

ALASKA LEGISLATURE COMMITTEE FILES 1983-1984 8672

2258 HHESS • HB 353 - HB 355 • 2258

ST. PAUL SCHOOL - PRINCE OF ISLANDS

- ...eliminates the need for fill to accommodate its construction.
- ...still have access to basement storage on north side although this could be altered by new access to gymnasium for the public.
- 19. Cover encircled court area for use as High School Media Center.
 - ...keeps all media resources centrally located, controllable by one director.
 - ...effective energy control, by reducing exterior wall exposure.
- 20. Build new Greenhouse in upper spaces of New Media Center.
 - ...gives southern exposure.
 - ...close proximity to science rooms.
 - ...give access to both Elementary and Secondary students.
- 21. Relocate existing transformer vault.
 - ...primary service probably has to be encapsulated to existing if we enclose it within the new addition.
 - ...special requirements of National Electric Code for transformer vault.
- 22. Provide additional restroom facilities as follows:

Elementary:	WC: 11	urinals: 3	Existing
	3	3	Required
Secondary:	WC: 3	urinals: 2	Existing
	3	2	Required

None required except that location of existing are not very convenient - perhaps can use the facilities in the east wing (Jr. High) for High School as well as have students use new Gym facilities.
- 23. Relocate student lockers to new Commons Area.
 - ...gets them out of media center and elementary students area.

ST. PAUL SCHOOL - PRIBILOF ISLAND

24. Improve, modernize, redesign, and reconstruct the existing mechanical system.
1. Improve existing heating system for open classroom space around media center 44.
 - ...many diffusers and return air registers are blocked off by book shelves and other equipment.
 - ...the existing distribution system short-circuits itself. Ductwork must be extended to distribute air at outside walls and return at core so can get a more laminar flow from the cool outside to the inside spaces.
 - ...Coil sizes may require enlarging.
 - ...a boiler may be required for conversion of old gym because new activities will be more sedentary and require more heating.
 - ...more efficient boilers may be feasible.
 - ...other methods such as base board heating, shut down of air handlers at night, improved filtration, change of shower temperature-controlled valves, etc., would contribute significantly to energy conservation.
 2. Close up most of the exterior doors from the classrooms. They are not required as exits and contribute tremendously to heat loss.
 - ...they are not used significantly, if at all.
 - ...they, however, have been used as a means to have the structure classified as a 1-hr. building, increasing allowable areas within fire enclosures.
 - ...fire separation walls will be required to comply with code requirements for maximum area allowances or a fire sprinkler system may be installed in lieu of some separations. A fire sprinkler system would improve fire protection and insurance ratings.
 3. The conversion of the existing gym to other uses will require different mechanical design for different activities.

ANALYSIS OF COSTS FOR ST. PAUL SCHOOL

...Construction project as per projected enrollments
to 1988 and Grades K-12.

Construction Costs

I. New

1. Project Area	23,800 S.F.	
2. Construction Cost (1985 bidding):	\$207.75/S.F.	
3. Project Construction Cost:		\$4,944,720.00
4. Equipment and Furnishings:		\$ 395,580.00

II. Remodeling

1. Project Area (Remodeling):	8584 S.F.	
Construction Cost (1985 bidding):	\$78.40/S.F.	
Project Construction Cost:		\$ 672,960.00
2. Mechanical/Electrical Modifications:		\$ 539,680.00
3. Equipment and Furnishings:		\$ 53,840.00

III. Total Construction Cost: \$6,606,780.00

Other Project Costs

IV. <u>Contingency @ 8%</u>		\$ 528,550.00
V. <u>Architectural and Engineering Fees:</u>		\$ 713,530.00
VI. <u>Soils Survey and Testing:</u>		\$ 75,000.00
VII. <u>Administration:</u>		\$ 158,480.00

TOTAL PROJECT COST (ST. PAUL): \$8,082,340.00

ST. PAUL SCHOOL - PRIBILOF ISLAND

ENERGY CONSERVATION COMMENTARY

In view of the severe winds on the Pribilofs, and the high costs of electrical generation and fuel costs for heating, an explicit and aggressive energy conservation program must be explored in the School design process so that the facilities will be as conservative as possible. The following are several ideas that should be explored in the design process or prior to it by grants for special studies. Some are tried and true, others may be, in concept, very exotic but may prove feasible where costs are so high.

1. Earth berming.
2. Minimizing doors and operable windows to reduce infiltration.
3. Reinsulate, and super insulate new construction.
4. Daylight as much as possible to take advantage of natural lighting.
5. Wind power.
6. Passive solar principles where applicable.
7. Use the most modern state-of-the-art mechanical equipment.
8. Life-cycle cost evaluation of design, equipment, and systems.
9. Heat reclaim of exhausted air and process heating equipment.
10. Arctic entries.
11. Tidal mills for electrical generation.
12. Design building skin to reduce air infiltration.
13. Special considerations for alleviating or reducing specific requirements by governing Codes and Building Standards, where life safety is not jeopardized.

ANALYSIS OF TEACHER HOUSING COSTS FOR ST. PAUL ISLAND

...Construction projected for 1984 season 8 units.

I. Construction

1. Project Area: 11,000 S.F.
2. Construction Cost (1984 bidding): \$159.50/S.F.
(Reflects 13% escalation factor
for each year after 1983)

3. Project Construction Cost: \$1,864,500.00

II. Furnishings \$ 280,500.00

III. Total Construction Costs \$2,145,000.00

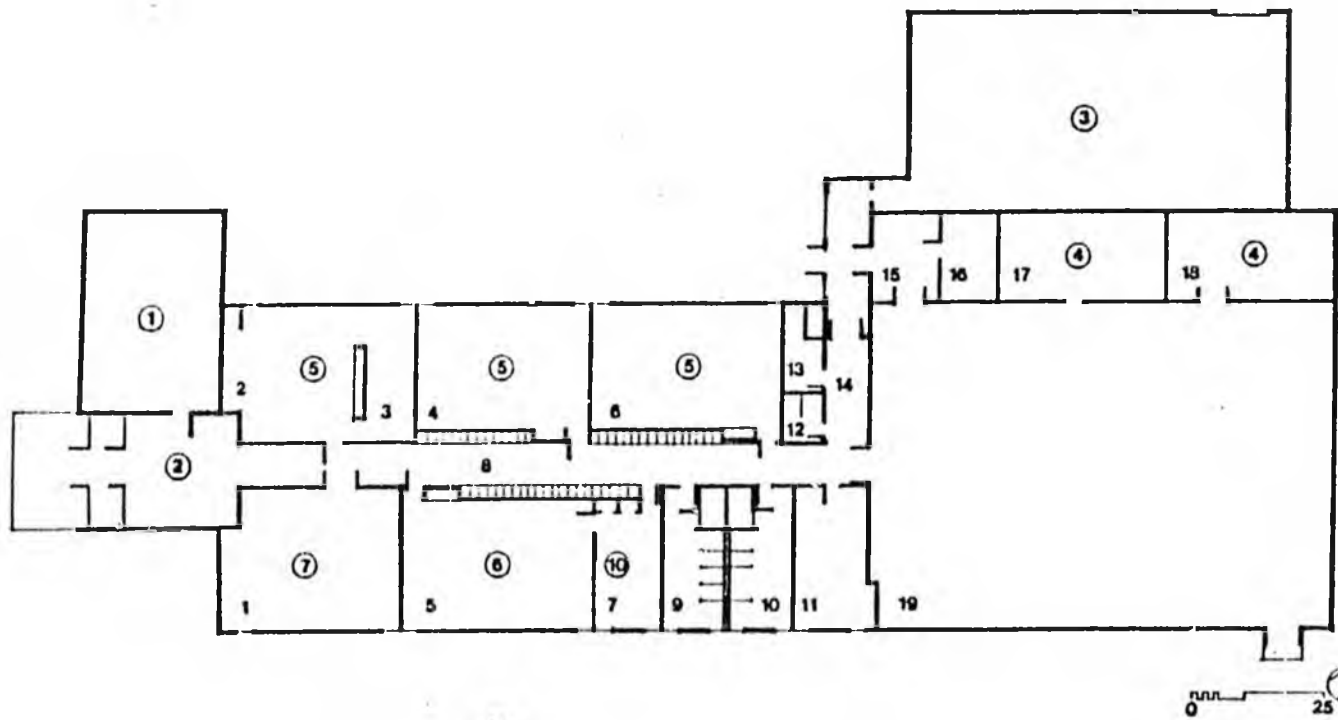
IV. Project Contingency @ 3%: \$ 64,350.00

V. Architectural and Engineering Fees @ 6%: \$ 132,560.00

VI. Administration: \$ 46,840.00

TOTAL PROJECT COSTS: \$2,388,750.00

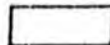
ST. GEORGE



ST. GEORGE
PRIBILOF ISLAND SCHOOLS

COLLABORATIVE
 DESIGN
 ARCHITECTS

CIRCLED NUMBERS REFER TO WRITTEN DESCRIPTION IN TEXT.
 ENCLOSED NUMBERS REFER TO EXISTING ROOMS AS LISTED IN TEXT

 NEW CONSTRUCTION

ST. GEORGE SCHOOL

GENERAL SPATIAL REQUIREMENTS

1. Construct new space for a Media Center at the west end of the building.
.....New Area Requirements: 1000 s.f.
2. For foul weather protection construct an entry vestibule as a transition and waiting space and an arctic entry.
.....New Area Requirements: 200 s.f.
3. Construct a Vocational/Industrial Arts facility.
.....New Area Requirements: 2400 s.f.
4. Provide additional storage for the Media Center, Audio/Visual aids, and art supplies by utilizing the rooms adjacent to the Multi-Purpose Room 19.
.....New Area Requirements: None

Most of the curriculum needs for St. George can be accommodated by renovating the existing facilities to furnish more special spaces for designated uses. No other new space will be required. In addition the general condition of the interior requires some remedial repair, especially at the entry doors, although it, like St. Paul has been well maintained. The wall surfaces, being glazed clay tile, are much more durable than the frame walls at St. Paul and require somewhat less care. This list continues with those modifications.

5. Remodel interior spaces to adequately accommodate Kindergarten through Grade 12, providing sinks, blackout means for A/V use, repositioning teaching aids as required, and changing interior finishes to accommodate specialized programs.
6. Remodel Room 5 to accommodate Home Economics and Home Skills.
7. Remodel to provide adequate Business Education facilities, including a Computer Center, typing facilities, and space for other business equipment appropriate for educational purposes.

GENERAL SPATIAL REQUIREMENTS (Con't)

8. Regrade the entire site to alleviate poor drainage characteristics around the building and play area, especially on the south and west sides.
9. Replace and relocate oil storage facilities to provide adequate separation from the building.
10. Convert a portion of the Principal's Office, Room 7, to a Radio Communications Center.

GENERAL SUPPORT FACILITIES

11. Construct three units of Teacher Housing for the 1985 school year.

.....New Area Requirements:

3500 s.f.

ANALYSIS OF COSTS FOR ST. GEORGE SCHOOL

...Construction project as per projected enrollments to 1988, and Grades K-12 starting in 1986.

Construction Costs

I. New

A. Project Area:	3600 S.F.	
B. Construction Cost (1985 bidding): (Reflects 13% escalation factor for each year after 1983)	\$216.00/S.F.	
C. Project Construction Cost:		\$ 777,600.00
D. Equipment and Furnishings:		\$ 77,800.00

II. Remodeling

A. Project Area (Remodeling):	7344 S.F.	
B. Construction Costs (1985 bidding):	118.00/S.F.	
C. Project Construction Cost: *		\$ 866,600.00
D. Equipment and Furnishings:		\$ 43,400.00

III. Relocate Oil Storage Facilities: \$ 80,000.00

IV. Site Grading \$ 50,000.00

V. Total Construction Cost: \$1,895,400.00

VI. Project Contingency @ 8%: \$ 151,600.00

Other Project Costs

VII. <u>Architectural and Engineering fees:</u>	\$ 204,700.00
VIII. <u>Soils Survey and Testing:</u>	\$ 75,000.00
IX. <u>Administration:</u>	\$ 45,400.00

TOTAL PROJECT COSTS (ST. GEORGE): \$2,372,100.00

* On-Site inspection must be made to confirm these Remodeling Costs.

ST. GEORGE SCHOOL - PRIBILOF ISLAND

ST. GEORGE ENERGY CONSIDERATIONS

The following recommendations are given to reduce the demands for energy for comfort control, in view of the severe weather conditions and the total dependence on shipped fuel for heating and power generation. The general comments in the St. Paul section apply here as well. Specifically, the following should be done or at least evaluated on a life-cycle cost basis to determine their effectiveness although generally, they are very effective under severe weather conditions.

1. Earth berming to reduce wind exposure and improve drainage. With masonry construction for the original building, this can be accomplished easily, although careful placement of soil is required.
2. Reinsulate and super-insulate the building shell.
3. Construct an arctic entry at the Gymnasium entry.
4. Insulate all heating piping and ductwork, preventing heat loss and protecting children from burns.
5. Provide a potable water supply with a distiller.
6. Replace entry door hardware with more durable styles, insuring positive latching and closure.

ANALYSIS OF TEACHER HOUSING COSTS FOR ST. GEORGE ISLAND

...Construction projected for 1985 season 3 units.

I. Construction

1. Project Area: 3500 S.F.
2. Construction Cost (1985 bidding): \$193.65/S.F.
(Reflects 13% inflation factor
for each year after 1983).

3. Project Construction Cost: \$ 677,770.00

II. Furnishings: \$ 76,500.00

III. Total Construction Costs: \$ 754,270.00

IV. Project Contingency @ 3%: \$ 22,630.00

V. Architectural and Engineering Fees @ 6%: \$ 46,600.00

VI. Administration: \$ 16,500.00

TOTAL PROJECT COSTS: \$ 840,000.00

PLEASE NOTE: THE PRECEDING PAGES WERE TREATED
AS A UNIT IN THE ORIGINAL DOCUMENT.

H

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COMMITTEE REPORT

HOUSE

FURTHER:

(7)

4/13/83

Date:

4/23/83

Mr. Speaker:

HEALTH, EDUCATION AND
SOCIAL SERVICES

The Committee on

has had HB 354

"An Act relating to physicians' staff privileges in hospitals."

under consideration and reports it back as follows:

- [] do pass [] do not pass
- [] do pass with attached amendments(s)
- [] replace with CS for _____ [] same title
[] new title
- and recommends _____
- [] AND attaches a "Letter of Intent" [] New Fiscal Note
[] reports it back without recommendation [] Zero Fiscal Note Attached
- [] referred to the _____ Committee

MEMBERS SIGNING DO PASS

[Signature]

[Signature]

[Signature]

[Signature]

MEMBERS HAVING OTHER RECOMMENDATIONS:

[Signature]

[Signature]

CHAIRMAN

STAFF REPORT

HB 354 Relating to Physicians Staff Privileges
April 25, 1983

HB 354 requires hospitals to notify the State Medical Board when within seven days of the suspension or revocation of staff privileges in a hospital.

The purpose of this bill is to provide notice to the Medical Board that privileges have been altered, thereby alerting the Board that a problem of a professional nature may exist with a physician.

This bill follows the recommendation found on Page 4 of the performance audit of the Medical Board made July 30, 1982 (Audit No. 08-112-0082-R).

No position paper or fiscal note has been received as of the morning of hearing date.

FINDINGS AND RECOMMENDATIONS

Recommendation No. 1

Legislative consideration should be given to regulatory changes concerning the disciplinary process and the composition of the Board.

The 1978 audit recommended the establishment of regulations to ensure consumer complaints receive an impartial examination on the basis of merit. CSSB 237 delineated the grounds for imposition of disciplinary sanctions and disciplinary actions to be imposed. These grounds included unprofessional business practices as well as malpractice. This bill did not pass, and we recommend that it be reintroduced to the Legislature.

In addition, we believe statutory changes in the following areas would benefit the public:

- A. Hospitals should be required to notify the State Medical Board when a practitioner's hospital privileges are refused or restricted because that person is a real or potential danger to the public. If hospitals were to report such actions, the Medical Board could initiate an investigation to determine if a questionable practitioner should retain his or her license.
- B. The Board should adequately represent those persons it regulates. The Board regulates 689 physicians, 73 physician assistants, 53 paramedics, and 10 podiatrists. The Board is currently composed of 5 physicians and 2 public members. Allowing participation of all occupations regulated by the Board would ensure that one occupational group does not promote its interests over the interests of an unrepresented occupational group.

Introduced: 4/13/83
Referred: Health, Education &
Social Services

*Voted do not pass
without amending*

1 IN THE HOUSE

BY KOPONEN AND FRITZ

2

HOUSE BILL NO. 354

3

IN THE LEGISLATURE OF THE STATE OF ALASKA -

4

THIRTEENTH LEGISLATURE - FIRST SESSION

5

A BILL

6

For an Act entitled: "An Act relating to physicians' staff privileges in
7 hospitals."

7

8

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9

* Section 1. AS 18.20 is amended by adding a new section to read:

10

Sec. 18.20.076. REPORTS OF SUSPENDED OR REVOKED STAFF PRIVI-

11

LEGES. (a) Within seven days after suspending or revoking the staff
12 privileges of a physician, a hospital shall notify the State Medical
13 Board of the name of the physician and the circumstances involved in
14 the suspension or revocation.

15

(b) The notice under (a) of this section is subject to the

16

confidentiality provisions of AS 18.20.090 and AS 18.23.030.

AMENDMENT ^{# /}

OFFERED IN THE HOUSE:

By: TISCHER

To: _____ HOUSE BILL No. HB 354

SENATE BILL No. _____

PAGE: I

LINE: 13

Following the word "Board" insert: "in writing".

HARRY TREAGER 2534

PASSED OUT indiv REC - 4- DO PASS

1- NO REC

1- DO NOT PASS

of Fiscal note

STATE OF ALASKA 1984 LEGISLATIVE SESSION
FISCAL NOTE

Revision Date: Jan. 30, 1984

REQUEST

Bill/Resolution No.: HB 354 am
Title: "An Act relating to
physicians staff privileges"
Sponsor: Reps. Koponen & Fritz
Requestor: H E S S
Date of Request: _____

FISCAL DETAIL

Agency Affected: Commerce & Economic Dev.
Program Category Affected: _____
Public Protection
BRU, Program or Subprogram(s) Affected: _____
Occupational Licensing

EXPENDITURES/REVENUES: (Thousands of Dollars)

	FY 84	FY 85	FY 86	FY 87	FY 88	FY 89
OPERATING						
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 SUPPLIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS						
800 MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
TOTAL						

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

SOURCE OF FUNDS TO OFFSET FISCAL IMPACT OF BILL:

N/A

ANALYSIS: Attach a separate page for analysis

Prepared By: Darrell Miller

Division: Occupational Licensing

Phone: 465-2535

Date: Jan. 30, 1984

Approved by Commissioner: Richard A. Lyon

Agency: Commerce & Economic Development

Date: 2/3/84

Distribution (by Agency preparing fiscal note):

- Legislative Finance
- Legislative Sponsor
- Requestor
- Office of Management and Budget
- Impacted Agency(ies)

12/1/83

H

B

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northern alaska health resources association, inc.

February 6, 1984

The Honorable Mae Tischer
Alaska House of Representatives
Pouch V
Juneau, Alaska 99811

Dear Representative Tischer:

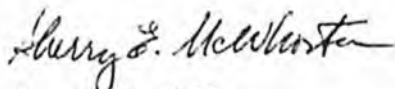
As you know, SB 334, "An act relating to health resources development," is now being considered by the Senate HESS and Finance Committees. There is also a companion to this bill in the House, HB 355. These bills would continue regional health resources planning and development throughout the state.

It is our understanding that many of the Senators and Representatives have been receiving mail from constituents in support of these bills. However, given the short time before committee hearings begin, the Board of Directors of the Northern Alaska Health Resources Association wanted you to have access to letters written last year on the same matter. The enclosed packet contains copies of letters sent to NAHRA last year; you may have others in your files of which we do not have copies.

Please consider these letters as evidence of support for health resources development organizations. We would be happy to provide any other information that you might need.

Thank you in advance for your support of SB 334/HB 355.

Sincerely,



Sherry E. McWhorter
Executive Director

encl

RECEIVED MAR 24 1983

Tanana Chiefs Conference, Inc.

Doyon Building
201 First Avenue
Fairbanks, Alaska 99701
Phone (907) 452-8251

March 23, 1983

The Honorable William Sheffield
Governor, State of Alaska
Office of the Governor
Pouch A
Juneau, AK 99811

Dear Governor Sheffield:

This is to express the support of the Tanana Chiefs Conference for continuation of an adequate level of state funding for the operation of Health Systems Agencies in the State.

The Tanana Chiefs Conference has participated actively in the Health Systems Agency for the northern region, the Northern Alaska Health Resources Association (NAHRA) since its formation in 1975. The Board of Directors meetings have provided a neutral meeting ground where health care providers and consumers can jointly establish specific objectives for health system development, negotiate conflicts at the local level, and provide the Department of Health and Social Services with a balanced perspective of state health affairs and issues in Northern Alaska.

The staff of NAHRA has maintained a reputable level of technical assistance to the Tanana Chiefs Conference and to various communities and health service organizations in Interior Alaska; health statistical information has been consistently compiled and analyzed in a manner beneficial to providers, the public, and to the State.

We recognize that this level of effort has also been maintained by the other two HSA's in the State, and that the variability of situations in the three regions is such that the continuation of these three entities is reasonable and desirable:

It is our recommendation that the State restore to the FY84 budget the funding level authorized for FY83; further we urge your administration to follow the lead of other states in enacting legislation and appropriating funds to continue the regional health systems development network initiated by the Federal government on a long term basis.

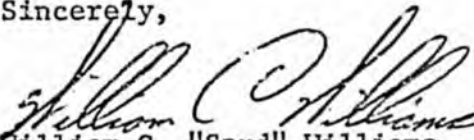
Such action would allow the State to establish a system designed to meet our continuing need for guidance in the development of our health resources.

Governor Sheffield
March 23, 1983
Page 2

A resolution of support for continuation of this public service was endorsed by the 1983 meeting of the Board of Directors of the Tanana Chiefs Conference (enclosed).

Your attention to this significant issue is appreciated. Please contact myself or Mr. Paul Sherry at 452-8251 for further information.

Sincerely,



William C. "Spud" Williams
President

WCW/PS/kh

c: Interior Alaska Legislators
Emil Notti, Office of the Governor
Allen Blume, Office of the Governor
J. B. Carnahan, NAHRA President
Dr. Charles Kaltenbach, Alaska Health Coalition

5044

TANANA CHIEFS CONFERENCE, INC.

Funding for Northern Alaska Health Resources Assn.

Resolution No. 83-60

- WHEREAS: the health care needs of Alaska Natives have been shown to be serious and to require continuing, long-term attention; and
- WHEREAS: the effective services to meet these needs must be based on professional planning, which in turn requires a continuity of the planning work; and
- WHEREAS: the Tanana Chiefs Conference serves to advocate for the needs of Alaska Natives in the Interior;
- THEREFORE BE IT RESOLVED that the Tanana Chiefs Conference Board of Directors requests the Alaska Legislature's attention to the need to continue funding for the Northern Alaska Health Resources Association at a level sufficient to enable them to fulfill their health planning function.

CERTIFICATION

I hereby certify that this resolution was duly passed by the Tanana Chiefs Conference, Inc. Board of Directors on March 17, 1983 at Fairbanks, Alaska.

Tanana Chiefs Conference, Inc.
Dorothy Shockley
Secretary/Treasurer

RECEIVED FEB 22 1983

Maniilaq Association

Senior Citizen Center
P.O. Box 260
Kotzebue, Alaska 99752
(907) 442 - 3590

P.O. Box 256
Kotzebue, Alaska 99752
(907) 442 - 3311
Alcoholism Program (907) 442 - 3914

Public Health Nursing
P.O. Box 170
Kotzebue, Alaska 99752
(907) 442 - 3313

February 16, 1983

Dr. Charles Kaltenback
Northern Alaska Health Resources Association
529 5th Avenue, Suite 8
Fairbanks, Alaska 99701

Dear Dr. Charles Kaltenback:

I am writing in support of the funding of our Northern Alaska Health Resources Association. As a board member of this committee, I feel it would be a catastrophe if our health system agencies are not re-instated into the budget after August 31, 1983.

Northern Alaska Health Resources Association (NAHRA) is the only group in our region who provides technical assistance to agencies and communities in grantmanship, community organization, management, evaluation, program planning, needs assessments and implementation. We maintain a current data and information base which is inserted in the national presentation of health status problems and needs of our area. Our major areas of effort are community assistance, health promotion and regional advocacy. Without NAHRA none of these activities would continue.

I urge you to join me and our people in supporting this agency.

Let me know how you stand on this.

Keep up your good work for us and keep smiling.

Sincerely,


Nina K. Dahl
Health Director

NKD/etk

- cc: Albert Adams
- Frank R. Ferguson
- Robert Bettisworth
- Don Bennett
- John C. Sackett

MEMBER VILLAGES

Ivisaappaat, Nunatchiaq, Imatchiaq, Katyaak, Kivaliniq, Laugvik, Qikiqtaruk, Nautaaq, Nuurvik, Akuligaq, Isimaq
Amblar, Buekood, Daring, Eima, Eivalina, Kabuk, Kotzebue, Neetak, Nuavik, Selawik, Siumavik

NORTH SLOPE BOROUGH

OFFICE OF THE MAYOR

P.O. Box 69
Barrow, Alaska 99723
Phone: 907-852-2611

Eugene Brower, Mayor



February 2, 1983

The Honorable William Sheffield
Governor, State of Alaska
Office of the Governor
Pouch A
Juneau, Alaska 99811

Dear Governor Sheffield:

I am writing to express the North Slope Borough's support for the State of Alaska to continue to provide a sufficient level of funding for the Northern Alaska Health Resources Association (NAHRA), the Health Systems Agency (HSA) for northern Alaska.

Along with regional organizations and municipalities in the northern region, the Borough is actively represented on the NAHRA Board of Directors. This participation has afforded the Borough much benefit through technical assistance and direct involvement in planning our health care delivery to better meet local needs. NAHRA's assistance in effective regional planning has greatly improved the cost-effectiveness of our health service delivery, and has prevented unnecessary duplication of services. Furthermore, NAHRA provides constructive, realistic critiques of federal and state grant and contract proposals for health services. The organization also maintains very accurate and dependable health care statistics, and has achieved a high level of respect and notoriety as the clearinghouse for health care services provided in northern Alaska. Much of NAHRA's credibility is derived from the fact that its Board of Directors is composed of health care consumers and providers, with equal representation from the northern urban and rural areas. I believe it serves as a good example of unifying urban and rural support behind a common concern which you expressed a desire to accomplish during your successful campaign.

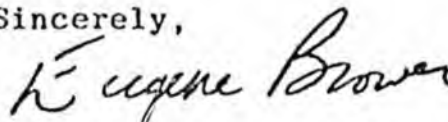
Before considering a reduction in State funding to NAHRA, I would suggest you first consider perhaps eliminating the

The Honorable William Sheffield
February 2, 1983
Page Two

great number of consumer advisory boards which were established under previous State administrations. I feel these advisory boards cannot adequately and effectively address issues which are regional in nature. It appears very appropriate to fully utilize the expertise and experience of the regional Health Systems Agencies (HSA), such as NAHRA, as a review mechanism for all health services which require State grants or contract proposals.

I appreciate your favorable consideration of my comments and recommendations.

Sincerely,

A handwritten signature in cursive script that reads "Eugene Brower".

Eugene Brower, Mayor

cc: Representative Al Adams
Senator Frank Ferguson

CC:
RECEIVED FEB 16 1983

North Slope Borough Health and Social Services Agency

Box 69
Barrow, Alaska 99723

(907) 852-3999
(907) 852-3065

10 February 1983

Governor William Sheffield
Office of the Governor
Pouch A
Juneau, AK 99811

Honorable Bill Sheffield;

Over the past decade, the idea of consumer/provider boards advising agencies that deliver a service has led to a fairly rapid and extensive proliferation of this type of group. While admitting to the basic soundness of the idea, one must question whether the multiplicity of board that it has generated is truly an effective way of bringing this idea to fruition.

It has been the experience of the North Slope Borough Department of Health and Social Services that multiple boards addressing the same issues create confusion and an added layer of bureaucratic red tape when applying for grant funding.

The one board that has consistently provided helpful, relevant evaluations and input into our service delivery programs has been the Northern Alaska Health Resources Association. Their combination of providers and consumers from the area to be impacted by the proposed service, creates a board with intimate knowledge of the problem to be addressed as well as knowledge of services already available to address the problem. Their input is valuable, because it is relevant to the specific region. Statewide boards cannot hope to have this amount of knowledge for any specific region.

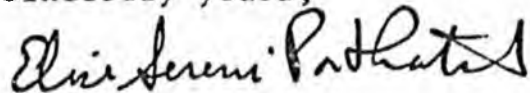
The staff of the NAHRA have also proven to be valuable resources in the researching and writing of grant proposals. They have at hand the most recent statistical data available on the problem being addressed and can often save time and effort for the grant writing agency through the technical assistance they offer.

In a time of shrinking financial support of human service programs, it is critical to evaluate where present dollars are going. It is the position of my department that a regional board such as NAHRA provides a much more valuable service than a statewide board. This position is fully supported by the North Slope Borough Mayor, Eugene Brower. I therefore urge you to restore funding for the NAHRA in the state budget.

If only limited dollars are available, I suggest regional boards such as NAHRA receive priority over the myriad statewide boards whose value is of greater question. It is my department's view that a board such as NAHRA could easily assume the review process responsibilities of these state boards since that already is one of their functions. Doing that would also provide the agency writing the grant with the assurance that the review board would have enough knowledge of their area and its particular problems to issue a critique that was relevant and helpful.

Thank you for your time and attention.

Sincerely yours,



Elise Sereni Patkotak
Director, H&SSA

cc: files

fairbanks north star borough

p.o. box 1267 520 fifth ave. fairbanks, alaska 99707 907-452-4761



March 4, 1983

The Honorable Bill Sheffield
Governor, State of Alaska
Pouch A
Juneau, Alaska 99811

Dear Governor Sheffield:

I would like to call your attention to the Northern Alaska Health Resources Association (NAHRA) and the valuable contributions that it makes to the North Star Borough.

As you know, the North Star Borough is a second-class borough and, as such, does not have health and social service powers. It is unlikely that we will assume these powers in the foreseeable future. Therefore, NAHRA provides the only forum for the public participation in the decision-making process about human service delivery for this community. NAHRA coordinates planning and community organization activities on a wide range of issues -- responsibilities which the Borough would have to assume, at increased cost, were NAHRA to cease operations.

There are numerous examples which I could cite showing NAHRA's services to the community; two activities are of particular importance at this moment. One is that NAHRA is assisting with our Borough-wide emergency medical services study; they are coordinating public awareness and community organization activities and have offered extensive planning and data assistance. Another is that NAHRA, as the primary founder and sponsor of the Arctic Alliance for People, is conducting a survey of the 71 human service agencies in the area and is spearheading the effort to develop goals, objectives, and action steps toward adoption of a comprehensive human services plan for the area. The Arctic Alliance, through NAHRA's expertise, is pursuing this planning process at my suggestion.

Recently, NAHRA provided major backing for the fourth annual Alcohol Awareness Week in the Borough area. They have also just completed needs assessments and program evaluations for the Fairbanks Rehabilitation Association, the Regional Center for Alcohol and Other Addictions, the Family Focus program, and the Fairbanks

Governor Sheffield

Page 2

Native community. They are currently leading behavioral health planning efforts for the Tanana Chiefs Conference and the North Slope Borough Health and Social Services Agency.

NAHRA also assists local non-profit organizations to tailor their grant applications closely to community needs. Within the last two months, NAHRA has worked with five child abuse/neglect and domestic violence-related service providers to ensure that grant applications submitted this year are non-duplicative and are consistent with objectives contained in the recently completed "Child Abuse and Neglect Needs Assessment" for the North Star Borough.

All of NAHRA's work is based on skilled planning processes conducted with extensive public involvement. Policies and decisions adopted by NAHRA's Board of Directors are founded in the long-range plans.

As mayor of the North Star Borough, I am responsible for appointing fifteen of NAHRA's thirty Board members. This linkage provides a significant avenue for the Borough government and NAHRA to interface, for the general good of the citizens.

I urge your support for NAHRA and the other two health systems agencies in Alaska at a level of \$200,000 each. This is a small amount of funding for the returns which these agencies bring in terms of improved coordination, enhanced efficiency of service delivery, and cost-savings in individual service agencies because of the consolidated data and management services resources. Close-out of these agencies would mean significant economic and human services losses to this state.

Thank you.

Sincerely,

SIGNED

B. B. Allen
Borough Mayor

BBA:RWC:hs
cc: Interior Delegation

March 8, 1985

The Honorable Bill Sheffield
Governor, State of Alaska
Pouch A
Juneau, Alaska 99811

Dear Governor Sheffield:

As Mayor of the City of Fairbanks, I wish to lend my support to continuation of regional health planning and resources development activities as currently practiced by the three health systems agencies.

I am most familiar with the Northern Alaska Health Resources Association (NAHRA) and the services it has provided to the Fairbanks area. Many of my contacts with NAHRA over the last four years have centered around alcohol awareness/public education activities. NAHRA has been the primary sponsor for annual activities related to substance abuse and has led the community-based efforts to address the attendant problems of alcohol abuse and alcoholism. Recently NAHRA provided valuable testimony to the Blue Ribbon Commission on Alcoholism, which I established to examine solutions to alcohol-related problems in the core area of the city. NAHRA is the City's primary source of statistical information on this topic and is the only group in the community which has conducted long-range planning activities related to substance abuse.

NAHRA provides the only community planning and data resources in the area of health and human services for use by organizations, individuals, and local government. Through their services, non-profit organizations can obtain information and management consultation free of charge, thereby saving many program dollars which can then be directed into hands-on services. This function promotes the efficiency and effectiveness of human service delivery throughout northern Alaska.

Because the North Star Borough lacks social service powers and because the City exercises its powers only to limited degrees, NAHRA provides the only real means for the citizens to play active roles in health care decisionmaking. In areas where the City is involved, such as through the City Commission on Health and Social Services, NAHRA assists the City by providing information and helping to design project review criteria and a credible review process.

NAHRA helps the community of Fairbanks and the rest of northern Alaska in many other ways. However, I think their primary importance lies in the fact that they facilitate community decisionmaking at the regional and local levels. They assist Alaskans to retain control over their own lives.

Governor Bill Sheffield

Page 2

Please retain the health systems agencies as viable entities in Alaska, and increase their funding levels to \$200,000 per agency. We cannot do without their services.

Sincerely,

Bill Walley

Mayor

cc: Interior Delegation

FAIRBANKS CITY COMMISSION ON HEALTH AND SOCIAL SERVICES
410 Cushman Street
Fairbanks, Alaska 99701

March 1, 1985

The Honorable Bill Sheffield
Governor, State of Alaska
Pouch A
Juneau, Alaska 99811

Dear Governor Sheffield:

The Fairbanks City Commission on Health and Social Services endorses continued funding for Alaska's three health systems agencies (HSAs). It is our understanding that the Governor's proposed operating budget currently before the legislature does not contain an appropriation for HSAs.

Due to drastic cutbacks in support for HSAs by the Federal Government, it is essential that increased State support be provided to continue the important activities of these agencies. We recommend that their funding level be increased to \$200,000 per agency (\$600,000 total).

The Fairbanks City Commission has worked very closely with the Northern Alaska Health Resources Association (NAHRA), the HSA for northern Alaska, during the past two years. Not only has NAHRA assisted us by providing current, accurate health-related data and information for our use; but they were instrumental in helping us establish objective criteria for reviewing social service applications which we considered and recommended to the City Council for funding last year. In addition, they recently assisted us in developing a request for proposal (RFP) for various handicapped services in the North Star Borough.

NAHRA provides an objective forum for the urban and rural residents of northern Alaska to discuss health systems issues together. Because of the diversity of Alaska's people and the health services which attempt to serve them (e.g., State, Alaska Native Health, Military, private, Native Corporations, non-profits), it is important to recognize the coordinating function NAHRA provides.

Specifically within the Fairbanks area, NAHRA has been wholly or partially responsible for establishing and maintaining the activities of the Arctic Alliance for People (organization of health and social service providers); Alcohol Awareness, Inc. (an organization of concerned consumers and alcohol treatment providers); and Fairbanks United at Noon (a monthly noon-hour gathering of health and social service providers).

We are also aware of major studies they have recently completed for the Fairbanks Rehabilitation Association, the Regional Center for Alcohol and Other Addictions, the Family Focus Program, and the Fairbanks Native community which have assisted in identifying needs and

Governor Bill Sheffield
March 1, 1983
Page Two

evaluating services. Furthermore, they are promoting a study which has been undertaken by the North Star Borough on delivery of emergency medical services within the Borough.

In summary, we believe that NAHRA is an important resource agency for Fairbanks and the northern region of the State. Because of their presence, many health services are being provided in a more coordinated, cost-effective manner. We recommend continued support for NAHRA and the other two HSAs.

Sincerely,



Linda Hulbert
Chairperson

cc: Interior Delegation

RECEIVED MAR - 4 1983

February 28, 1983

*Sent to
local
legislators / E.17*

Dear

It is essential that the regional health planning agencies continue to be funded. I have come to this conclusion based on a working relationship with Northern Alaska Health Resources Association, Inc. (NAHRA), and as an 8 year Alaskan (Fairbanks) resident.

I am presently Nursing Manager of the Fairbanks Health Center. I am also a Childbirth Educator, mother of boys 9 and 12 years, wife of a civil engineer, established as an Alaskan resident and presently completing my work towards a Masters in Public Health from the University of Washington with majors in Health Services Delivery and Business Administration.

I feel it would be a step backward for the consumers of health care in this state if the regional planning agencies did not continue to function. As a public health nurse, I have the unique perspective of working in community health. I am in daily contact with consumers of health care who request clarification of their family's health concerns. They also request assistance in how to deal with the medical care system. They know how to shop for a car, but in general are uninformed of options and choices regarding health care. NAHRA has provided an opportunity for consumer participation in health-care decision making. It is a group whose interests are not tied to a hospital business or existing public health program. NAHRA consistently has organized a through and consistent process for consumer input. Other groups may say they listen to consumers, but the quality of the process is lacking and often a decision is made and the only objective is consumer approval of one particular option.

Regional advocacy is needed. Alaska is too diverse to expect a centralized agency close to political influences to plan comprehensively. Traveling consultants may come to an area for input. They hear from the organized articulate groups who have an interest and know how to participate in a dialogue with strangers.

For the average consumer, it is difficult to give input when you first have to describe your area and it's characteristics before you feel an atmosphere of rapport exists. NAHRA staff know the Interior. NAHRA is accessible and visible. (In fact, when data is needed for program planning, much time is saved by local agencies contacting NAHRA). The average health consumer needs an established and visible group to relate to.

In my experience as a community based health professional, I have working knowledge of at least three (3) projects in Fairbanks that the community has and will benefit from through NAHRA's work:

1. Improved Pregnancy Outcome

-Grant money allocation in original proposal out of Juneau in 1980 bypassed Fairbanks completely. Anchorage area had funds tied up. Through NAHRA's format, the Childbirth Association pointed out the concern that our community be included. Result - Fairbanks High Risk Pregnancy Project - based at the Fairbanks Health Center, providing comprehensive follow-up and direct financial aid to women enrolled in the project - 1980-1983. (Information on model and statistics available on request)

2. Infant Car Seat Safety

-NAHRA's leadership in coordinating and forming an association on this issue will make a car seat loan program a reality very soon. Many professionals and consumers have been concerned about this issue for years, yet no one has had the time or expertise to get people together and plan. The community will gain because NAHRA was available.

3. Needs assessment child abuse/neglect and related services

NAHRA brought agencies together for this process. The process was a good example of how NAHRA facilitates communication among health providers and agencies. With more power given to NAHRA, duplication of service programs could decrease and gaps in service identified and filled.

(Please feel free to contact me for more details)

NAHRA has an objective regarding Health Promotion. The educational formats sponsored by NAHRA raise the level of public knowledge regarding health and at the same time, the number of "informed consumers" of health care is increasing.

As a legislator, you have a responsibility to the majority of your constituents. This includes a concern for cost-effectiveness and setting priorities when limited funds are available. NAHRA provides a community based mechanism to assist you in decisions on priorities. Objective evaluations of existing programs can also be provided by this professional health planning group. Decisions regarding health care delivery influences the total quality of life in our community. Informed and educated consumers may help decrease medical costs through their own practices, in the long term.

At the present time, it is essential that NAHRA continue to analyze in an objective, organized and documented format the health needs of the community. Again, in my opinion NAHRA needs to continue to be supported as an independent, unbiased, regional health planning agency.

Sincerely,

Elaine McKenzie EM

Elaine McKenzie

EM/nlr

RECEIVED MAR 9 1983

MC GRATH-ANVIK COMMUNITY & FAMILY SERVICES
BOX 44
MC GRATH, ALASKA 99627
(907) 524-3867



March 3, 1983

John Sackett
Capitol
Room 520/528
Pouch V
Juneau, AK 99811

COPY


Dear Senator Sackett,

I am writing in regard to the plight of the state's Health Systems Agencies, who are again this year facing an end to their existence. It is my understanding that all state funding for their operation has been eliminated from the governor's budget.

In the past I have found involvement with Northern Alaska Health Resources Association, Inc., useful to our own regional planning. I believe that they have strongly supported efforts to develop realistic planning for our more rural areas. I would hate to see this strong advocacy resource lost in the state.

I hope you will support efforts to reinstate them in the budget for the coming Fiscal Year.

Sincerely,


Nettie Scott, M.S.W.
Clinical Director

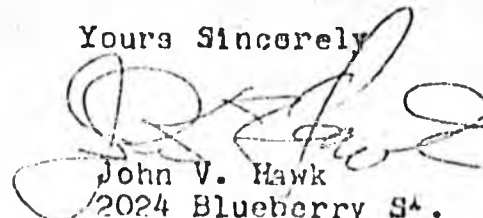
NDS:jbf

cc:NAHRA

I am writing to strongly support restoration of funding for the Northern Alaska Health Resources Association, Inc. This organization provides a vital service for Interior Alaska which should not be curtailed or eliminated but expanded. Consumer participation in health planning and implementation is vital, not only for viability and relevance of programs/services, but to monitor its quality and stimulate its improvement. NAHRA needs the funding to continue what it has done very well, and needs additional power to require response and accountability from all would be health providers proposing to serve Interior Alaskans. A recent assessment of child abuse and neglect service needs demonstrated need for expansion of services such as NAHRA provides.

Please do what you can to provide adequate funding for NAHRA in the state budget.

Yours Sincerely



John V. Hawk
2024 Blueberry St.
Fairbanks, Ak. 99701

Catholic Community Resources, Inc.

1316 Peger Road
Fairbanks, Alaska 99701
(907) 456-7123/456-1649

February 11, 1983

Senator John C. Sackett
Pouch V
Juneau, Alaska 99811

Dear Senator Sackett,

I was distressed to hear that Governor Sheffield has eliminated state funding from the budget for health systems agencies.

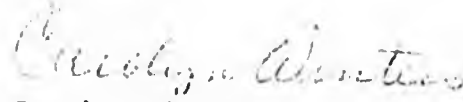
It is my observation that the assistance Northern Alaska Health Resources Association, Inc. has provided Catholic Community Resources, Inc. is typical of the help rendered other agencies across Northern Alaska. NAHRA has been a mainstay in providing technical advice to this agency, primarily through its subsidiary, Fairbanks Counseling and Adoption. NAHRA is also instrumental in assisting me evaluate proposed programs for the rural areas of the diocese. I trust the data I receive and rely extensively on the evaluation of grant proposals and service delivery designs by the NAHRA staff.

Arctic Alliance, a coalition of the human service agencies of Fairbanks, has been greatly assisted by donated staff time and advice. Because of the Child Abuse/Neglect Needs Assessment conducted by NAHRA in the community, Fairbanks Counseling and Adoption, Resource Center for Parents and Children, Family Focus and Fairbanks Crisis Line have recently entered a formal agreement of cooperation. These few examples are illustrative of how, as a non-aligned association, NAHRA has been instrumental in assisting service agencies to provide better services with less overlap, greater efficiency of delivery, and the facilitation of greater cooperation between those same agencies, all of which means savings to the tax payer.

Health planning is important! It is also cost effective! I urge you to support the \$600,000 figure which would allow the continuation of the regional health resource organizations across the state during the coming year.

Thank you!

Sincerely,



Carolyn Winters
Director

CMW/shp

cc: NAHRA

NAHRA
RECEIVED FEB 16 1983



FAIRBANKS NATIVE ASSOCIATION, INC.

310 1/2 First Avenue
Fairbanks, Alaska 99701

Phone: (907) 452-1648 / 456-5151

February 9, 1983

Copies of this letter were sent to all Northern Regional Legislators.

Honorable John C. Sackett
Pouch V
Juneau, Alaska 99811

Dear Senator Sackett:

I am writing this letter to all the Northern Regional Legislators, asking for your support specifically for Northern Alaska Health Resources Association, Inc., and for health planning in Alaska.

If health planning agencies are not allowed to continue to be responsible for identifying and addressing health care issues, who will be?

My experience in working in the Social Services field, which includes issues of health, has shown me the importance of planning, community assistance, and evaluation. I am sure you are aware that NAHRA does all these, and much more.

An example of their work has been submitted to you for your use, compliments of the Family Focus program, entitled Child Abuse and Neglect: A Community-Wide Needs Assessment.

In my opinion, without NAHRA's assistance, restructuring community and health services to better meet the needs of Alaskans would be slower and ultimately more costly. I understand that planning is everybody's business, but when it's everybody's business, in reality will it get done?

Enclosed is a little story that I'm sure you can relate to.

Please do what you can do to reinstate in the budget \$600,000 statewide (200,000 per agency) so that health planning agencies can continue in Alaska.

Planning is the first step to problem solving.

Respectfully,

William S Hardy

William S. Hardy, Family Focus Director

ADMINISTRATION
452-1648 or 456-5151

ACCOUNTING
452-1648

JOHNSON O'MALLEY
EDUCATIONAL PROGRAM
452-1648

SOCIAL SERVICES
452-1648

Counseling Services
452-1648

Child Welfare
452-1648

Work Experience Counselor
452-1648

Family Focus
452-1648

ALCOHOL AND DRUG ABUSE SERVICES

Director
452-1648

CAP Detox Center
456-1053

CAP Treatment Center
456-1045

CAP Halfway House
452-8761

Drop-In Center
456-7948

Out-Patient Services
456-1041

Court Counter-Measures Program
456-1101

Youth Drug Abuse Program
452-5085

Box 289
Barrow, Alaska
99723
February 10, 1983

The Honorable Frank R. Ferguson
Pouch V
Juneau, Alaska 99811

Dear Senator Ferguson:

I am writing to urge your support to continue funding for all Health System Agencies in the State. Our funding was completely eliminated from the Governor's budget. If we do not receive substantial amount of funding, we will cease to exist.

Our HSA, for the Northern Region, Northern Alaska Health Resources Association, has provided a means for which Residents of the Northern Region can participate in health care decision making, and assist with local and regional health concerns. NAHRA has also provided technical assistance to agencies, provided community assistance, health promotion and regional advocacy. Without NAHRA, these activities would not continue. Residents would lose their means for self-determination in health services for the Northern Region.

I urge you to assist up with funding for the coming year with reinstatement in the budget. Thank you for your assistance.

cc: NAHRA

Sincerely
Sonya Levitt
Member
Board of Directors
Northern Alaska Health
Resources Association

Copies were mailed to Northern Delegation



NORTH STAR COUNCIL ON AGING, INC.

P.O. BOX 73888 • FAIRBANKS, ALASKA 99707

AREA CODE 907-452-1735

February 15, 1983

Senators Don Bennett and John C. Sackett
Co-Chairmen, Senate Finance Committee
State of Alaska 13th Legislature
Pouch V
Juneau, Alaska 99811

Dear Senators Bennett and Sackett:

We have just learned there is a possibility that Governor Sheffield will exclude from the budget funding for the current maintenance of the Alaska health planning agencies. We of the Northern Region are particularly concerned and seek your assistance in not allowing this deletion to take place.

Our region has come to rely heavily on the information, resources provided by the Northern Alaska Health Resources Association, Inc., and the closure of this association would cause the people of the northern region to lose their primary means for self-determination in health services.

NAHRA is the only non-aligned group in this region which provides technical assistance to agencies and communities in grantsmanship, management, community organization, evaluation, program planning, needs assessments and implementation. We depend heavily on the information in their continually updated files as relating to health problems and needs in this area. To not have the services of NAHRA available to us would require extra funding for our agency as well as those in other areas to maintain a resource of data collection and analysis.

Therefore, the Board of Directors, staff and participating Seniors in our program services earnestly seek your support and endorsement for the continuance of the health systems agencies statewide. We will greatly appreciate your efforts in behalf of NAHRA as well as the other statewide systems for health planning.

Sincerely,

Genevieve Reininger
Executive Director

CC: Senators Bettye Fahrenkamp, Frank R. Ferguson and Pappy Moss



Alaska Dental Society

3400 Spenard Road, Suite 10
Anchorage, Alaska 99503
(907) 277-4675

March 9, 1983

Representative Al Adams, Chairman
House Finance Committee
Alaska State Legislature
Pouch V
Juneau, Alaska 99811

Dear Representative Adams:

On behalf of the three Health Systems Agencies in the state, the Alaska Dental Society asks reinstatement of monies in the budget to fund the continuance of their organizations.

The HSA's are a mechanism through which local and regional health-related concerns are identified and addressed, and through which citizen perspectives are presented to the state. HSA's provide technical assistance to agencies, boards and communities, community organization, management, evaluation, program planning, needs assessments and implementation. All maintain a current data and information base - essential in the presentation of health status problems and needs of the area.

The alternative to the HSA's would be individual organizations and special interest agencies doing autonomous health planning. This would not only be economically wasteful, but incredibly lacking in expertise and review thoroughness - now provided cost-effectively by the HSA organizations.

We understand federal funds are earmarked for the Alaska HSA organizations and further ask for your committee's approval of budget reinstatement. Suggested amounts are \$200,000 per agency - NAHRA (Northern Alaska Health Resources Association), SCHPD (South Central Health Planning and Development), and SEHSA (Southeast Alaska Health Systems Agency).

Thank you for your consideration.

Sincerely,

Edward G. Wilkinson, D.D.S.
President
Alaska Dental Society

- cc: ✓ NAHRA
- SCHPD
- SEHSA
- Representative Don Clocksin
- Representative Mae Tischer
- Senator Don Gilman
- Senator Kerttula
- Senator Bennett
- Senator Ziegler

HOLMES JOHNSON CLINIC

Box 1727

Kodiak, Alaska 99615
486-3237

March 21, 1983

Milo Fritz, M.D.
Pouch V
Juneau, AK 99811

Dear Dr. Fritz:

I am writing to request support of financing for Health Planning Agencies. I know that consideration is being given to reducing or cancelling their funding. My request comes from my observation as Chairman of the Governor's Review Board on Alcoholism. These agencies have evaluated the alcohol treatment programs in place throughout the State at the request of the Board, and we have found this independent appraisal very useful as a check on the State office which admittedly has a vested interest. They serve as a check and balance on other State health organizations as well. To lose them would, in effect, create a monopoly.

I think it extremely important that their function particularly in the appraisal capacity be ported.

Sincerely,

R. Holmes Johnson, M.D.

RHJ:cm

March 16, 1983

Representative Al Adams
House Finance Committee
on Health & Social Service
Pouch V (HS 3100)
Juneau, AK 99811

Dear Representative Adams:

Please accept this letter in support of reinstatement of the Health Systems Agencies within the State budget at \$200,000 per agency (\$500,000 statewide).

Having worked as a Health Educator in Alaska for over six years, I am well aware of the positive effect the Agencies have had on the Health of the citizens of Alaska. Through their early efforts to provide a forum for discussion and action,

- a. School Health Education has advanced,
- b. TEL-MED was established,
- c. Health Promotion at the Workplace began Networking, and
- d. Risk Reduction areas for Health Improvement were established.

The Health Systems Agencies have provided a continual unbiased expertise in planning for the Health of all Alaskans and to that aim their staff has given unselfishly of their time in technical assistance.

Now, we need your help in continuing this effort to realize optimal Health for the citizens of Alaska. I urge your support, and look forward to knowing your position on this matter.

Sincerely,



Brenda Rodgers
300 Sanctuary
Eagle River, AK 99577

cc: Alaska Health Coalition



THE POLARIS

RECEIVED FEB 22 1983

Wallace Burnett
General Manager
907-452-5571

427 First Avenue

907-456-4456
907-452-4456

Fairbanks, Alaska 99701

February 17, 1983

Senator Don Bennett
Alaska State Legislature
Pouch V (MS 3100)
Juneau, AK 99811

Dear Don:

It has come to my attention that Northern Alaska Health Resources Association, Inc. (NAHRA) funding for the coming year has been eliminated from the state budget. Although I understand there will be some federal funds available, there seems to be a real need for state participation.

I am sure you are more familiar with the organization, management, program planning, etc. of NAHRA than I, so I will only express my support for the continuation of this service for the Northern Region.

Thank you for your consideration of this request.

Sincerely,


Ruth E. Burnett

REB/mdw

cc: Representative Bob Bettisworth
Sherry McWhorter, NAHRA



RECEIVED FEB 25 1983

UNIVERSITY OF ALASKA, FAIRBANKS
Fairbanks, Alaska 99701

February 17, 1983

Senator John C. Sackett
Capitol, Room 520/528
Pouch V
Juneau, AK 99811

Dear Senator Sackett:

It is my understanding that State funding for the Northern Alaska Health Resources Association (NAHRA) has been eliminated from the Governor's budget. I would like to elicit your support in reinstating these funds. It is through organizations such as NAHRA that the following has been, and will continue to be, accomplished:

1. Health services planning with input from both citizens and provider groups.
2. Collection and analysis of data in an objective manner in order to assist in the decision-making process concerning health care needs in the region.
3. Organization of a system that can assist rural communities in needs assessment, keeping in mind regional needs and capabilities.
4. By feeding information from the Northern region to the State, it has been possible to develop health plans for the State with effective regional input.

Sincerely yours,

Philip C. Nice, M.D.
Professor of Medical Science
WAMI Medical Education Program

/ch

Copies sent to all of Inland & Northern Delegation

RECEIVED FEB 24 1983

BONNIE JOHNSON
SR 10469
FAIRBANKS, ALASKA
99701

February 17, 1983

Dear

I am writing to urge you to re-instate the \$600,000 funding for regional health planning in the State budget.

I feel that in this period of escalating health costs, it is imperative to have a neutral organization to assist communities in developing and evaluating the most cost-effective services needed in their area.

The Northern Alaska Health Resource Association has been instrumental in objectively assessing needs in the northern region and avoiding any duplication in service. They have been active in health promotion areas which in the long run, reduces health costs. They have encouraged community and individual citizen input and participation.

I feel strongly that State funding of regional health planning is the most practical-cost-effective means to continue to develop comprehensive health care in Alaska.

Sincerely,

Bonnie Johnson

RECEIVED FEB 23 1983

GALENA HEALTH CENTER

EDGAR NOLLNER BUILDING
P. O. BOX 77
GALENA, ALASKA 99741
PHONE: (907) 656-1266



(Serving the Surrounding Villages)

Hughes, Huslia, Kaltag
Koyukuk, Nulato, Ruby

Senator John C. Sackett
Alaska State Senate
Pouch V
Juneau, Alaska 99811

Dear Senator Sackett:

I am writing on behalf of the Northern Alaska Health Resource Association, Inc., one of the three HSA's in the State. I have been informed that funding for the HSA's have been eliminated from the Governor's budget. In order for the HSA's to continue operations, they have requested \$600,000.00 from the State. If they do not receive this funding they will be out of existence after August 31, 1983.

NAHRA, Inc. has been very helpful in providing technical assistance and most importantly health planning. This has alleviated a lot of unnecessary spending and duplication of services. As you are aware, small health centers such as ours cannot afford to purchase consulting services. We are firm believers in self-determination as far as local health planning is concerned. NAHRA, Inc. has provided us with much data and information over the years. As a result of this, we have planned the services that we have today that are cost effective, but most importantly are meeting the needs of people.

Therefore, I would like to request that you support their efforts to secure funding in order for them to continue operating.

Sincerely,

Flora Sweetsir
Health Administrator

CC: Chuck Kaltenbach

RECEIVED FEB 15 1983

CAREAGE NORTH HEALTH CARE CENTER

A Division of HCS - Alaska, Inc.

P.O. BOX 847 • FAIRBANKS, ALASKA 99707

February 15, 1983

The Honorable Albert Adams, Representative
Capitol, Room 509/507
Pouch V
Juneau, AK 99811

Dear Representative Adams,

I am writing to urge your support of regional health planning and the subsequent reinstatement in the state budget of \$200,000.00 per agency.

I have served on the Board of Directors of the Northern Alaska Health Resources Association for approximately two years and have first hand knowledge of the public education, community assistance and health promotion that has occurred during that time. I personally feel that consumer participation in health care decision making is essential in a young and growing state. However, before the consumer can participate effectively, there must be a mechanism for data collection and analysis that provides an information base from which citizens and providers can evaluate needs. Regional health resource organizations are that mechanism.

Thank you for your consideration.

Sincerely,

Sharon L. White
Administrator
Careage North Health Care Center

F-11

SLW/jb

*Similar letters sent to Bethworth,
Sackett and Bennett*

WICCA CENTER

RECEIVED 10 1983

302 Charles Street
Fairbanks, Alaska 99701
452-2293

14 February 1983

Senator Don Bennett
Pouch V
Capitol, Rm 516, 524, 526
Juneau, Alaska
99811

*another fly's
legislators*

Dear Senator,

I am writing in support of the Northern Alaskan Health Resources Agency (NAHRA) and to request reinstatement of \$200,000 in the budget for this agency. They perform a necessary service to the Northern region in the form of planning and health promotion. Recently they conducted a survey of child abuse and neglect services in which WICCA participated. The work they performed was excellent and very thorough. I believe that all agencies and thus the services we provide benefit from the kind of work performed by NAHRA.

Sincerely,

Ruth Lister

Ruth Lister
Executive Director



women in crisis -- counseling & assistance

January 31, 1983

Senator John Sackett
 Pouch V (Mail Stop 3100)
 Juneau, Alaska 99811

Dear John,

I'm writing you as a Board Member of Northern Alaska Health Resources Association, the Regional Health Planning Group for Northern Alaska.

NAHRA is one of three Regional "Health Service Organizations" allowing consumer/provider input into several areas of Health Care Delivery:

- 1) Public education
- 2) New or expanded facilities review
- 3) New or expanded services review
- 4) Data gathering and distribution
- 5) Planning for future Health Care Delivery.
- 6) Assistance in applications for funding for Northern Region Health Care Delivery groups.

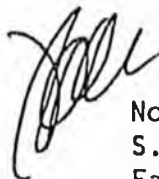
The Governor's budget carries a \$-0- line item for HSA's such as NAHRA.

I request that funding, in the amount of \$600,000 (\$200,000 for each region) be re-inserted into the new budget by the Governor:

- 1) There are the only organizations providing local consumer input into health care issues.
- 2) The shut-down of the Regional groups will allow the Governor (through the Commissioner of DHSS) far too much power concerning Health Care Delivery in the North--decisions made far away from our area without local input and control will, I believe, negatively affect Health Care Delivery in local communities for years to come.

Thank you for your consideration of this matter.

Sincerely,



Norm MacPhee
 S.R. 40591
 Fairbanks, AK 99701

cc: Chuck Kaltenbach
 Exec. Director, NAHRA

copies of this sent to "Fairbanks Telegram" RECEIVED MAR 1, 1983

Legislative Office

RE: Northern Alaska Health Resources Assn., Inc.

In the 60's we saw many well intended ~~government~~ programs go sour because those provided for were not consulted & now did they participate in the planning. NAHRA allows for both, thus preventing the waste of money and human resources.

Don't let NAHRA die. Let their funding be reinstated in the budget.

6/11/83

RECEIVED FEB 15 1983

February 16, 1983

Rep. Niilo Koponen
Pouch V
Juneau, AK 99811

Dear Niilo:

I am writing to express my concern about state funding and the mandate for health systems agencies, and, in particular, for the future of the Northern Alaska Health Resources Association.

I am aware that the HESS Committee is presently considering testimony about the appropriate rike for HSAs and the possibility of instituting a state certificate of need statute. I am also aware that the Alaska Hospital Association (not surprisingly) opposes the institution of a state-level certificate of need process and would just as soon that HSAs and SHPDA disappear entirely.

I want you to know from where I sit as a trained hospital administrator and as a planner with over 10 years of experience in trying to get human services to be responsive to local needs and yet accountable to the public trust that Alaska desperately needs to develop a legitimate local planning and development infrastructure. I would recommend that HSAs not only be empowered to conduct a state-level certificate of needs process (simplified, if that is the beef of the providers) but also that HSAs should have their role expanded to perform legitimate local broad-range human services planning.

Let me give you my reasoning for this recommendation:

- o Currently the "unsystem" for distribution of state funds for human services has resulted in a myriad of twisted, well-intentioned, but uncoordinated programs which may meet specific individual needs of a small group of people but which not not assure the consumer that he/she will get the service needed. Local service providers know the game all too well and, unfortunately, legislators respond to individual pleas for well-intentioned projects. What is not happening is rational growth of human services according to a well-designed local planning process. The result is inconsistent and unequitable availability of various services across the state. The result is legislators being hounded by endless parades of needy agencies wanting money for specific purposes. The result is a proliferation of services with very little accountability, evaluation of effectiveness, or coordination with each other. The result is local governments becoming increasingly unwilling to even entertain the thought of human services planning because "the state will take care of it" and "under Title 29, the voters have to toll us 2nd class boroughs that they want us to be concerned about human services".
- o I hear a lot of talk about "local control" of services and

the rationale that we need "local control" because of "regional differences" in this state. I agree! But I say, let's legitimize local control and protect the state's interest in accountability by designating an entity for a region with the responsibility to "map out" needs and ways to meet those needs. It seems that the state has been so busy providing direct services and issuing contracts and grants that the important elements of setting parameters for considering needs and evaluating the effectiveness of what is being done currently are not being paid the attention that they need. If there were a "human services game plan" worked out by a thoughtful and responsive local planning and development process, maybe we could all see where we are going and why. Maybe the legislators wouldn't be hounded so much. Maybe state agencies would spend more time offering technical help and evaluation of services. Maybe there would be developed patterns of services and ways of providing services which would meet local needs. Maybe consumers wouldn't be shuffled from agency to agency because "their need doesn't meet my program".

- o You might ask - why turn the responsibility for local/regional human services planning over to HSAs (or whatever their successors are named)? I can't think of a better way for the legislature to ensure some type of statewide consistent planning structure. We can't ask the boroughs to do this because of their non-existence in 75% of the state and because of their limitations under Title 29; we can't ask the Native non-profits to do this because of problems with their mandate for provision of services.
- o I would further recommend that the HESS Committee consider introducing legislation that would have the HSAs, in their new role, accountable to the Department of Community of Regional Affairs, rather than H&SS. It's time to legitimize human services planning in this state (over 50% of the F84 proposed operating budget is committed to human services). C&RA seems to have the best track record of any state agency in assisting local communities with planning of all types - economic, physical, lands, etc. Human services is a big business in this state and the same planning and development processes used which are used for physical development planning are applicable to human services. Besides, planners need each other to stay fresh and challenged.

Thanks much for listening to these ideas. I have seen and worked with state legislation in Minnesota which has set up local planning processes for health services and it is working well, both politically and programmatically. I am really hopeful that the Legislature will not disband HSAs. They provide a valuable, hidden as sometimes it is, service to the local area.

I would be happy to share with you materials that I have from Minnesota which describe the legislation and regulation used to

set up the "Community Health Services System". Please let me know if you would like to see these materials or get in touch with some people in Minnesota who have built that system.

My phone number is 479-6507 (days) or 452-7782 (evenings).
Thanks again, Niilo.

Sincerely,

Laurie

Laurie Sarkipato Goggin
P.O. Box 73972
Fairbanks, AK 99707

P.S. - As Golda Meir said, "I'm not a typist!"

TELEX TO: AL ADAMS

MAE TISCHER

DONALD E. CLOCKSIN

HEALTH & SOCIAL SERVICES FINANCE SUB COMMITTEE

FROM: THE ASSOCIATION OF REGIONAL HEALTH DIRECTORS

DATE: 2 MARCH 1983.

AS CHAIRPERSON OF THE ASSOCIATION OF REGIONAL HEALTH DIRECTORS,
I HAVE BEEN REQUESTED TO CONVEY TO YOU OUR CONSENSUS ON THE
FOLLOWING TWO ISSUES:

1. HEALTH SYSTEM AGENCIES (H.S.A.s) - THIS ASSOCIATION SUPPORTS
SOME FORM OF
THE CONCEPT OF UTILIZING THE PRESENT HSAs AS REGIONAL PLAN-
NING AND REVIEW BODIES FOR STATE FUNDED HUMAN SERVICE PROGRAMS.
THIS APPROACH WOULD HAVE TWO ADVANTAGES:
 - A. ELIMINATION OF MULTIPLE STATE BOARDS CURRENTLY OPERATING
AND FUNNELING THEIR FUNCTIONS INTO 3 REGIONAL BOARDS
WOULD PRODUCE SUBSTANTIAL COST SAVINGS.
 - B. USE OF REGIONAL ENTITIES WOULD ASSURE COMPETENT QUALITY
REVIEW OF STATE GRANT PROPOSALS BECAUSE THEY WOULD BE
DONE BY A LOCAL GROUP WITH KNOWLEDGE OF UNMET NEEDS
AND CURRENTLY AVAILABLE SERVICES WITHIN THEIR REGION.
2. THE MAJORITY OF STATE SERVICES CURRENTLY REACHING THE RURAL/
BUSH POPULATION ARE FUNDED THROUGH GRANTS AND CONTRACTS TO
REGIONAL, NON-PROFIT CORPORATIONS. DESPITE THEIR NATIVE
STATUS, THEY OFFER STATE SERVICES ON A NON-DISCRIMINATORY
BASIS. THE ASSOCIATION IS CONCERNED THAT AS BUDGET CUTBACKS

OCCUR, THESE SERVICE PROGRAMS DO NOT SUFFER INEQUITABLE CUTS
IN ORDER TO MAINTAIN CENTRAL ADMINISTRATIVE SERVICES. IF
THE PURPOSE OF HUMAN SERVICE PROGRAMS IS TO CARE FOR A POPULA-
TION IN NEED, THEN ALL STEPS POSSIBLE MUST BE TAKEN TO INSURE
THE FUNDING INTEGRITY OF THOSE ORGANIZATIONS ACTUALLY
DELIVERING THE SERVICE.

THANK YOU FOR YOUR TIME AND ATTENTION. PLEASE FEEL FREE TO
CONTACT ME OR ANY REGIONAL HEALTH DIRECTOR IF YOU HAVE ANY QUESTIONS.

ELISE SERENI PATKOTAK
CHAIRPERSON, ARHD
DIRECTOR, NSB, H&SSA

February 25, 1983

Joe Josephson
State Capital
Fouch V, MS 3100
Juneau, Alaska 99811

Dear Senator Josephson:

I am writing in support of the funding of our Northern Alaska Health Resources Association. As a board member of this committee, I feel it would be a catastrophe if our health system agencies are not re-instated into the budget after August 31, 1983.

Northern Alaska Health Resources Association (NAHRA) is the only group in our region who provides technical assistance to agencies and communities in grantsmanship, community organization, management, evaluation, program planning, needs assessments and implementation. We maintain a current data and information base which is inserted in the national presentation of health status problems and needs of our area. Our major areas of effort are community assistance, health promotion and regional advocacy. Without NAHRA none of these activities would continue.

I urge you to join me and our people in supporting this agency.

Let me know how you stand on this.

Keep up your good work for us and keep smiling.

Sincerely,

Nina K. Dahl

Nina K. Dahl
Health Director

NKD/etk

cc: Jan Baiks
Mae Fischer
Don Glocksie
Dr. Charles Kallusmark, NAHRA
Frank R. Ferguson
Robert Bettisworth
Tom Barnett
John C. Suckest
Al Adams

RECEIVED FEB 1 1983

January 31, 1983

Senator Don Bennett
Pouch V (Mail Stop 3100)
Juneau, Alaska 99811

Dear Don,

I'm writing you as a Board Member of Northern Alaska Health Resources Association, the Regional Health Planning Group for Northern Alaska.

NAHRA is one of three Regional "Health Service Organizations" allowing consumer/provider input into several areas of Health Care Delivery:

- 1) Public education
- 2) New or expanded facilities review
- 3) New or expanded services review
- 4) Data gathering and distribution
- 5) Planning for future Health Care Delivery.
- 6) Assistance in applications for funding for Northern Region Health Care Delivery groups.

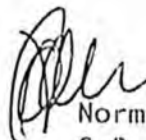
The Governor's budget carries a \$-0- line item for HSA's such as NAHRA.

I request that funding, in the amount of \$600,000 (\$200,000 for each region) be re-inserted into the new budget because:

- 1) There are the only organizations allowing local consumer input into health care issues.
- 2) The shut-down of the Regional groups will allow the Governor (through the Commissioner of DHSS) far too much power concerning Health Care Delivery in the North--decisions made far away from our area without local input and control will, I believe, negatively affect Health Care Delivery in local communities for years to come.

Thank you for your consideration of this matter.

Sincerely,



Norm MacPhee
S.R. 40591
Fairbanks, AK 99701

cc: Chuck Kaltenbach
Exec. Director, NAHRA

February 15, 1983

Rep. Mike Davis
Pouch V
Juneau, AK 99811

Dear Mike:

I'm writing as a constituent and supporter to express my concerns about state funding and mandate for health systems agencies, and, in particular, for the future of the Northern Alaska Health Resources Association.

I am aware that the HESS Committee is presently considering testimony about the appropriate role for health systems agencies and the possibility of instituting a certificate of need statute. I am also aware that the Alaska Hospital Association opposes the institution of a state-level certificate of need process and would just as soon that health systems agencies disappear.

I want you to know that from where I sit as a trained hospital administrator and as a planner with over 10 years in working on issues leading to the quality development of human services, that the HESS Committee should seriously consider not only empowering the health systems agencies with state-mandated certificate of need authority but also should consider expanding their role as a viable, non-political, unbiased, and professional local-regional human ser-
planning and development shop.

Let me give you my reasoning for this recommendation:

- o Currently the "unsystem" for distribution of state funds for human services has resulted in a myriad of twisted, well-intentioned projects which do not interface on the local level. Service providers will tell you that there is "good informal coordination" of services, but I can tell you from real evaluation experiences that there is alot of "good informal miscommunication and assumptions" instead. We desperately need an entity with NAHRA which would have the capability of bringing together service providers to work on real coordination of services which will result in people not getting lost in being shuffled from agency to agency.
- o I hear a lot of talk about "local control" of services and rationale that we need "local control" because of "regional differences" in our state. I agree! But I say, let's legitimize local planning and designate an entity to have the responsibility for calling together local consumers, politicians, and agency representatives who have the job to map out a future course of needed action in the development of responsive local human services.

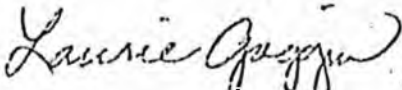
- o You might ask - why turn this responsibility for local/regional human services planning over to HSAs? I can't think of a better way for the legislature to ensure some type of statewide, consistent planning infrastructure. We can't ask the boroughs to do this because of problems with Title 29; we can't ask the Native non-profits to do this because of problems with their mandate for services.

- o I would further recommend that the HESS Committee consider writing legislation that would have the HSAs, in their new role, be accountable to the Department of Community and Regional Affairs, rather than DHSS. It's time to legitimize local human services planning in this state and C&RA seems to have the best track-record of assisting local communities with planning of all types - economic, physical, lands, etc. Human services is a big business in this state and the same type of planning techniques and tools that are applicable to physical development planning are also applicable to human services planning. Besides, planners need each other to stay fresh and challenged!

Thanks much for listening to these ideas. I really am hopeful that the HESS Committee (and the legislature as a whole) will not disband the HSAs. They provide a valuable service, hidden as it sometimes is, to the local community. The lack of their presence in the past few years would have netted us losses - like the lack of a hospice here in Fairbanks, and perhaps 100 new beds in Anchorage that we probably don't need and which would cost each of us needing medical services over the next thirty years a bundle.

Please call/write if you have questions or if I can be of further assistance. My daytime phone is - 479-6507; home phone - 452-7782...

Sincerely,



Laurie S. Goggin
P.O. Box 73972
Fairbanks, AK 99707

Gateway COMMUNITY
MENTAL HEALTH CENTER

KETCHIKAN COMPREHENSIVE ALCOHOLISM PROGRAM

XXXXXXXXXXXXXXXXXXXX
XXXXXX Terry Wolf, MSW
Interim Director

3134 Tongass Avenue
Ketchikan, Alaska 99901
Phone 225-4137 or 225-4154

March 14, 1983

Albert P. Adams, Co-Chairman
Alaska State Legislature
House Finance Committee
Pouch V
Juneau, Alaska 99811

Dear Mr. Adams:

I am writing this letter encouraging you to support the continued funding of the Southeast Alaska Health Systems Agency (SEAHSA). Although this organization does not provide direct health care services to specific clients, the organization has served as a catalyst for improving the quality of services in Southeast Alaska, as well as identifying service area gaps and working toward their fulfillment.

I have found the staff of the SEAHSA to be a viable resource of information in planning the future activities of the Ketchikan Comprehensive Alcoholism Program (KCAP). If they did not have the specific information requested, they knew where to acquire it and frequently assisted in the acquisition.

It has been my observation that through the SEAHSA, the local Health Planning Council has remained an ongoing group. Several times the functions of the Council had become unclear and was about to dissipate. Each time the SEAHSA assisted the Council in renewing its focus and continue to provide community health planning needs. Specific services provided by the Health Planning Council through assistance of the SEAHSA Staff have been an Annual Health Fair; development of a means to incorporate a K-12 health curriculum in the local school system; annual reviews of local health delivery agency grant/funding proposals; and planning future health needs due to projected significant population increases (i.e. Borax Quartz Hill Project, Ferry Maintenance Terminal, increased Forestry activities on Prince of Wales Island, etc.). All of these activities are important for the continued development of health programs in our community, and without SEAHSA they probably would be non-existent or at a greatly reduced level.

MAR 21 1983
SOUTHEAST ALASKA
HEALTH SYSTEMS AGENCY

Albert P. Adams
Page Two
March 14, 1983

I have observed that frequently direct health care providers become so involved with the provision of services that they lose sight of future community needs or develop a skewed perception of what the real needs are. A non-direct service provider having health care interest can in many cases more objectively evaluate area wide health care needs.

In summary, I see SEAHSA as a viable resource for the continued development of health care programs to meet community needs in Southeast Alaska. The amount of funds requested are not excessive in light of the gains realized by the community.

If I can be of any assistance reference the Southeast Alaska Health Systems Agency, do not hesitate to call me at 225-4154.

Sincerely,



Charlie G. Laub,
KCAP Coordinator

CGL:im

✓cc: SEAHSA, Ketchikan

March 18, 1983

Senator Richard Eliason
Pouch V
Juneau, Alaska 99811

Dear Senator Eliason:

I understand that the budget introduced by Governor Sheffield last month did not include money for Health Systems Agency grants. Federal support of Health Systems agencies has also been reduced, leaving them operating "on a shoestring" with resultant deprivation of services for health care consumers. In this region the Southeast Alaska Health Systems Agency would be greatly handicapped, if able to function at all. The Southeast Alaska Health Systems Agency (SEAHSA) performs a dual role in our region: both as Planner/Coordinator and Provider of direct support to Health programs.

Since 1978 SEAHSA has been insuing Health Systems Plans (HSP) along with Implementation Plans (IP) which have served to coordinate the several health systems- public (Federal and State) and private- which operate in Southeast Alaska. The HSP reviews the regional profile including geographic, demographic, and social data; lists the health systems currently operating in the region, and then establishes goals and objectives for the achievement of desired levels of health status and performance of health systems. The IP details explicit milestones for measuring the progress of HSP: who should do what in a given time frame.

These plans are valuable to health care providers in the region because they clearly state the problems and who might best deal with it. This at once addresses the problem, its solution, and avoids duplication of services, saving time and money for providers and consumers of health care. A much needed plan for the region, that of Mental Health services, is intended to be issued shortly. The lack of services or fragmentation thereof in this area is well recognized by health care providers in the region. An overall plan is an important first step in improving Mental Health services for Southeast Alaska.

RECEIVED

MAR 21 1983

SOUTHEAST ALASKA
HEALTH SYSTEMS AGENCY

THE FOLLOWING DOCUMENT(S) MAY NOT FILM
LEGIBLY BECAUSE OF POOR QUALITY OF THE
ORIGINAL.

working on projects, which we feel will improve the quality of life in our communities.

In a day when everyone is talking about saving money and President Reagan is frequently heard promoting the use of volunteers, perhaps more attention should be given to funding organizations that are best utilizing volunteers.

The effective use of volunteers insures that health planning will reflect the needs and concerns of a community at a minimum of cost. Funding a relatively small budget for HSA's should be a good investment toward achieving optimum levels of health for all Alaskans. I urge you to give this matter serious consideration. Thank you for your attention.

Sincerely,
John M. Luppi

THE PRECEDING DOCUMENT(S) MAY NOT FILM
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ORIGINAL.

531 Grant St. #31
Ketchikan, Alaska 99901

March 8, 1983

The Honorable John C. Sackett
Alaska State Senate
Pouch V
Juneau, Alaska 99811

Dear Senator Sackett:

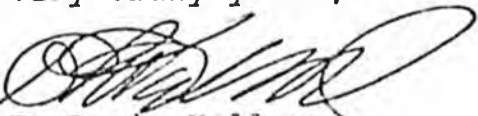
May I call it to your attention that the Governor's Budget for Fiscal Year 84, as introduced, includes no money for Health Systems Agency grants. Inasmuch as the HSAs are the primary health planning agency assisting communities in evaluating health programs and the need for new health programs, this strikes me as being a most unfortunate occurrence, and it would be hoped that such funds could be restored.

The Southeast Alaska Health Systems Agency, a HSA, has requested \$200,000 from the State for continued funding. Additionally, it is my understanding, a funding request totaling \$600,000 is requested to fund the entire program state-wide.

As chairperson during the organizational stages of the Southwestern Washington HSA (1975 and 1976), I firmly believe that they play a vital role in the health delivery systems of the Country and that, if they are not funded, it will be a real loss to all of the people of the State of Alaska.

I trust that you will give this matter your much needed attention.

Very truly yours,



E. Louis Keller

cc: John Manning, Program Director, SE Alaska Health Systems Agency

The Honorable William Sheffield
Governor
State of Alabama
Dear Governor Sheffield,

12-27-82

I am the President of the Southeast
Alabama Health Systems Agency. We are
partially funded by a state grant.

During your campaign you told us
you supported regional and local health
planning. This local effort is in
jeopardy since no appropriation has
been included in the FY-84 State HSS
budget.

Your support in restoring the budget
for these local agencies is needed in
order to continue this local work.

Sincerely

Arthur C. Williams

room 4110

Fort Edwards Hotel AK 99835



THE CITY OF WHITTIER

February 20, 1983

Senator Don Gilman
Pouch V
Juneau, Alaska 99811

Dear Senator Gilman,

The Whittier Health and Human Services Committee is concerned that the State's three Health Services Agencies, (HSA's) have been eliminated from the State budget.

It has come to our attention that a misunderstanding of the Federal budget cuts has eliminated the State's matching funds for it's HSA's which includes the South Central Health Planning and Development, Inc., (SCHPD). We are an isolated community which is rapidly growing and becoming the hub of increased activity as the gateway to Prince William Sound. The information base and the expertise with current data available at SCHPD has been invaluable to us the past two years in our efforts of comprehensive community health planning.

We strongly urge you to consider the reinstatement of the HSA's in the State budget for without them small communities, the consumer and other non-profit groups will again be left without the resources for intelligent, wise, and above all money and man power saving health planning.

Sincerely,

Lucille Garrison, R.N., B.S.N.

The Whittier Health and Human Services Committee
Tom McCallill
Steve Vaughn
Ceri Wheelwright
Lucille Garrison
Kathy Jackson

cc: Denny DeSiro



CITY COUNCIL OF MOUNTAIN VILLAGE

P.O. BOX 204 - MOUNTAIN VILLAGE, ALASKA 99632 - (907) 365-8001

Honorable John C. Sackett

State Senator

Pcuch V

Juneau, Alaska 99811


February 23, 1983

The City of Mountain Village wants to go on record and strongly recommend, and consider reinstatement of State funding for the three Alaska Health Systems Agencies to the level of \$200,000.00 per agency. It is my understanding funds are available from the Federal Government to match with the State funds. The state wide organization such as South Central Health planning and Development, Inc. is vital to help us in our newly opened Area Clinic, here in Mountain Village along with ten other villages that will be served by Area Clinic for the following reasons; Community Organization, Management, evaluation, program planning, needs assessments and implementation.

Senator Sackett if you recall during the 1975 legislative session you was the one who appropriated \$500,000.00 for the Area Clinic here in Mountain Village, and I trust you that you will do the same again, considering keeping a very worth while group of agencies aline to help Alaskans as we strive to improve peoples health in this area.

Thank you very much for your time and attention.

Sincerely yours,


Andrew Brown

Mayor

c.c. Representative Vern Hulbert

Representative Al Adams

2105 Otter Street
Anchorage, Alaska 99504
February 23, 1983

Representative Al Adams, Chairman
House Finance Committee
State Capitol
Pouch Y
Juneau, Alaska 99311

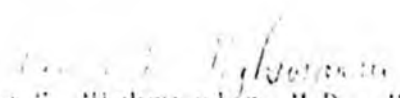
Dear Representative Adams:

This is a letter in strong support of the continuation of the three Health Planning Agencies in the State. I have been a physician in practice in Alaska since 1972. During that time I have had opportunity to work with many rural communities in helping devise both local clinics and health care programs to improve medical services. As you know, this takes a lot of planning, a tremendous local effort, and good and sensitive technical assistance from people outside the local community.

Our health planning agencies have had an excellent track record for providing technical work per se, and data that can be used to develop these programs. If they disappear, I see no other group filling the role that they have played. Each of the other groups that have been involved in local health projects have vested interests. They have not necessarily served the local communities well.

I'm personally acquainted with many of the staff in the health planning agencies and find them of the highest caliber. They could easily match anyone in health planning whom I have met in the lower 48. Given the increasing costs of health care and the limited resources, health planning is necessary. If these agencies meet their demise we will have to recreate them. I would strongly support their continued existence.

Sincerely yours,


Thomas S. Highlander, M.D., M.P.H.
Anchorage, Alaska

cc: Lillie McGarvey
Representative Don Clocksin
Representative Mae Fischer

Kenaitze Indian Tribe

P. O. BOX 988
KENAI, ALASKA 99611
(907) 283-3633

February 14, 1983

Representative Hugh Malone
State House of Representatives
Pouch "V"
Juneau, Alaska 99811

Dear Representative Malone:

The Kenaitze Indian Tribe is asking your support for the joint allotment of State funding in the amount of \$600,000 for the three Health Systems Agencies (HSA's) at Juneau, Anchorage and Fairbanks, with each of the three agencies receiving \$200,000 of the requested allocation.

It is our understanding that adequate State funds were not included in the proposed FY-84 State budget, on the assumption that Federal FY-83 monies were being made available for covering the HSA operational costs. Unfortunately, this assumption is incorrect insofar as very insufficient federal funding currently is being allocated to the HSA's.

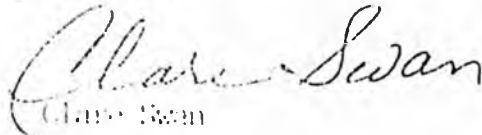
It is the opinion of the Tribe that the demise of the HSA's, especially the Southeastern Health Planning and Development (SEHPD) HSA at Anchorage, would be a serious loss to all health care agencies or entities with health care programs -- such as the Kenaitze Indian Tribe -- on the Kenai Peninsula. The cost of invaluable technical assistance in health planning and development, which is provided by the SEHPD is minimal in comparison to what these costs would be if local, State funded health agencies had to use grant funds to pay private consultants for such necessary services. Moreover, it is doubtful if the Tribe could have reopened the Kenai Health Clinic this past December without the planning, development and advisory services which were provided to the Tribe by SEHPD staff.

Additionally, the extinction of the SEHPD would result in the elimination on a regional level of the only real forum for community participation in health care decision making for the Southeastern region. The SEHPD is the normal mechanism and the structure through which all local health care organizations and their clients on the Peninsula can voice their health-related concerns before a higher tribunal. It is our belief that there is a real loss in influencing health care decisions on a regional and statewide basis.

In continuation of our previous request, if the SEHPD is to be a viable, effective and necessary health care planning and development agency, it should be provided, or made available through the State, with the necessary funding. We are asking your support for that request. We believe that the SEHPD is the only organization that

upcoming State Fiscal year in order that all of our programs and services
might endure.

Sincerely,



Clarence Swan
President
Kenaitze Indian Tribe

JP/cs

cc: Representative Al Adams
Representative Don Clocksin
Representative Mae Fischer

P. O. Box 947
Anchorage, AK 99510
January 7, 1983

Representative Al Adams, Chairman
House Finance Committee
State Capitol
Porch 7
Juneau, AK 99811

Dear Representative Adams:

I am writing to you to urge you to consider the reinstatement of State funding for the three Alaska Health Systems Agencies (HSA's). These HSA's provide high quality health planners—who are meeting the needs of various corporations, agencies and groups around the State.

Nutrition and health are important to all the citizens of this State, and the HSA's consistently have demonstrated awareness and concern for these matters.

The three HSA's need funding to the level of \$200,000 per agency. Again, I would urge you to consider the reinstatement of State funding for these very worthwhile and necessary agencies.

Sincerely,


Lillian G. Kirkus

cc: ✓ Lillie McGarvey, President
South Central Health Planning & Development



Matanuska-Susitna Borough

BOX B, PALMER, ALASKA 99645 • PHONE 745-3246

PLANNING DEPARTMENT

February 25, 1982

Honorable Ron Larson
Pouch V
Juneau, Alaska 99811

Dear Mr. Larson,

I would like to support the inclusion of funding for the State's regional health systems agencies generally, and South Central Health Planning and Development, Inc., specifically, in the FY 1984 budget for the Department of Health and Social Services. I understand the amount needed is \$200,000 per agency or \$600,000 statewide.

I have dealt with South Central Health Planning and Development, Inc. (SCHPD) over the past five years and have found them to be a very competent and responsive public agency. They - and presumably the other regional agencies - make very significant contributions to the area they serve.

First of all they are governed by a board of directors to which the Borough appoints two members - therefore gaining us regional representation on matters of concern to the health and wellbeing of our residents.

They readily provide technical assistance to the Borough through their staff of professional health planners - a specialized skill which local governments would ordinarily not be able to include on their own staffs.

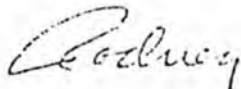
They play a key role in the planning and development/provision of health facilities/services within the region. Without this role, I feel costs of health care and equitable distribution of health services would be adversely affected.

Specifically, SCHPD has greatly aided the development of a Boroughwide health plan by providing us with the services of a student intern who developed very complete inventory, analysis and recommendation sections for such a plan. SCHPD staff also have provided technical assistance in this effort.

And they have produced and can maintain, if needed, a regional health systems plan for Western and Northern Alaska.

They are a most worthwhile provider of services to and coordinator of health related activities within our region. I urge your support for their funding in FY 1984 and beyond.

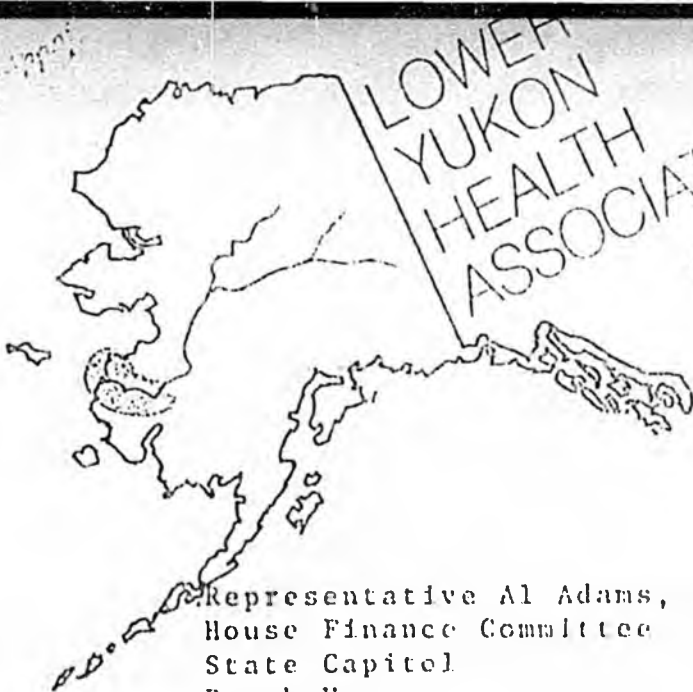
Thank you for your consideration.



Rodney W. Schulling
Assistant Planning Director

lf

cc: SCHPD



LOWER
YUKON
HEALTH
ASSOCIATION

Mountain Village, Alaska 99632
phone: 591-2346

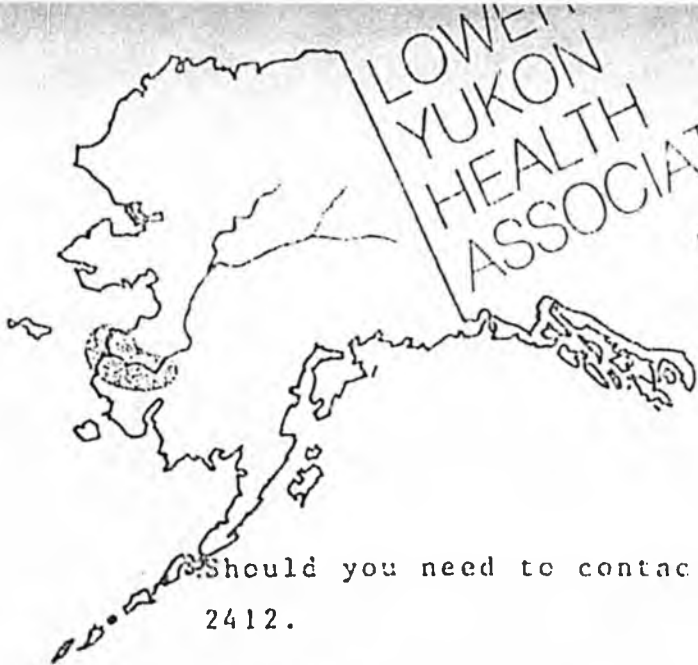
February 25, 1983

Representative Al Adams, Chairman
House Finance Committee
State Capitol
Pouch V
Juneau, Alaska 99811

Dear Representative Adams;

It was real good to see you and speak with you recently. I really appreciated the reception that you and your colleagues extended to my group that represented the City Council of Mountain Village, the Lower Yukon Health Association and the good-behavior image that is favorable to the Native people of Rural Alaska.

As you and the Finance Committee members deliberate on the allocations of funding for various agencies for FY '84, please keep in mind that the Board of the Lower Yukon Health Association strongly urges you to consider the reinstatement of State funding to a level of \$700,000.00 to the South Central Health Planning and Development, Inc., as well as \$200,000.00 each to the other two (2) Health System Agencies (HSA's).



Mountain Village, Alaska 99632
phone 591-2346

Should you need to contact me, please call me at 591-2411 or 2412.

Sincerely,

Lower Yukon Health Association

Ed Beans
Chairman of the Board

cc: Representative Adelheid Herrmann
Representative Vern Hurlbert
Representative Tony Vaska
Representative Jack Fuller
Senator John Sackett
Governor Bill Sheffield
President Lillie McGarvey - SCHPD

EB/kt

Elizabeth D. Hohmann
Public Health Nutritionist
P.O. Apollo Drive
Anchorage, AK 99504
February 23, 1983

Rep. Ramona L. Barnes
House of Representatives
Pouch V
Juneau, AK 99611

Dear Representative Barnes:

I would like to urge your support for reinstating \$600,000 in the budget for the continuation of the three Health Systems Agencies in Alaska.

I am most familiar with South Central Health Planning and Development, Inc. They have been responsive and effective in providing planning assistance to groups with whom I work.

There is a need for an independent body to assess, identify, and promote necessary health services and measures which the existing agencies should then address, whether it be the expansion of hospital beds or the identification of new avenues to promote better health for Alaskans.

Thank you for your consideration. I will be happy to offer additional thoughts on this matter if you wish. Please feel free to contact me.

Sincerely,

Elizabeth D. Hohmann, P.E., H.P.H.
Public Health Nutritionist

✓cc: South Central Health Planning & Development, Inc.