partners who have been on this long journey with us. We thank our governors, congressional delegates and staffers, past and present, who have walked the journey with us; our sister and brother non-profits who have shared in the journey; all the foundations who have offered both personal and financial support; and, our families and friends behind the scenes who have quietly supported us along the way. We have deeply appreciated your contributions and generous participation.

As a result of our partnerships and Alaska Native customer-ownership, tribal governance and management, we have sustained three decades of continuous improvement of our health care system. Throughout all levels of the organization, we have practiced continuous listening and changing; ongoing education and training; and focused and deliberate planning; as well as innovation, risk-taking, courage and strength.

Our Elders, tribal leaders, customer-owners, and employees have united to reach a single vision: *A Native Community that enjoys physical, mental, emotional and spiritual wellness.* And, we stay connected as we pursue our mission: *Working together with the Native Community to achieve wellness through health and related services.*

Our accomplishments have been affirmed in several honorable ways, including recognitions from the Alaska Federation of Natives, National Indian Health Board, Governor of Alaska, the Secretary of Commerce, the Secretary of Health and Human Services, and numerous others.

In the following pages, we honor where we have been and where we are going. You'll also find real stories from our people. These stories provide strength and hope, and a better understanding of why we do the work we do. It's about relationships and fulfilling our mission of wellness for our children and grandchildren.

*Katherine Gottlieb*

Katherine Gottlieb, MBA, Doctor of Public Service (h.c.)  
President/CEO





## 1982

- Cook Inlet Region Inc. (CIRI) establishes Southcentral Foundation (SCF) as a 501c3 nonprofit.
- Cook Inlet Native Association operates a dental clinic at 670 W. Fireweed Lane that would later become SCF's first clinic.

## 1985

- Under CIRI's tribal authority, SCF assumes the contract with the federal government to manage dental services, optometry, community health, and accident and injury prevention education in the region.

## 1986

- SCF's Optometry Clinic opens on Fireweed Lane.
- SCF enters into a contract for mental health.

## Dental, SCF's First Clinic

Dr. Kevin Gottlieb, Southcentral Foundation's (SCF) first doctor, arrived in Alaska in 1976. A newly commissioned Indian Health Service officer, he was assigned to work as a dentist in the Alaska Native Medical Center. The dental care was nothing like what he grew up with on the East Coast.

"The dental clinic inside the hospital looked like a military clinic, and it felt like a military clinic," he said. "And, there were few appointments. People entered the system by taking a number and standing by. Most never knew who they were going to see, or when they would be seen."

It was a large, bureaucratic system centrally controlled from 5,000 miles away. The hiring policies were not supportive of local

needs. Only one pediatric dentist was hired to serve the entire state. And, the entire facility was staffed by the government. When winter came, people would often leave the state to go work elsewhere. So, when government hiring freezes occurred, this caused real problems in the clinic's ability to keep up with the overwhelming demands for care. The employees most committed to serving the Native Community were left without much support, and there was little time to develop relationships with the customers.

When Dr. Gottlieb had the opportunity to serve as the first dentist for Cook Inlet Native Association's new dental clinic in 1979, he jumped at the chance. Because he was the only dentist at the Alaska Native owned and managed clinic, everyone had an opportunity to get to know their doctor! "Right from the start, it felt

better for everybody,” he said. “I instantly got to know people better, and people felt more comfortable.”

Under Dr. Gottlieb’s clinical leadership, the new clinic responded to needs that the hospital wasn’t able to address. It provided comprehensive care for adults, such as crowns, bridges and dentures, and, while it initially opened to serve adults, it began to serve entire families. Working parents who were not able to sit at the hospital all day to wait for the first available dentist appreciated the convenience of scheduling appointments for both themselves and their children. The environment was warm, welcoming and family oriented.

When Cook Inlet Region Inc. (CIRI) transferred the tribal authority for operating health care services from Cook Inlet Native Association to SCF in 1985, SCF assumed the contracts with the federal government for dental care, as well as optometry and community health. Dr. Gottlieb and other staff joined the team, and SCF’s first clinic was born. SCF emphasized the importance of a welcoming environment, personal relationships, ease of access and continuity of care; this model became the template for all future SCF clinics.



“When I was employed by the Indian Health Service, I enjoyed working in Alaska’s villages. The small charter plane, loaded up with hundreds of pounds of dental equipment, would land – and everyone in the community would work together to help carry the equipment where it needed to go.

I would take my meals with the community members (most of them, my customers!) and would even stay with them in their homes. It was a very intimate experience, where I was able to connect with customers and build relationships. These experiences were much different than working in the hospital, where patients did not know the doctors and the doctors did not know the patients, and the environment felt sterile and unwelcoming.

We tried to replicate the feeling of community and connectedness found in the villages when we established SCF’s first dental clinic. Not only have the customers continued to choose SCF over the last three decades, but also my first dental assistants and receptionist have continued their careers with this organization! Seeing their faces on campus and around town reminds me that our personalized, ‘family practice’ model really did build family and community! ”

- Kevin Gottlieb  
SCF Vice President of Resource &  
Development/Chief of Staff



## 1987

- SCF grows to 24 employees, and Katherine Gottlieb joins the team as a receptionist.
- SCF adds substance abuse treatment and women's health screenings, and expands services in the areas of health promotion and disease prevention, family support and youth aftercare.

## 1989

- SCF evaluates natural helper/peer counselor best practices, and hires advocates to work in the hospital and help Alaska Native and American Indian people obtain the best possible care.

## 1991

- SCF receives a grant for exploring and studying traditional healing practices.
- Katherine Gottlieb becomes SCF's deputy director and current SCF Vice President Chanda Aloysius serves as her executive assistant.
- SCF launches Dena A Coy for pregnant women – the first residential treatment center of its kind.

## CUTTING-EDGE BEHAVIORAL HEALTH CARE

By 1987, Southcentral Foundation (SCF) had expanded beyond its initial self-management contracts to advance in the areas of mental and behavioral health.

SCF tailored services specifically to the priority needs in the community. A contract for adult mental health services came first, and SCF hired an Alaska Native clinician, Alice Abraham, to provide counseling. Abraham completed the first dictionary to translate diagnoses into Yup'ik and support families in their understanding of the Western terms.

Funding from the Indian Health Service (IHS) also enabled SCF to focus on youth substance abuse prevention. The program had an outreach component, where staff presented drug and alcohol education in the schools, and also offered

outpatient treatment for adolescents. Substance abuse counselors would meet with the youth for both group and individual sessions. To help the youth achieve their wellness goals, the program grew in both staffing and service enhancements.

SCF's behavioral health employees in the late 1980s were primarily of Alaska Native or American Indian descent. Alaska Native strengths were used to connect with the youth, and an Alaska Native Elder, "Uncle Walter," supported the effort by facilitating talking circles and offering guidance. To provide the best possible services for the Native Community, staff were encouraged to continue their education, and many went on to complete advanced degrees in human services, social sciences and mental health while working at SCF.



Rather than addressing substance abuse alone, SCF worked holistically to address the whole person. An adolescent mental health counselor, Dr. Bob Morgan, was hired. And, as the workforce grew, SCF was able to take a more comprehensive approach and integrate traditional healing resources with mental health, substance abuse treatment, trauma care, tobacco education and other family supports. By liaising with social services, juvenile justice (probation officers), and school counselors, SCF was practicing a wraparound approach before it was a known term!

As the program evolved, its manager, Darleen Beltz, became the first chair of the Association of Rural Alaska Native Drug and Alcohol Programs – a group developed to improve coordination between IHS-funded providers across the state. Its members shared best practices and worked together to develop assessments and coordinate residential treatment referrals.

In 1991, SCF captured national attention when it opened Dena A Coy, a residential program for pregnant, chemically dependent women. The program was designed to provide Fetal Alcohol Spectrum Disorders (FASD) education, counseling, therapy, and physical, mental, emotional and spiritual support, with the goal of healthier babies and healthier lifestyles for the women.

These early behavioral health programs were the first of many that SCF would develop to address not only physical health, but also mental, emotional and spiritual wellness. Innovative in their approaches, these programs became a model for others that would later develop around the country to meet similar needs.



“ Behavioral health is not experienced as a welcome place when the terminology is negatively loaded – what we did at SCF, even in those early days, was change the language. In our Dena A Coy program, we rejected the confrontational style of treatment, and, instead, incorporated Alaska Native traditions and walked with our participants through the core issues that brought about their addictions. I was a new director when the program first started. Like all programs initiated at SCF, I wanted to see how our approaches were working, up close and personal. So, I made a request of the staff. I asked for the opportunity to spend time ‘acting’ as a participant. Instead, they talked me out of it and asked that I spend 24 hours as a staff member. It was a powerful experience. I saw firsthand that our customers were discovering their true potential and moving toward wholeness. This program has been changing lives for over 20 years. During this time, we have planned for and built a new Dena A Coy facility, established an outpatient program, presented at national meetings, and, most importantly, celebrated a generation of healthy babies and healing for our people. ”

- Katherine Gottlieb, Alutiiq and Filipino  
SCF President/CEO



## 1992

- CIRI transfers Head Start from Cook Inlet Tribal Council to SCF.
- SCF launches Quiana Clubhouse to serve chronically mentally ill adults.
- SCF establishes tobacco cessation services and holds its first cessation class.



## 1993

- SCF grows to 52 employees and five clinics.
- SCF begins planning for primary care services and conducts a survey to find out more about the wants, needs, values and priorities of its 14,000 customer-owners.



## 1994

- SCF opens its first orthodontic clinic, and enters into contracts for family medicine and psychiatric care.
- SCF receives its first cancer screening grant under the National Breast and Cervical Cancer Early Detection Program.

## FAMILY MEDICINE

In 1994, Southcentral Foundation (SCF) began to manage a new family medicine clinic in the old Alaska Native Medical Center. Before it opened, an exam room was converted into a waiting room and reception area, marking the first time in the medical center's history that a clinic would operate with its own check-in area. People in need of care no longer needed to stand in the hallway and wait. As a result, people reported feeling more respected and valued.

“Although it seems basic, this was a huge change in approach,” said Dr. Douglas Eby, who served as medical director at the time and is now SCF’s vice president of medical services.

SCF’s dental clinic on Fireweed Lane, which had first established its customer service

focus 10 years earlier, had created a new culture of service delivery. To translate it to the medical environment, SCF hired Michelle Tierney to help align and motivate the workforce. Tierney’s first assignment was to explore how self-directed teams could serve customers in the clinic. Rather than follow the hierarchy typically found in medicine, could SCF harness the energy and expertise of its entire workforce?

While a number of small changes were made, such as increasing the frequency of team meetings, one of the more significant milestones was establishing a new nurse case manager role. This RN’s job was no longer focused on the encounter in the exam room, but, rather, on care coordination and partnering with customers over time to help them get their needs met.

With its own reception area and four exam rooms available for everything from pediatric care to cancer screenings, customers found that the new clinic was a better way to enter the system than through emergency care. But basic challenges still remained. SCF's primary obstacle was that it was a small tribal organization that only owned parts of a large government-run health care system.

"There were lots of hard working people in the IHS system doing the best they could, but, challenged by the facilities and limited resources, they didn't dare to dream," recalls Dr. Steve Tierney, one of the clinic's first doctors and now SCF's medical director.

"You can't fix just one part of a system and expect big changes," adds SCF Vice President of Organizational Development and Innovation Michelle Tierney.

The big changes – a whole system transformation – would come in the late 1990s when Alaska Native people had the opportunity to compact with the federal government for ownership of the entire health care delivery system.



“Southcentral Foundation does excellent work, and my family has always been very pleased with the care. We have very good providers. When my provider told me I was at the age where I needed a colonoscopy, and that colorectal cancer was preventable with routine screening, I listened. The provider looked at my intestine and found polyps and was able to remove them, with no problem. Some higher power wants me to be here. I survived the Tidal Wave of 1964 when I was out on the beach on Kodiak, and I've survived a sinking fishing boat and a couple of scary flights in a small plane that was badly fogged in. I always tended to push off appointments, but I've established a rhythm now. I go in and get things checked out, because I feel a responsibility to take care of myself, if not for myself, then for my family and that higher power. To be taken out by something that can be prevented is not an option for me. I've learned the importance of screenings, because while polyps and other things are not going to go away on their own, they are treatable with early detection. I was surprised by how many people have had colorectal cancer. When you get out and talk about these things, you learn a lot. Since my first colonoscopy, I've had many conversations with peers and friends about taking care of themselves. I felt really good about myself for getting it done, and want to share that message with others.”

- Alvin Amason, Alutiiq (Sugpiaq)





## 1995

- SCF launches its Elder Program to assist Elders with their health care and home maintenance needs.
- Current SCF Vice Presidents Dr. Doug Eby and Ileen Sylvester join the SCF team.

## 1996

- SCF, CIRI and IHS break ground to build the Anchorage Native Primary Care Center (ANPCC).
- Nine youth participate in SCF's new summer internship program.
- Current SCF Vice President Michelle Tierney joins the SCF team, and SCF Executive Director Katherine Gottlieb is named president/CEO.

## 1997

- SCF moves into 4501 Diplomacy Drive, which later becomes its administration building.
- The new Alaska Native Medical Center (ANMC) opens as the largest IHS facility in the country.
- Current SCF Vice President Lee Olson joins the SCF team.

## GROWING OUR OWN

With Alaska Native people managing an increasing number of programs and services, Southcentral Foundation (SCF) leadership recognized the organization would need to train young Alaska Native leaders and health providers to carry on the work they started.

SCF launched a pilot program in 1996 to encourage youth ages 14 to 19 to enter the health care field through a summer internship program. The goal was to increase the number of career exploration and skill-building opportunities available for Alaska Native and American Indian youth.

Two years later, SCF established a winter option for youth who would benefit from extra support and direction for completing their high school education or a GED. The

following year, older youth were invited to continue with SCF as “graduate interns,” focusing on personal and professional skill development. All three of these programs continue today.

The program, originally called Raising Adolescents in Successful Employment (now known chiefly by the acronym, RAISE), was founded on the belief that every youth wants to succeed and will respond to expectations when given the opportunity.

“We provide our youth with a vision of what is possible,” said SCF Vice President of Executive & Tribal Services Ileen Sylvester. “We tell them you’re our future leadership for our community ... it’s amazing what they’ll do with that.”

These dedicated young adults put their skills to work at SCF, and often their commitment extends beyond their internship. Past interns have gone on to become long-term SCF employees, serving their Native Community in a variety of roles from within SCF's dental department to medical services, behavioral services and administration. Others continue their education and training in university classes, the military and with other Alaska Native corporations; endeavors they are quick to say they would not have embarked on had it not been for SCF.

The RAISE program exposes Alaska Native and American Indian youth to health-related careers and the work environment in a controlled, intentional way. In addition to building professional skills at their assigned work sites, they also have opportunities to develop cultural skills. A camping trip is scheduled annually to connect them with activities such as drumming, pulling a fish net, and learning from their Elders.

"If our young people are truly going to provide outstanding services for our Native Community in the future, we need to support them today," said Robert Roehl, RAISE program supervisor.

RAISE provides youth with much more than a paycheck. The program helps develop self-esteem, community connectedness, and personal and professional goals through a variety of trainings, as well as local and out-of-state field trips and events. Interns learn that their opinions matter, their voices are heard, and together, missions like SCF's can be accomplished.



“ I did a lot of growing up in the RAISE program. My experiences as an intern, where people believed in me and opened up my eyes to the possibilities, were motivating. After three years of interning, I hit a personal milestone by obtaining my GED. I then went on to earn an associate degree at Haskell Indian Nations University. When I returned to Alaska, I discovered a passion to help my people and bring healing to those who have been suffering. This led me to pursue a bachelor's in human services and psychology. After graduation, I took one semester off and then continued my education. I was fortunate to earn both my bachelor's and master's in counseling psychology while employed by SCF, and to be the second former RAISE intern to complete a master's program. SCF's academic leave policy, scholarship assistance and supportive supervisors were the keys to my success while balancing work with evening classes. Now, just 16 years after spending that first summer in the pilot youth internship program, I have become the one and only Alaska Native clinician at The Pathway Home! And, I am considering pursuing a doctorate in psychology. When I look into my future, and the different directions I can go, I am certain I want to stay on a path where I can affect change for Alaska Native youth. ”

- Esther Stevens, Alutiiq and Filipino  
SCF Clinician, The Pathway Home



## 1998

- CIRI signs papers to name SCF as its tribally designated health care entity, and SCF obtains ownership and management of primary care and related services at ANMC.
- SCF's inaugural Gathering takes place to celebrate family wellness and share health information with the community.

## 1999

- ANMC transfers to Alaska Native ownership. SCF and Alaska Native Tribal Health Consortium (ANTHC) sign a co-ownership and co-management agreement, and establish a joint operating board, logo and mission statement.
- An SCF Elder council certifies SCF's first tribal doctor.

- SCF hosts a ceremony to thank U.S. Sen. Ted Stevens and CIRI for their support of the ANPCC.
- SCF's Family Wellness Warriors Initiative (FWWI) forms a steering committee.

## CUSTOMER-OWNERSHIP

Southcentral Foundation's (SCF) arrangements with the Indian Health Service (IHS) to take over the entire primary care system in 1998, and to co-own and co-manage the Alaska Native Medical Center in 1999, presented Alaska Native people with a tremendous opportunity. After the historic transfer of ownership, the people receiving the care moved to the driver's seat. SCF stopped using the term "patient," and replaced it with "customer-owner." And, as the new customer-owners of the entire system, Alaska Native people, at last, could design, own and manage their health care.

"When we were able to assume our own management, we had a lot of freedom to move and design," said SCF President/CEO Katherine Gottlieb. "And, we were highly motivated to improve day-to-day health care for our own

people, and make changes so it would be better for future generations."

The first step was listening to the voice of the customer. In 1998, as ownership of the primary care system was transferring to SCF, the organization conducted extensive focus groups, one-on-one interviews, meetings with tribal leadership from all over the region, and surveys. Next, SCF talked through the feedback with its Alaska Native board of directors and other customer-owners to determine what changes were needed and desired. The criteria and priorities identified by customer-owners were drafted into a list of requirements. SCF used the requirements to develop a mission, vision, and key points, and then set out to find the best practices that could be tailored to fit what the customers really wanted.



SCF recognized the need to introduce Alaska Native managers into the system – specifically, those trained in budget and personnel management, as well as more general management skills. Not only did this build highly capable Alaska Native leadership for the future, but it also allowed the doctors and nurses who had previously been serving as the department managers to return to predominantly clinical work.

SCF's leadership shifted the paradigm from “professionals know best” to “customers know best,” and put systems in place to ensure that the wants and needs of the customer would always be put first. All SCF employees received customer service training, and customer service became a standing agenda item at every managers meeting. Customer-owners could see and feel the changes. They were treated with respect and courtesy, and began to take a more active role in their health care.

With the improvements came the expectation that customer-owners be involved in decision making, including asking questions and providing input. In the clinics, the providers no longer made decisions alone, but, instead, started to share responsibility with customer-owners and their families. Their preferences and values guided both the care and the treatment plans. With Alaska Native customer-ownership, “us vs. them” went away and everyone started to work together toward one vision: *A Native Community that enjoys physical, mental, emotional and spiritual wellness.*



“ I started working at SCF's Optometry Clinic in 1994, and have been the clinic's manager for over 10 years. It's the people who keep me here! Over the years, I've watched customer-owners grow up, and my co-workers have become a second family. If I have questions, I know I have support. I can go downstairs to talk to the dental manager, or call up the complementary medicine or primary care managers – then, after learning what works well, I can modify it for our clinic. I enjoy what I do and learn new things all the time. SCF is good about helping employees develop their skills and grow in their careers. We have access to a range of trainings at our employee development center. I tell our young people that if there's an area they want to grow into, we can take a look at the courses that might work best. There are so many opportunities available and it is important we help the younger generation learn and grow. SCF is an innovative organization. It is always changing and always trying to improve. As Alaska Native people providing services for our own families, we know the importance of looking at the needs, forecasting, and determining what direction we need to go next. ”

- Grace Hamner, Inupiaq and Caucasian  
SCF Optometry Manager



## 2000

- SCF hosts a site dedication ceremony for an expansion of the ANPCC.
- After four moves in five years, Quyana Clubhouse gets a permanent home.
- SCF establishes a fetal alcohol syndrome diagnostic clinic.

- Construction on the ANPCC more than doubles the size of the facility.
- SCF begins to empanel customer-owners, and offer integrated care teams, same-day access, complementary medicine, and much more.

## 2001

- SCF opens new facilities for The Pathway Home and Dena A Coy.
- New wing of the ANPCC opens with a traditional healing clinic and other services requested by customer-owners.
- SCF grows to 700 employees and creates a Development Center for employee training.

## TRADITIONAL HEALING

When Southcentral Foundation (SCF) started planning for the expansion of its Anchorage Native Primary Care Center (ANPCC), leadership made sure that traditional healing would be formally established as an outpatient clinic with its own physical space. It was time.

For years, SCF had been exploring the traditional wisdom of Elders and studying the healing approaches that Alaska Native people had been practicing for thousands of years. An Indian Health Service (IHS) grant in 1991 helped SCF fund a survey of traditional healing practices and talking circles with culture bearers. Another grant, transferred from the Alaska Native

Medical Center in 1997, enabled SCF to hire Rita Blumenstein on contract to further explore how traditional healing could be integrated into the accredited medical envi-

ronment. She was certified as SCF's first tribal doctor in 1999, and dedicated her time initially to consulting with providers in behavioral health. The providers were very open to the support she lent, and another tribal doctor, Lisa Dolchok, who had been the chair of the Traditional Healing Elder Council, was added to the team.

SCF transferred its traditional healing program from behavioral health to its executive and tribal services division, knowing the new clinic would start to see customer-owners from both the behavioral health and medical practice areas. By 2001, when the new wing of the ANPCC opened, family medicine providers were also consulting with the healers and a referral process was deployed. Referrals were made for the same services offered today: culturally sensitive supportive

counseling, healing touch and healing hands, and traditional cleansing through song, dance and prayer.

When the ANPCC expanded again in 2003, a traditional healing garden was started outside the clinic for public education. Most of the plants are native to Alaska and have been used for thousands of years to nourish and heal Alaska Native people.

Traditional healing is an extremely personalized service and people leave the visits with a better understanding of who they are, which is viewed as a necessary step on the journey to wellness. Throughout the clinic's history, SCF's tribal doctors have been working in harmony and cooperation with physicians, psychiatrists and other clinicians, not in competition. The providers participate in weekly rounds to talk about treatment plans and appreciate having the support and backup. The program does not bring in any income, but the need is so great the SCF Board of Directors continues to make the funds available. Freed from the constraints of a medical appointment format, tribal doctors have the time to go deeper into the issues and address physical, mental, emotional and spiritual healing.

"As the IHS director said, when we received her Special Recognition Award, our Traditional Healing Clinic is 'a prime example of the positive power of federal self-determination policies,'" said SCF Director of Traditional Healing and Tribal Relations Dr. Ted Mala. "It has been a real success, and we proudly carry the torch for the next generation."



“ My grandmother was a traditional healer in the village, and so this has always been a part of my life. When Alaska Native people started to take control over our health services, we started to change our way of thinking about medicine – and about traditional healing’s place in the health care system. For so long, we had let the professionals do the thinking for us. With self-determination, we reconnected with our Alaska Native values, and the recognition that there is no one right way – that there are many paths to healing. When we started to combine culture with healing, it all came together physically, mentally, emotionally and spiritually. It just started to make more sense to our people. Good medicine is respecting people and making people feel comfortable and at home. True healers will engage people and help them get to a place where they can take responsibility. This way of treating people helps them get better faster. The working model of our Traditional Healing Clinic, being fully integrated with Western medicine, is truly unique. There is a renaissance within tribes around the country – those who want to reconnect with their cultures in this way and start their own traditional healing clinics. ”

- Dr. Ted Mala, Inupiaq and Russian  
SCF Director of Traditional Healing  
and Tribal Relations





## 2002

- SCF's FWWI hosts a series of family wellness workshops in conjunction with the Alaska Federation of Natives Convention.
- SCF breaks ground for the Fireweed Building, a new, three-story clinic.
- SCF celebrates its 20th anniversary.

## 2003

- SCF's new Fireweed Building opens with dental, optometry and behavioral health services.
- SCF revamps the empanelment process to include appointments with representatives who help screen for eligibility for outside financial resources.

- In partnership with representatives from the Iliamna Lake villages and the Denali Commission, construction begins on the Nilavena Subregional Clinic in the remote community of Iliamna, Alaska.

## HEALTH CARE FROM THE CHIN UP

Southcentral Foundation (SCF) broke ground in 2002 for a 54,297-square-foot, three-story building on the same campus as its Anchorage Native Primary Care Center.

The construction project was in response to customer-owners asking for more timely provision of dental, optometry and behavioral health services, or “health care from the chin up.” Dental and optometry were SCF’s first two clinics on Fireweed Lane in Anchorage, so SCF named its newest facility the “Fireweed Building” to maintain a sense of continuity and celebrate its roots.

The Fireweed Building, which opened in 2003, offered a state-of-the-art dental clinic on the first floor, optometry clinic on the second floor, and behavioral health clinic on the third floor.

For dental, the new clinic doubled SCF’s capacity to address largely unmet dental needs. The small clinic that had been operating on Fireweed Lane for nearly 20 years moved over to the new space, and new staff were hired on to expand services. The 25 new dental chairs augmented SCF’s clinic at the Alaska Native Medical Center, which would remain a children’s dental clinic after the Fireweed Building opened.

When the U.S. Secretary of Health and Human Services visited the Fireweed Building he described the clinic as “the finest and most advanced dental facility” he’d ever seen. It also operated almost entirely paperless, and was one of the most high-tech clinics in the country.

The new optometry clinic featured high-tech rooms for visual field testing and glaucoma testing, and a new

contact lens area. Due to the larger space, SCF was able to bring in a sixth optometrist to provide services. Lastly, the new clinic enabled consolidation, to provide services in one convenient location.

“After the new clinic was built, our customers could get their eye care at one place and at one time,” said Dr. Mark Hoss, optometrist.

The Fireweed Building was also built to provide advanced clinical practices in a therapeutic behavioral health setting. The third floor created a more comfortable environment for customer-owners, and consolidated services previously offered in dispersed locations.

“When behavioral health moved into the new Fireweed Building, it not only provided better access for our customer-owners, but also pride of ownership,” said SCF Vice President of Behavioral Services Chanda Aloysius. “Our customer-owners drove changes so that the clinic would become a center for community and family therapy, with a special focus on children and adolescents.”

To make the Fireweed Building a reality, SCF received generous support from partner organizations such as the City of Palmer and Wells Fargo, who helped provide tax-exempt, bond financing for the project, and the Denali Commission who funded the dental equipment for the first-floor clinic.

The new facility was a reflection of SCF’s commitment to quality and health care excellence, and a direct result of listening to the voice of the customer.



“Historical trauma in past generations disrupted the transfer of knowledge from Elders. Coping skills and parenting skills were lost. My mom passed her trauma on to her children without meaning to. She was in a lot of pain. I’ve been a clinician for 25 years now, and I know that the pain you carry can eat you from the inside out. I share with my clients that a good portion of the distress we carry isn’t ours. I share how historical trauma came about. Over time, we have been taught not to feel, not to connect, and not to see a person’s pain. Alcohol and drug use is a symptom of people trying to turn off their feelings. In therapy, I listen to where my clients are at, and we start there. I tell them they have a right to be angry. By allowing them to feel what they feel, and by holding it in a safe place for them, I show it’s safe to share. As people, we belong in packs. If a bear was charging, it would take all of us to take that bear down. We are not equipped to do it alone – we have to rely on having people around to protect us. Group therapy can be hugely advantageous. In group, you can lay your pain out on the line and connect with people in a powerful way. We chant, sing, and drum together. And, we find truth in that message that we have everything we need inside of us to find peace and healing. It will come out if you listen.”

- Donna Horton, Ahtna Athabaskan  
SCF Clinician, Behavioral Health - Fireweed Clinic



## 2004

- The Russian Orthodox Church participates in FWWI education and training.
- SCF President/CEO Katherine Gottlieb receives the prestigious MacArthur Fellowship, also known as the “genius award.”

## 2005

- The SCF Elder Program moves to a new location and broadens its services.
- SCF opens its Valley Native Primary Care Center in Wasilla, Alaska, for customer-owners living 45 to 75 miles north of Anchorage.
- SCF submits its first application to the Baldrige Performance Excellence Program.

## 2006

- At the urging of a youth intern, SCF implements a tobacco-free campus policy on the day of the annual Great American Smokeout.
- SCF opens its Health Education & Wellness Center for customer-owners and employees.

# HEALTH EDUCATION & WELLNESS CENTER

Southcentral Foundation (SCF) has long held the belief that its employees must have a full understanding of wellness – and experience it themselves – in order to best serve customer-owners. In 2005, SCF surveyed its workforce to assess employee wellness needs. The results overwhelmingly indicated that access to a fitness center would help both employees and customer-owners achieve wellness.

SCF President/CEO Katherine Gottlieb, a 2004 MacArthur Fellow, donated a portion of her fellowship award money to get the project off the ground. The SCF Health Education Department, which had been providing services in the Anchorage Native Primary Care Center for years, and grant money also helped fund the facility.

The SCF Health Education and Wellness Center was designed to serve both customer-owners and employees. SCF remodeled the second floor of one of its existing buildings to open, by 2006, a facility with a gym, exercise studio space, and meeting rooms for counseling and demonstrations. It was staffed by a team of clinical exercise specialists, health educators, and management and support staff. Together, they designed services that would promote nutrition, exercise and other healthy lifestyle choices in one-on-one and group settings.

The year the Wellness Center opened, SCF also received grant funding for the creation of a diabetes wellness gathering for pre-diabetic customers. Close connectivity between SCF’s exercise specialists, health educators, dietitians, behavioral health consultants,



complementary medicine providers, traditional healers – available all on the same campus – has meant “one stop shopping” for customers at risk for diabetes and those already diagnosed.

Today, the Wellness Center continues to support major corporate initiatives set by the SCF Board of Directors, including reducing the rate of and complications from diabetes, obesity and cardiovascular disease. It also refreshes its offerings to address new priorities such as chronic illness, stress management and Elder-specific issues, and to incorporate Alaska Native cultural traditions in classes such as Yup’ik Dance and Elders Wellness. While the facility started out with a few treadmills and some strength training equipment, it has since expanded to include recumbent bikes, ellipticals, stability balls, spinning bikes for group cycling, and more.

In all of its programs, SCF partners with customer-owners on their journeys to wellness and uses motivational interviewing as a tool to determine readiness for change. The SCF Health Education Department has assisted with this effort and has taken a strong lead in promoting small lifestyle changes that can lead to bigger changes over the long term. The department also takes these messages outside of the Wellness Center to meet customers in the settings that make the most sense to them: group classes, gatherings, workshops, health fairs and other special events.



“ I was diagnosed with Type 2 Diabetes 12 years ago. I wish I had taken the time to learn more about diabetes earlier. My life habits weren’t that bad; I didn’t smoke or drink, but I also didn’t know how important diet management and exercise were. I thought I was living healthy, but I could have prevented it, had I known more. I didn’t realize diabetes would affect my whole life. When my primary care provider reminded me I need to exercise and improve my diet, I attended a diabetes education class hosted by the Southcentral Foundation (SCF) Health Education Department. I met with one of their clinical exercise specialists and their certified diabetes educator, and I heard things from them that really hit a note with me. For instance, they talked about portion control, including that one third of a cup of spaghetti is one serving! I learned I could control what I ate. It was like someone opened the ceiling and let the light shine in. I realized I needed to change my habits. I am active all the time now, and if I slip, I don’t slip for long. I want others to feel the joy I feel, and encourage people to start now – don’t wait until tomorrow. I wouldn’t be here if it weren’t for the SCF Health Education team and facilities, truly. Diabetes will control you if you don’t control it. ”

- Melva Withers, Alutiiq



## 2007

- SCF opens its Employee Family Center, a day care for the children of SCF employees.

## 2008

- SCF builds a parking garage and breaks ground to prepare for an 80,000-square-foot expansion of the ANPCC.

- SCF launches Core Concepts, a relationship building training for all employees.
- SCF's Alaska Women's Recovery Project opens a gathering place for women to support their recovery through expanded peer-to-peer services.

## RELATIONSHIPS

Southcentral Foundation (SCF) recognizes that health care is about people and relationships. Alaska Native people have always lived life in “community,” sharing and caring for one another. And so, from the very beginning, SCF has built its health care system around the understanding that personal relationships make a difference. Relationships are the basis for SCF’s operational principles, and, as such, are at the core of every SCF program and service, as well as infrastructure.

Providers are hired and trained to create trusting, accountable, long-term, relationships with customer-owners. Getting the right diagnosis and prescribing the right medications are only the beginning and only support the real work of relationship building. When there is a relationship between a provider and a customer, there

is a better understanding of the context in which the customer lives. Real conversations can be had about ongoing choices and habits. And, it creates a collaborative environment in which individuals are choosing their paths to health and wellness, with support and coaching along the way.

SCF’s facilities are designed to eliminate unnecessary barriers between those giving and receiving services. As much as possible, a talking room is used rather than an exam room to put the customer-owner on more equal footing with the provider. Wellness is also supported outside the clinic setting, as is the case with programs like SCF’s Family Wellness Warriors Initiative, Alaska Women’s Recovery Project and many others. SCF focuses not only on treatment, but also on getting to the underlying determinants of health and wellness.

Within the workforce, trust, teamwork and personal commitment are critical. SCF has designed its human resources policies, criteria for job progression and career ladder advancement, and other workforce development initiatives to encourage and improve relationship building. Clinic managers are fully immersed in clinic operations by sitting with their support staff and spending time building relationships on the floor. SCF also uses group offices, mentoring and peer-to-peer support.

Because of SCF's Alaska Native and American Indian customer base, successful relationship building also requires that employees have an understanding of Alaska Native history and family and community values. For example, Alaska Native people have traditionally communicated important points and issues through stories. SCF leadership facilitates mandatory "Core Concepts" training to teach the ability to connect well with others in story. It reinforces the power of empathy, compassion and relationship building in the health care setting and in everyday life.

SCF's vision statement describes a Native Community that enjoys physical, mental, emotional and spiritual wellness. The mission statement emphasizes getting there by working with (not doing "to" or "for") the Native Community. SCF uses its operational principles, which spell out "R-E-L-A-T-I-O-N-S-H-I-P-S," to measure the alignment of any improvement ideas or plans. If there is good alignment, SCF will support the proposed change.



“Over the years, I've been able to bring myself to Alaska Women's Recovery Project gatherings when I'm most in need of support or in need of specific skills that will be addressed by the gathering topic. Recently, I found myself faced with a job loss. I knew that I didn't need to languish in solitude. I found myself getting up for my day, gathering myself and what I needed, and going to AWRP each morning. I knew there were gatherings and discussions scheduled that I could participate in. The life, light, warmth and moral support at AWRP became like a lifeline to me! While there, I checked online job sources, completed applications, printed resumes, made calls and scheduled appointments – all necessary aspects of a successful job search. I knew that I could always find the lights on and someone there – and avoid the isolation that leads to desperation or depression, or worse. But there was more for me: I knew that I could also BE a lifeline to someone else. I could BE the person who answers the door or the phone; the one that sweeps up and helps keep the place warm and clean and welcoming for the next woman in need. I found strength in giving back the support that was given so freely to me. That's as important as the taking – the giving back – in a circle of support and wellness. I knew that – as much as I needed this place – this place needed me, too. It's possible, in the final analysis, this place and these women saved my life.”

- Longtime participant  
Alaska Women's Recovery Project





## 2009

■ SCF completes the three-story, 80,000-square-foot expansion of the ANPCC to accommodate the growth in the number of customer-owners in the region.

■ SCF's FWWI relocates to a larger campus; just one mile west of most of SCF's other facilities in Anchorage.

## 2010

■ In partnership with the McGrath Native Village Council, the City of McGrath, MTNT, Denali Commission and ANTHC, SCF completes construction on the new McGrath Subregional Health Center in the remote community of McGrath, Alaska.

## FAMILY WELLNESS WARRIORS INITIATIVE

Southcentral Foundation's (SCF) Family Wellness Warriors Initiative is a movement that brings together leaders of the Alaska Native Community, regional corporations and agencies, health care providers, the faith community and many other interested people in an effort to end domestic violence, child sexual abuse and child neglect in this generation.

SCF invested in a new home for FWWI in 2009 in order to respond to the growing requests from all over Alaska for education and training on these issues. It relocated the program to a large campus of its own just a mile west of most of SCF's facilities in Anchorage.

FWWI's trainings have continued to grow, improve, and expand beyond expectation, offering hope for change and providing the

skills and tools necessary to effect change. FWWI is unique in that men are perceived as integral to the solution, rather than the problem.

At FWWI's two core training events – Beauty for Ashes and Arrigah House – group leaders and presenters role model what it looks like, sounds like, and feels like to share stories, as well as to respond in a way that encourages healthy relationships. Participants then share their stories in small groups.

As part of the FWWI process, Alaska Native people, ages 21 to 91, are breaking the silence about domestic violence, child sexual abuse, and child neglect for the first time and being heard, affirmed and believed. Mental health clinicians are available at the events for individualized counseling and support for group lead-

ers, presenters, and participants, as well as after the events for post-training support.

Over the past several years, tribal leaders have been inviting FWWI into their regions of Alaska. FWWI provides a structure, core philosophy and framework for the healing work, but the Alaska Native people of each region develop the plans for implementation. This strategy increases each region's awareness of the issues and commitment to sustaining the effort.

Teachers, health care providers, safety advocates, family service workers, law enforcement officers, clergy and other natural helpers are trained in the FWWI process with the understanding that they will help expand these trainings and services in their home communities. Through FWWI, they learn how to positively respond to harm and trauma disclosures and enter into healthy relationships with those whose lives have been impacted by abuse.

As a result of these regional partnerships, there are now weekly gatherings, ongoing small group discussions, and trainings and presentations complementing each other and serving specific purposes in advancing FWWI's mission throughout Alaska.

To date, 3,000 individuals have been trained in the FWWI process – about half have been male.



“ For many years, our Family Wellness Warriors Initiative has been calling for our Alaska Native men to assume their traditional roles as protectors of families and communities. During this time, it became clear that men had unique issues that were not being addressed by existing wellness programs. Most of us involved with FWWI were in our 50s and up. We wondered where the young men were. When we first got together as a men's group, a group that included men of all ages, it brought a keen awareness that men need to make their needs known. The younger men also have to find their voice, as they have different health needs and are at different stages in their careers and relationships. In the future, they will have to make decisions about what they can do to save their cultures. Change is inevitable, but if you don't know yourself (who you are and what it means to be Alaska Native), your parents, and your place in the community, there will always be a void. I was raised on a farm in Eklutna, Alaska, by the government. When I got married and met my in-laws, they helped me know who I was. I learned through their stories, and through fishing, hunting and cutting wood, that everyone has a role and a function. This community approach to everything is sacred. It is my hope that, tomorrow, our people will be stronger and more open, and enter into more healthy relationships. Better relationships means healthier people, and I think, through this work, my grandchildren will have the opportunity to be much healthier than I ever was. ”

- Max Dolchok, Dena'ina Athabascan  
FWWI Advocate



## 2011

- SCF hosts its inaugural Nuka System of Care Conference, with 150 participants from all over the world.
- SCF breaks ground for a new Valley Native Primary Care Center in Wasilla, Alaska, to serve the rapidly growing population.

- SCF launches a comprehensive public awareness campaign on youth suicide prevention.
- SCF is one of four recipients of the 2011 Malcolm Baldrige National Quality Award.

## 2012

- SCF serves 58,000 customer-owners, offers 65 programs and maintains a workforce of 1,500 employees.
- SCF celebrates its 30th anniversary.

## AWARD-WINNING NUKA SYSTEM OF CARE

Southcentral Foundation (SCF) is more than a hospital or a primary care center supported by specialty clinics. It is a system of care, driven by Alaska Native customer-owners, that strives to address the needs of the whole person. It is built on a foundation of long-term relationships, transfer of control to the customer-owner, integration of the mind, body and spirit, and a commitment to measurement and quality. This is SCF's Nuka System of Care, and it has won national and international recognition for its sustained success over the course of three decades.

SCF's Nuka Institute was launched in 2010 to address the increasing number of requests from health care leaders and agencies around the world who want to learn more about the Nuka System of Care. The Nuka Institute conducts trainings and presentations and hosts site visits. In 2011,

SCF welcomed more than 200 people to its Anchorage campus for its inaugural Nuka System of Care Conference. Feedback from participants indicated they connected with SCF's improvement story and were eager to tailor SCF's best practices to their own unique settings.

When people contact the Nuka Institute, SCF's outcomes measurement is often a topic of great interest. SCF's journey with measurement started in its infancy. SCF was able to track and measure, but not able to identify best practices on a large scale. Once SCF started to empanel customers to primary care teams, the clinics were able to identify who was responsible and accountable for each customer-owner's screenings and care. This was a step forward, but it wasn't until data professionals joined the team that SCF was able to pull reports and analyze actionable data. Among the Nuka System of



Care's great successes was the establishment of the SCF Data Mall in 2003.

The Data Mall has enabled SCF employees to learn from each other in the pursuit of the best outcomes for the entire customer-owner population. SCF employees on the front lines are provided access to aggregate and individual data. Performance is segmented, so that employees can ask the top performers what they did to be successful and integrate this into their own workflows. Provider teams are able to not only evaluate their current performance against their peers, but also against past performance and nationally accepted benchmarks. This data-driven approach, coupled with the right training, support and methodologies, has helped SCF achieve tremendous gains in performance, and therefore health outcomes.

SCF's leadership has created a culture where ideas for improvement – at least, those in alignment with SCF's operational principles – are fully supported. Employees are empowered to listen to the voice of the customer and find systems and process improvements that can best meet their needs. Improvement teams in each division help the effort by coaching employees through small tests of change and learning, using SCF's improvement tools, before broad implementation.

These practices, and many more, were highlighted in SCF's application to the Baldrige Performance Excellence Program, and resulted in the Malcolm Baldrige National Quality Award recognition in 2011.



“ Our Nuka System of Care is customer-driven and based on relationships, so we've been very good at having conversations with each other about what's working and not working. However, we were growing so fast, we needed to focus on our infrastructure and find tools that would help us make our changes in a systematic way. We started using the Baldrige tools and performance criteria in 2004. The Baldrige process provides us with questions to ask ourselves about what we do, how we do it, and how we know it's making a difference. Baldrige fits SCF's philosophy, and has helped us carry out our corporate goals of Shared Responsibility, Commitment to Quality, Family Wellness and Operational Excellence. When we received the Baldrige National Quality Award, it validated more than just the power of our great planning and improvement tools and measurements. It also proved that knowing who your customers are and having every customer and employee take a role in improvement produces great health outcomes!

The Baldrige Award recognizes 30 years of health care transformation led by our Alaska Native customer-owners. The Native Community and our workforce are full of brave, courageous out-of-the-box thinkers that move forward in relationship and make things happen. ”

- Michelle Tierney, SCF Vice President of  
Organizational Development & Innovation

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## In Memory of...



John Monfor

Sept. 10, 1944 – Sept. 28, 2000



John Colberg

April 30, 1931 – Dec. 23, 2002



Robert Singyke

Oct. 2, 1935 – May 7, 2007



Sophia Chase

Oct. 13, 1939 – Jan. 12, 2008

Southcentral Foundation honors its 30 years of Alaska Native governance, and the dedicated service of both past and present board members. Among these, we honor posthumously our four board members who have passed on. Thank you for your vision and leadership.





ancy • 1991 - Healthy babies is goal of new treatment center • 1991 - Women's screening clinic ensures quality care • 1995 - Alaska Native people honor healer, friend: Elders, performers remember psychiatrist lost off Russia last month • 1996 - Personal impact: Breast cancer brochure and videos make powerful impression with Alaska Native women • 1997 - 'Healthy Generations' Conference • 1997 - CIRI helped out big for outpatient care • 1997 - Coming to life: New Native health center ready • 1997 - New hospital: Beyond the walls, a medical miracle • 1997 - It's like a 'star hospital': More than 2,000 laud Alaska Native center • 1999 - Metro News: Southcentral Foundation lauds Stevens, CIRI • 2000 - More room for healing: Alaska Native health clinic expansion underway • 2000 - Troubled teen gets a 'safe place to heal', project also adds new building for pregnant women • 2000 - Pathways: Alaska Native program shares similarities with San Francisco rehab approach • 2001 - Harried doctors try to ease big delays and rushed visits • 2001 - Child Abuse Prevention Month ends with the success stories • 2001 - Streamline: Goal is to see customers on the same day they call • 2002 - Growing up: One meeting focuses on healthy transition • 2002 - Family Wellness Workshops open