

New Bristol Bay Health director to arrive soon

The Bristol Bay Area Health Corp. (BBAHC) hired John H. Dombolten of Kalispell, Montana as our new Director of Hospital Services. He has been on board since the later part of July. His wife, Paula, will be arriving in Bristol Bay in a couple of weeks. John's past experience was primarily with the military and private sector. We are happy to have John on board.

As with other areas in the State, BBAHC is very much concerned about patient travel. Travel monies had been budgeted pretty much as in the past.

BBAHC is asking all those who can pay to do so so that diminishing patient travel funds can go further. BBAHC also is trying to work with our villages to request their help to relieve the problem, but this is difficult because some of the villages are a part of the Anchorage Service Unit which makes it very difficult.

A balanced budget allowing for patient travel is necessary due to the financial status of our people. The fact that our people have received the service is a matter of course, but now are being denied access since IHS and Congress have cut our budget.

We have experienced the same budgetary constraints as with the other Service Units and health corporations as it

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relates to the IHS budget scenario.

Our third-party billing ability helps some, but it is not sufficient to fulfill our needs for the area.

We received slightly less than our Fiscal Year 82 level of funding from the State for Alcohol and Mental Health Programs for FY83 while our deficiencies still remain in this area.

Several fiscal and program reviews and audits by federal, state and private agencies have taken place. Verbal word is that Joint Commission on Accreditation of Hospitals (JCAH) has extended our certification another year under the current accreditation and will visit us next year. We also have decided to go for a College of American Pathologists' CAP certification for the lab.

BBAHC is seeking resumes and/or phone calls at (907) 842-5201 from anyone interested in being a nurse or family practice physician at the Bristol Bay Area Hospital, either as an IPA/detail or direct hire employee. Other vacancies are for an EMS Trainer and Maintenance Foreman.

We strongly urge that the IHS Indian Self-Determination Memorandums, ISDM 81-1 and continuing as ISDM 82-1, etc., be very closely scrutinized and opposed for they are restricting our rights under P.L. 93-638.

Due to a number of reasons, the government continues to complicate something that was intended to simplify provision of services to our people. This keeps the control with a bureaucracy rather than moving it over to the recipient of the service.

BBAHC has not resolved the funding entitlement/contractual problems with IHS which date back to the beginning of our contract to manage the Bristol Bay Area Hospital (formerly Kakanak Hospital). This was presented to the Congressional Select Committee on Indian Affairs at their June 30, 1982 oversight hearings by BBAHC's attorney, S. Bobo Dean. Negotiations continue on concerns we have for ourselves and all 638 contractors.

BBAHC's Accident Prevention Program sponsored a water safety program from

July 14 to Aug. 13. Four water safety instructors were hired to teach water safety, hypothermia prevention, first aid and many other educational safety training procedures.

The poor fishing season in Bristol Bay, due in large part to the price settlement problems, will in part necessitate the need to continue with patient travel at the past year's level. We urge ANHS/ANMC to make this a priority area as inflation inroads are diminishing the budget.

We must help the Secretary of Health and Human Services define his responsibility to our people and let our congressional delegation know our

concerns.

Special attention needs to be paid to the IHS legislative issues for FY84 and IHS' position on other issues that will affect our people.

BBAHC would like to urge the state legislature to strongly consider funding the HSAs and State Health Coordinating Council as integral units of good health planning on the local and state levels.

Their efforts are essential to cost containment in the health care area. In addition to working closely with the regional health corporations, we want these entities to work closely with the Alaska Native Health Board.