



## Financial Assistance Award

**DENALI COMMISSION**  
 510 "L" Street, Suite 410  
 Anchorage, Alaska 99501  
 (907) 271-1414

**Project Number**  
0003-DC-1999-I2

**Accounting Code**  
95X1200 95870000 95-67

**Recipient Name**  
Alaska Native Tribal Health Consortium

**Recipient Address**  
Department of Environmental Health  
3925 Tudor Centre Dr.  
Anchorage, AK 99508

**Denali Commission Share of Cost**  
\$ 275,000

**Recipient Share of Cost**  
\$ 25,000

**Total Estimated Cost**  
\$ 300,000

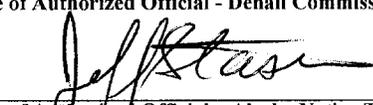
**Award Performance Period**  
From January 1, 2000 to December 31, 2004

**Authority**  
112 Stat 1854

**Project Title**  
**Rural Primary Care Facility Needs Assessment**

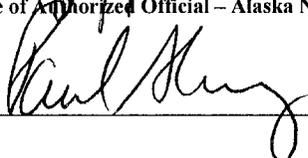
This Financial Assistance Award approved by the Federal Co-Chair of the Denali Commission is issued in triplicate and constitutes an obligation of federal funding. By signing the three documents, the Recipient agrees to comply with the Award provisions indicated below and attached. Upon acceptance by the Recipient, two signed Award documents shall be returned to the Federal Co-Chair of the Denali Commission and the Recipient shall retain the third document. If not signed and returned without modification by the Recipient within 30 days of receipt, the Federal Co-Chair may unilaterally terminate this Award.

- EDA Standard Terms and Conditions Public Works and Implementations Construction Components, dated 3/99
- Special Award Conditions and Attachments (Joint Project Agreement between the Denali Commission, the Alaska Native Tribal Health Consortium, the Indian Health Service, and the State of Alaska Department of Health and Social Services)
- Line Item Budget
- 15 CFR 24, Uniform Admin Requirements for Grants/Cooperative Agreements to State and Local Governments ([www.access.gpo.gov/nara/cfr/waisidx\\_99/15cfr24\\_99.html](http://www.access.gpo.gov/nara/cfr/waisidx_99/15cfr24_99.html))
- OMB Circular A-87, Cost Principles for State and Local Governments and Indian Tribal Governments ([www.whitehouse.gov/OMB/circulars/a087/a087-all.html](http://www.whitehouse.gov/OMB/circulars/a087/a087-all.html))
- OMB Circular A-133, Audits of States, Local Governments and Indian Tribal Governments ([www.whitehouse.gov/OMB/circulars/a133/a133.html](http://www.whitehouse.gov/OMB/circulars/a133/a133.html))
- 15 CFR, Part 14, Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, Other Nonprofit, and Commercial Organizations ([www.access.gpo.gov/nara/cfr/waisidx\\_99/15cfr14\\_99.html](http://www.access.gpo.gov/nara/cfr/waisidx_99/15cfr14_99.html))
- OMB Circular A-122, Cost Principles for Nonprofit Organizations ([www.whitehouse.gov/OMB/circulars/a122/a122.html](http://www.whitehouse.gov/OMB/circulars/a122/a122.html))
- OMB Circular A-21, Cost Principles for Educational Institutions ([www.whitehouse.gov/OMB/circulars/a021/a021.html](http://www.whitehouse.gov/OMB/circulars/a021/a021.html))
- EDA Standard Terms and Conditions Capacity Building Programs
- Department of Commerce Financial Assistance Standard Terms and Conditions, dated 10/98
- 

**Signature of Authorized Official - Denali Commission**  


**Typed Name and Title**  
Jeffrey Staser, Federal Co-Chair

**Date**  
2/24/00

**Signature of Authorized Official - Alaska Native Tribal Health Consortium**  


**Typed Name and Title**  
Paul Sherry, President/CEO

**Date**  
2/4/00

**Award Conditions to the Financial Assistance Award**  
**Project No. 0003-DC-1999-I2 – Rural Primary Care Facility Needs Assessment**  
**Alaska Native Tribal Health Consortium**

1. The scope of work for this project is a needs assessment of rural primary care facilities (sometimes referred to as health clinics) and is described in greater detail in the attached Joint Project Agreement with the Denali Commission (Commission), the Alaska Native Tribal Health Consortium (ANTHC), the Indian Health Service, and the State of Alaska Department of Health and Social Services (DHSS). Total Commission funding for the ANTHC through this Financial Assistance Award is \$275,000; total funding (including \$25,000 from ANTHC) is \$300,000. Commission funding is intended for use for the scope of work specified above and in the Joint Project Agreement. In the event there is a balance of funding after the scope of work is completed, then the Commission will determine how the excess funds will be allocated.
2. The Project Officer for the ANTHC is Mr. Rick Boyce and for the Denali Commission Mr. Joel Neimeyer.
3. The ANTHC shall submit written progress reports to the Commission Project Officer quarterly (January/March, April/June, etc.). The reports are due within 30 calendar days of the end of the quarter. Interim reports are required in the event of significant project events that may extend the project schedule and/or impact the project budget. Quarterly progress reports shall include a narrative summary of the project status and accomplishments to date, and address the following questions: is the project on schedule, is the project on budget, and what actions are planned to address any project problems. These progress reports shall be sent to:

Denali Commission  
510 "L" Street, Suite 410  
Anchorage, AK 99501.

The Commission reserves the right, at a future date, to direct the ANTHC to provide the progress reports in electronic format for posting on the Commission web page.

4. Two forms of project financial reports are required.
  - A. Project financial status reports shall be submitted to the Commission Project Officer quarterly (included as part of the quarterly progress reports). Included in the quarterly financial status reports shall be a project performance analysis on budgeted project line items, as defined by the ANTHC, showing budget costs compared to actual expenditures and obligations to date versus work performed to date (for each line item).

- B. A final Financial Status Report (Standard Form 269 – [www.whitehouse.gov/OMB/grants/index.html#forms](http://www.whitehouse.gov/OMB/grants/index.html#forms)) shall be submitted to the Commission Project Officer within 90 days after the end of the Award Performance Period. If the Period is longer than one year, or if the Agreement is revised to extend the Award Performance Period beyond one year, the ANTHC must annually submit a completed Standard Form 269 within 90 days after the end of each anniversary of the award date.
5. To receive payment, the ANTHC must submit a “Request for Advance or Reimbursement”, Standard Form-270, to the Commission Project Officer. It is expected that the ANTHC will forecast by letter or spreadsheet format, Commission funds or working capital advances needed on a monthly (or as needed) basis for each project. This does not preclude more frequent Commission payments, than monthly, given project specific needs. The Commission Project Officer may review all payments to determine if payments made are justified and supported by appropriate records, invoices and other documentation. The Commission reserves the right to prohibit further payments to the ANTHC, at any time, if discrepancies involving Commission funds arise, until such time that the discrepancies are resolved to the satisfaction of the Commission.
  6. To the maximum extent feasible, considering applicable laws, the ANTHC shall accomplish the work of this Agreement utilizing local labor and small, minority owned and disadvantaged businesses.
  7. No portion of this award may be used for lobbying or propaganda purposes as prohibited by 18 U.S.C. Section 1913 or Section 607(a) of Public Law 96-74.
  8. Attached to these Award Conditions is the Joint Project Agreement, and the scope of work dated 2-3-00 for completing the Assessment.

**JOINT PROJECT AGREEMENT  
BETWEEN THE  
ALASKA NATIVE TRIBAL HEALTH CONSORTIUM  
THE  
ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES  
THE  
INDIAN HEALTH SERVICE  
AND THE  
DENALI COMMISSION**

**FOR A RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT**

February 2000

**I. PARTIES**

This document constitutes an Agreement between the Alaska Native Tribal Health Consortium (a Tribally managed non-profit health care organization) hereinafter referred to as ANTHC, the Alaska Department of Health and Social Services (a State Agency) hereinafter referred to as DHSS, the Indian Health Service (a Federal Agency) hereinafter referred to as IHS, and the Denali Commission (an independent agency established by the Denali Commission Act of 1998) hereinafter referred to as the Commission.

**II. PURPOSE**

The purpose of this Agreement is to complete a statewide needs assessment of Alaska rural primary care facilities (Assessment) as further defined in the 2-3-00 scope of work that is attached to and incorporated into this Agreement by reference.

The Assessment addresses the respective missions of all the parties for the development, support, management, and operation and maintenance of rural primary care facilities. Furthermore, it cannot be completed as effectively without the collective funding and participation of all the parties.

**III. MUTUAL INTEREST OF THE PARTIES**

All the parties are interested in the development, funding, construction and long-term operation of effective projects and programs for rural Alaskan communities. The outcome of the Assessment shall help guide local, tribal, state, and federal policy makers on the selection, and prioritization of programs and projects that have the greatest possible potential for effective and significant improvement of the delivery of primary care services to rural Alaska.

**IV. RESPONSIBILITIES OF THE PARTIES**

ANTHC shall manage the contract for this Assessment.

**JOINT PROJECT AGREEMENT  
RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT**

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All parties shall provide technical support by timely input of Assessment elements and timely review of Assessment submittals. An executive steering committee shall be established to guide this Assessment. Representatives to this steering committee (listed below) shall be the primary point of contact for their respective agencies and will be responsive to the responsibilities identified for each agency in the ANTHC work plan, as attached to the 2-3-00 scope of work.

<b>ANTHC Representative</b>	<b>IHS Representative</b>
Rick Boyce, P.E. Director, Division of Health Facilities 3925 Tudor Centre Dr. Anchorage, AK 99508  907-729-3601 Direct Line 1-800-560-8637 (ext. 3601) Toll Free 907-271-4735 Fax <a href="mailto:rboyce@anthc.org">rboyce@anthc.org</a>	Torie Heart, MS, RN Director, CHAP/Rural Health Indian Health Service 4141 Ambassador Dr. Anchorage, AK 99508  907-729-3642 Direct Line 907-729-3629 Fax <a href="mailto:vheart@akanmc.alaska.ihs.gov">vheart@akanmc.alaska.ihs.gov</a> (e-mail)
<b>DHSS Representative</b>	<b>Commission Representative</b>
Patricia A. Carr, MPH Unit Manager, Primary Care and Health Promotion Unit Division of Public Health Department of Health and Social Services PO Box 110616 Juneau, AK 99811  907-465-8618 Direct Line 907-465-6861 Fax <a href="mailto:pat_carr@health.state.ak.us">pat_carr@health.state.ak.us</a>	Joel Neimeyer, P.E. Project Manager Denali Commission 510 "L" Street, Suite 410 Anchorage, AK 99501  907-271-1459 Direct Line 888-480-4321 Toll Free 907-271-1415 Fax <a href="mailto:jneimeyer@denali.gov">jneimeyer@denali.gov</a>

Representatives shall be responsible for identifying alternative representatives to the other parties in advance of any need, which may arise.

**V. APPORTIONMENT OF COSTS AND SERVICES**

The Commission shall provide funding of \$275,000 for this project to ANTHC on a schedule of payments agreeable to both parties in such a manner as to ensure payment to ANTHC prior to ANTHC incurring cost increases to their \$25,000 contribution.

ANTHC shall provide funding of \$25,000 for this project, and contract and technical support services. Said expenditures may begin prior to execution of this Agreement.

DHSS shall provide assessment review and technical consultation and support.

IHS shall provide assessment review and technical consultation and support.

**VI. PERIOD OF AGREEMENT AND MODIFICATION/TERMINATION**

This Agreement will become effective when signed by all parties. The Agreement will terminate upon the completion of the Assessment, but may be amended at any time by mutual consent of the parties. Any party may terminate this Agreement by providing 60 days advance written notice to the other parties.

**VII. OTHER PROVISIONS**

Nothing herein is intended to conflict with current directives of all the parties. If the terms of this Agreement are inconsistent with existing directives of any of the agencies entering into this Agreement, then those portions of this Agreement which are determined to be inconsistent shall be invalid; but the remaining terms and conditions not affected by the inconsistency shall remain in full force and effect. At the first opportunity for review of the Agreement, all necessary changes will be accomplished by either an Amendment to this Agreement or by entering into a new Agreement, whichever is deemed expedient to the interest of all parties.

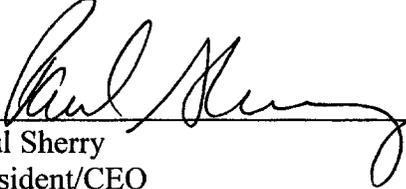
Recognizing that the primary care facility needs assessment is only the first step in defining the full statewide health care system needs, the parties agree to take steps to complete complementary phases. By May 24, 2000 a draft scope of work shall be developed for an on-site "deep look" evaluation of rural health care facilities, and a corresponding scope of work for a health care systems programmatic assessment. Subsequently, the parties will then seek funding to undertake these two additional and complementary assessments to the primary care facility needs assessment.

**JOINT PROJECT AGREEMENT  
RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT**

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IN THE WITNESS WHEREOF, the parties have subscribed their names,

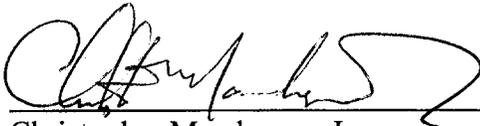
2/4/00  
Date

  
\_\_\_\_\_  
Paul Sherry  
President/CEO  
Alaska Native Tribal Health Consortium

2/9/00  
Date

  
\_\_\_\_\_  
Karen Perdue  
Commissioner  
Department of Health and Social Services

2/8/00  
Date

  
\_\_\_\_\_  
Christopher Mandregan, Jr.  
Director  
Alaska Area Native Health Service

2/24/00  
Date

  
\_\_\_\_\_  
Jeff Staser  
Federal Co-Chair  
Denali Commission

# **Alaska Rural Primary Care Facility Needs Assessment**

## **Scope of Work**

### **2-3-00**

The Rural Primary Care Facility Needs Assessment (Assessment) shall address the adequacy of service of primary care facilities for all communities (with a minimum of 20 year-round residents as identified in the community profile databases maintained by the Alaska Department of Community and Economic Development) that are not presently served with inpatient health care facilities. For the purposes of this Assessment it is understood that primary care facilities and associated infrastructure are a subset of the overall health care delivery system. Inadequate facilities limit the quality and scope of health care; likewise, inadequate health care elements such as untrained or unavailable providers limit available health care. Therefore, foremost in the conduct of the parties in carrying out this scope of work is a recognition that health care infrastructure augments health care delivery. As the parties seek to identify the gaps in primary care facilities, any evident “lacking” health system elements shall also be identified.

This Assessment and the subsequent needs prioritization process will solicit and seek available information on public sector, private not for profit and private for profit primary care facilities, or lack thereof. Although a community may have a number of health care resources, the focus is on primary care facilities. Additionally, this Assessment may serve as a catalyst for further statewide collaborative efforts between the State of Alaska – Department of Health and Social Services (DHSS), the Denali Commission (Commission), the Indian Health Service (IHS), the Alaska Native Tribal Health Consortium (ANTHC), and the stakeholders each party represents. An outline of the goals sought by this Assessment follows.

1. **Definition of Established Levels of Service** - Existing standards are to be jointly identified by IHS, ANTHC and DHSS for primary care facilities, support facilities, equipment, health care systems support (training, education, etc.) and providers. Based on these standards, a level of adequate service standards will be defined. These standards (characteristics of the facility, telecommunications, equipment, types, range of, and access to services for patients, and types and number of providers) will serve to measure the need for improvements to existing health care facilities and systems support.
2. **Community Level Assessment** – Identify statewide: a) communities with an adequate primary care facility, b) communities with an inadequate primary care facility and/or supporting facilities, and c) communities without any dedicated primary care facility.
3. **Existing Health Care System Assessment** – Due to the short time element to complete the Assessment, on-site facilities visits will not be expected. Information will be collected from existing data and questionnaires circulated to key informants. Elements to consider include the following.
  - a. Community Data: population served, population base, community health status and population demographics

- b. **Primary Care Facility Data:** size, structural condition, heat source, location of the facility to core facilities and residential areas, occupancy status (stand alone, multi-use), equipment (including emergency medical equipment)
  - c. **Infrastructure Support Data:** ancillary facilities (health care practitioner housing including temporary lodging, power, water and sewer service, transportation access, telecommunications, etc.), transportation
  - d. **Non-Infrastructure Health Care System Elements:** operating entity, range of service, level and type of provider (primary care, dental, mental health, nurse practitioner, etc.), management/administrative support, types of services provided, management support
  - e. **Other:** current funded projects for clinic construction or upgrades
4. **Database Development** – Develop a database that describes the condition of the health care facility. The database must be agreed to by the parties. The existing IHS facilities database and other existing databases should be considered in developing this database. The goal is to develop a database that is easily accessed, lends itself to future web-based implementation and updates. Include in the database community identifier codes in order to do database sorts based upon population, geography, regional health corporations, and municipal status (i.e. first class city, unincorporated village, etc).
5. **Prioritization Tool** – Develop a prioritization methodology on which to base a ten-year plan to meet rural primary healthcare system requirements. This assessment will have an initial emphasis on facilities, but will also consider programmatic and operating needs.
6. **Stakeholder Participation** – A steering committee comprised of the ANTHC, the Commission, IHS and DHHS shall collaboratively participate in this endeavor. Recognizing that there is limited time to complete this effort, it is expected that the State and ANTHC will outreach to their respective stakeholders. A listing of State and Federal agencies that may have funding for primary health care delivery improvements shall be compiled and these agencies shall be asked to participate.
7. **ANTHC Workplan, Schedule and Budget** – All parties are committed to meeting the ANTHC workplan, as attached.
8. **Timelines** - The data collection and interim needs assessment report should be completed by July 1, 2000. Final report and project prioritization tools should be completed by October 1, 2000.

**CONTACT LIST – In order of who to contact first**

**ANTHC**

3925 Tudor Centre Drive  
Anchorage, AK 99508  
Toll Free – 1-800-560-8637

Gary Kuhn, P.E.  
Electrical Engineer  
907-729-3604 Direct Line  
907-271-4735 Fax  
[gkuhn@anthc.org](mailto:gkuhn@anthc.org)

Rick Boyce, P.E.  
Director, Division of Health Facilities  
907-729-3601 Direct Line  
907-271-4735 Fax  
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Steve Weaver, P.E.  
Director, Department of Environmental Health  
907-729-3717 Direct line  
907-271-4734 Fax  
[Sweaver@anthc.org](mailto:Sweaver@anthc.org)

**ANTHC CONTRACTOR**

Dowl Engineers  
4040 B Street  
Anchorage, AK 99503  
  
Receptionist – 907-562-2000  
Fax – 907-563-39953

Jay Farmwald, P.E.  
Project Manager  
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Brian Farrell  
Planning Technician  
[bfarrell@dowl.com](mailto:bfarrell@dowl.com)

**DENALI COMMISSION**

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907-271-1414 Receptionist

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Project Manager  
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[jneimeyer@denali.gov](mailto:jneimeyer@denali.gov)

Sam Kito, III, P.E.  
Project Manager  
907-271-1425 Direct Line  
[Skito@denali.gov](mailto:Skito@denali.gov)

Al Ewing  
Chief of Staff  
907-271-1426 Direct  
[Aewing@denali.gov](mailto:Aewing@denali.gov)

**INDIAN HEALTH SERVICE**

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Community Health Aide Program Director  
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Anchorage, AK 99508  
907-729-3642 Direct  
907-729-3629 Fax  
[vheart@akanmc.alaska.ihs.gov](mailto:vheart@akanmc.alaska.ihs.gov)

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3925 Tudor Centre Dr.  
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907-271-4735 Fax  
[pponcho@oehe.alaska.ihs.gov](mailto:pponcho@oehe.alaska.ihs.gov)

Tom Coolidge, P.E.  
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**DIVISION OF PUBLIC HEALTH**

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Juneau, AK 99811  
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**Alaska Rural Primary Care Facility Needs Assessment  
Scope of Work**

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907-465-4101 Fax  
[markj@health.state.ak.us](mailto:markj@health.state.ak.us)

RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

2/8/00

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						Note: Red shading indicates primary responsibility; blue shading indicates support.						
Line						Responsibility						
0	ACTIVITY and/or TASK	Duration	Start	Finish	Predecessors	DC	ANTHC	DHSS	IHS	Stake-Holders	N / D	GEO
	<b>SCOPING AND PROJECT START-UP</b>	49 days	10-Jan	27-Feb								
	SC Scoping Meeting (Anchorage)	0 days	10-Jan	10-Jan		X	X	X			X	
3	SC Scoping Meeting (Juneau)	0 days	20-Jan	20-Jan		X	X	X			X	
4	N/D Proposal Submitted	0 days	25-Jan	25-Jan								
5	Initial Contact W/ Stakeholders	0 days	25-Jan	25-Jan								
6	SC & Stakeholder Input (on criteria, data collection, database & prioritization factors)	17 days	25-Jan	10-Feb	5							
7	Joint Project Agreement Signed	0 days	4-Feb	4-Feb								
8	N/D Notice To Proceed	0 days	4-Feb	4-Feb	7							
9	N/D - GEONORTH - ANTHC Kickoff Meeting	0 days	7-Feb	7-Feb	8		X				X	X
10	Develop Project Management Tools	21 days	7-Feb	27-Feb	8,9							
11	<b>ESTABLISH CRITERIA</b>	40 days	10-Jan	18-Feb								
12	Assemble Existing Data and Standards	23 days	10-Jan	1-Feb								
13	Publish List of Communities To Be Included in Database	0 days	1-Feb	1-Feb								
14	Develop General Program Standards (services & staffing)	13 days	4-Feb	16-Feb	12,13,8							
15	Develop Facility Standards	13 days	4-Feb	16-Feb	12,13,8							
16	Develop Program Cost Factors	13 days	4-Feb	16-Feb	12,13,8							
	Develop Facility Cost Factors (maintenance, improvement & new const.)	13 days	4-Feb	16-Feb	12,13,8							
18	Develop List of Prioritization Factors	13 days	4-Feb	16-Feb	8							
19	Draft Standards and Factors to ANTHC	0 days	16-Feb	16-Feb	12,14,18,15,16,17							
20	Draft Standards & Stakeholder Comments to SC	0 days	16-Feb	16-Feb	14,19							
21	SC Review	2 days	17-Feb	18-Feb	20							
22	SC Meeting (Anchorage)	0 days	18-Feb	18-Feb	21	X	X	X	X		X	X
23	<b>DATA COLLECTION</b>	82 days	14-Feb	5-May								
24	Develop Internet & PC Data Collection Interfaces	15 days	14-Feb	28-Feb								
25	Develop List and Inventory of All Required Data	3 days	17-Feb	19-Feb	14,15,18							
26	Identify Existing Data To Be Used	3 days	20-Feb	22-Feb	14,15,25							
27	Develop Program Data Questionnaire	7 days	23-Feb	29-Feb	14,25,26							
28	Develop Facility Data Questionnaire	7 days	23-Feb	29-Feb	15,25,26							
29	Develop Community Data Questionnaire	7 days	23-Feb	29-Feb	14,15,25,26							
30	Workgroup Meeting (Anchorage)	0 days	25-Feb	25-Feb			X	X	X		X	X
31	Draft Data Collection Format to ANTHC	0 days	29-Feb	29-Feb	27,28,29,24							

RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

						Note: Red shading indicates primary responsibility; blue shading indicates support.						
Line						Responsibility						
0	ACTIVITY and/or TASK	Duration	Start	Finish	Predecessors	DC	ANTHC	DHSS	IHS	Stake-Holders	N / D	GEO
	Draft Data Collection Format to SC	0 days	1-Mar	1-Mar	31FS+1 day							
	SC Review	6 days	2-Mar	7-Mar	32							
34	SC Meeting (Anchorage)	0 days	8-Mar	8-Mar	33FS+1 day	X	X	X	X		X	X
35	Finalize Data Collection Procedures	6 days	9-Mar	14-Mar	34							
36	Secure Electronic Files From Existing Data Sources	14 days	15-Mar	28-Mar	35							
37	Data Collection Packages to the Field	0 days	15-Mar	15-Mar	35FS+1 day							
38	Questionnaire Response Period	30 days	16-Mar	14-Apr	37							
39	Review/QC New & Existing Data	7 days	15-Apr	21-Apr	38,36							
40	Questionnaire Follow-up	21 days	15-Apr	5-May	38							
41	Develop Additional Cost Data As Required	10 days	15-Apr	24-Apr	38							
42	<b>DESIGN AND DEVELOP DATABASE</b>	94 days	20-Feb	23-May								
43	Confirm Database Requirements and Standards	6 days	20-Feb	25-Feb	25							
44	Prepare Data Model and Entity Relation Diagram	10 days	1-Mar	10-Mar	27,28,29,43							
45	Prepare Summary of Standard Queries and Reports	10 days	11-Mar	20-Mar	44							
46	Outline Graphic & Geographic Component Requirements	3 days	21-Mar	23-Mar	45							
47	Database Selection	2 days	24-Mar	25-Mar	46							
48	Summary Package to ANTHC	0 days	27-Mar	27-Mar	47FS+2 days							
	Summary Package to SC	0 days	28-Mar	28-Mar	48FS+1 day							
	SC Review	6 days	29-Mar	3-Apr	49							
51	SC Meeting (Anchorage)	0 days	5-Apr	5-Apr		X	X	X	X		X	X
52	Develop Database	14 days	6-Apr	19-Apr	51FS+1 day							
53	Populate Database	7 days	20-Apr	26-Apr	52							
54	Build Initial Draft Reports	7 days	27-Apr	3-May	53							
55	QC Data and Reports	4 days	4-May	7-May	54							
56	Prepare Data Dictionary & Data Status Summary Package	4 days	8-May	11-May	55							
57	Summary Package to ANTHC	0 days	12-May	12-May	56FS+1 day							
58	Summary Package to SC	0 days	12-May	12-May	57							
59	SC Review	3 days	13-May	15-May	58							
60	SC Meeting (Anchorage)	0 days	16-May	16-May	59FS+1 day	X	X	X	X		X	X
61	Finalize Database	7 days	17-May	23-May	60							
62	<b>PREPARE INTERIM REPORT</b>	94 days	28-Mar	29-Jun								
63	Develop Report Outline and Req'd Database Exhibits	5 days	28-Mar	1-Apr	48							

RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

						Note: Red shading indicates primary responsibility; blue shading indicates support.						
Line	ACTIVITY and/or TASK	Duration	Start	Finish	Predecessors	Responsibility						
						DC	ANTHC	DHSS	IHS	Stake-Holders	N / D	GEO
	Prepare Draft Report	25 days	4-May	28-May	63,54							
	OTS Review by ANTHC	0 days	15-May	15-May	64SS+12 days							
66	Draft Interim Report to ANTHC	0 days	29-May	29-May	64FS+1 day							
67	Draft Interim Report to SC	0 days	29-May	29-May	66							
68	Distribute to Stakeholders	3 days	30-May	1-Jun	66							
69	SC Review	13 days	30-May	11-Jun	67							
70	Stakeholder Comments Due	0 days	15-Jun	15-Jun	69FS+4 days							
71	SC Meeting (Anchorage)	0 days	16-Jun	16-Jun	70FS+1 day	X	X	X	X		X	X
72	Finalize Report	10 days	18-Jun	27-Jun	71FS+1 day							
73	Final Interim Report to ANTHC	0 days	28-Jun	28-Jun	72FS+1 day							
74	Final Interim Report to SC	0 days	29-Jun	29-Jun	73FS+1 day							
75	<b>DEVELOP PRIORITIZATION METHODOLOGY</b>	63 days	11-Jul	11-Sep								
76	SC Meeting (Anchorage)	0 days	11-Jul	11-Jul		X	X	X	X		X	X
77	Develop Relative Weights	5 days	11-Jul	15-Jul	76							
78	Develop Algorithm	16 days	16-Jul	31-Jul	77,18							
79	Draft Prioritization Methodology to ANTHC	0 days	31-Jul	31-Jul	78							
80	Draft Prioritization Methodology to SC	0 days	1-Aug	1-Aug	79FS+1 day							
	SC Review of Draft Methodology	5 days	2-Aug	6-Aug	80							
	Prepare Prioritization Documentation	21 days	2-Aug	22-Aug	80							
83	SC Meeting (Anchorage)	0 days	15-Aug	15-Aug		X	X	X	X		X	X
84	Finalize Algorithm and Documentation	28 days	15-Aug	11-Sep	83							
85	<b>DESIGN AND DEVELOP APPLICATIONS</b>	184 days	21-Mar	20-Sep								
86	Confirm Reporting Requirements	3 days	21-Mar	23-Mar	45							
87	Define Geographic Component	3 days	28-Jun	30-Jun	72							
88	Create Draft Application Requirements Document	4 days	28-Jun	1-Jul	72							
89	Review Prioritization Methodology	5 days	1-Aug	5-Aug	78							
90	Finalize Application Requirements Document	5 days	6-Aug	10-Aug	89							
91	Design Integrated Application	120 days	27-Apr	24-Aug	53							
92	Prototype Application	14 days	1-Aug	14-Aug	78							
93	Develop Application	14 days	15-Aug	28-Aug	92							
94	Test and Debug Application	7 days	29-Aug	4-Sep	93							
95	Sensitivity Analysis on Prioritization Methodology	10 days	7-Aug	16-Aug	81							

RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

						Note: Red shading indicates primary responsibility; blue shading indicates support.						
Line						Responsibility						
0	ACTIVITY and/or TASK	Duration	Start	Finish	Predecessors	DC	ANTHC	DHSS	IHS	Stake-Holders	N / D	GEO
	Build Reports and Perform QC Review	14 days	5-Sep	18-Sep	94,95							
	Prepare User Documentation and Online Help Functions	7 days	5-Sep	11-Sep	94							
98	Conduct User Training	2 days	12-Sep	13-Sep	97							
99	Prepare Application Documentation	7 days	14-Sep	20-Sep	98							
100	User Acceptance	0 days	20-Sep	20-Sep	98,99							
101	<b>PREPARE FINAL REPORT</b>	82 days	8-Jul	27-Sep								
102	Develop Report Outline	5 days	8-Jul	12-Jul	72FS+10 days							
103	Prepare Report	21 days	17-Aug	6-Sep	78,95							
104	Draft Final Report to ANTHC	0 days	6-Sep	6-Sep	103							
105	Draft Final Report to SC	0 days	7-Sep	7-Sep	104FS+1 day							
106	SC Review	7 days	8-Sep	14-Sep	105							
107	Finalize Report	11 days	15-Sep	25-Sep	106							
108	Final Report to ANTHC	0 days	26-Sep	26-Sep	107FS+1 day							
109	Final Report to SC	0 days	27-Sep	27-Sep	108FS+1 day							

MASTER SCHEDULE - RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

Tue 2/8/00

ID	Task Name	Duration	Start	Finish	Predecessors	1st Quarter			2nd Quarter					3rd Quarter					4th Qua																
						Jan 1	Jan 11	Jan 21	Feb 1	Feb 11	Feb 21	Mar 1	Mar 11	Mar 21	Apr 1	Apr 11	Apr 21	May 1	May 11	May 21	Jun 1	Jun 11	Jun 21	Jul 1	Jul 11	Jul 21	Aug 1	Aug 11	Aug 21	Sep 1	Sep 11	Sep 21	Oct 1		
1	<b>Scoping and Project Start-Up</b>	49 days	Mon 1/10/00	Sun 2/27/00		Scoping and Project Start-Up																													
2	SC Scoping Meeting (Anchorage)	0 days	Mon 1/10/00	Mon 1/10/00		2																													
3	SC Scoping Meeting (Juneau)	0 days	Thu 1/20/00	Thu 1/20/00		3																													
4	N/D Proposal Submitted	0 days	Tue 1/25/00	Tue 1/25/00		4																													
5	Initial Contact W/ Stakeholders	0 days	Tue 1/25/00	Tue 1/25/00		5																													
6	SC & Stakeholder Input (on criteria, data collection, database & p	17 days	Tue 1/25/00	Thu 2/10/00	5	6																													
7	Joint Project Agreement Signed	0 days	Fri 2/4/00	Fri 2/4/00		7																													
8	N/D Notice To Proceed	0 days	Fri 2/4/00	Fri 2/4/00	7	8																													
9	N/D - GEONORTH - ANTHC Kickoff Meeting	0 days	Mon 2/7/00	Mon 2/7/00	8	9																													
10	Develop Project Management Tools	21 days	Mon 2/7/00	Sun 2/27/00	8,9	10																													
11	<b>Establish Criteria</b>	40 days	Mon 1/10/00	Fri 2/18/00		Establish Criteria																													
12	Assemble Existing Data and Standards	23 days	Mon 1/10/00	Tue 2/1/00		12																													
13	Publish List of Communities To Be Included in Database	0 days	Tue 2/1/00	Tue 2/1/00		13																													
14	Develop General Program Standards (services & staffing)	13 days	Fri 2/4/00	Wed 2/16/00	12,13,8	14																													
15	Develop Facility Standards	13 days	Fri 2/4/00	Wed 2/16/00	12,13,8	15																													
16	Develop Program Cost Factors	13 days	Fri 2/4/00	Wed 2/16/00	12,13,8	16																													
17	Develop Facility Cost Factors (maintenance, improvement & new	13 days	Fri 2/4/00	Wed 2/16/00	12,13,8	17																													
18	Develop List of Prioritization Factors	13 days	Fri 2/4/00	Wed 2/16/00	8	18																													
19	Draft Standards and Factors to ANTHC	0 days	Wed 2/16/00	Wed 2/16/00	12,14,18,15,16,17	19																													
20	Draft Standards & Stakeholder Comments to SC	0 days	Wed 2/16/00	Wed 2/16/00	14,19	20																													
21	SC Review	2 days	Thu 2/17/00	Fri 2/18/00	20	21																													
22	SC Meeting (Anchorage)	0 days	Fri 2/18/00	Fri 2/18/00	21	22																													
23	<b>Data Collection</b>	82 days	Mon 2/14/00	Fri 5/5/00		Data Collection																													
24	Develop Internet & PC Data Collection Interfaces	15 days	Mon 2/14/00	Mon 2/28/00		24																													
25	Develop List and Inventory of All Required Data	3 days	Thu 2/17/00	Sat 2/19/00	14,15,18	25																													
26	Identify Existing Data To Be Used	3 days	Sun 2/20/00	Tue 2/22/00	14,15,25	26																													
27	Develop Program Data Questionnaire	7 days	Wed 2/23/00	Tue 2/29/00	14,25,26	27																													
28	Develop Facility Data Questionnaire	7 days	Wed 2/23/00	Tue 2/29/00	15,25,26	28																													
29	Develop Community Data Questionnaire	7 days	Wed 2/23/00	Tue 2/29/00	14,15,25,26	29																													
30	Workgroup Meeting (Anchorage)	0 days	Fri 2/25/00	Fri 2/25/00		30																													
31	Draft Data Collection Format to ANTHC	0 days	Tue 2/29/00	Tue 2/29/00	27,28,29,24	31																													
32	Draft Data Collection Format to SC	0 days	Wed 3/1/00	Wed 3/1/00	31FS+1 day	32																													
33	SC Review	6 days	Thu 3/2/00	Tue 3/7/00	32	33																													
34	SC Meeting (Anchorage)	0 days	Wed 3/8/00	Wed 3/8/00	33FS+1 day	34																													
35	Finalize Data Collection Procedures	6 days	Thu 3/9/00	Tue 3/14/00	34	35																													
36	Secure Electronic Files From Existing Data Sources	14 days	Wed 3/15/00	Tue 3/28/00	35	36																													
37	Data Collection Packages to the Field	0 days	Wed 3/15/00	Wed 3/15/00	35FS+1 day	37																													
38	Questionnaire Response Period	30 days	Thu 3/16/00	Fri 4/14/00	37	38																													
39	Review/QC New & Existing Data	7 days	Sat 4/15/00	Fri 4/21/00	38,36	39																													
40	Questionnaire Follow-up	21 days	Sat 4/15/00	Fri 5/5/00	38	40																													
41	Develop Additional Cost Data As Required	10 days	Sat 4/15/00	Mon 4/24/00	38	41																													

MASTER SCHEDULE - RURAL PRIMARY CARE FACILITY NEEDS ASSESSMENT

Tue 2/8/00

ID	Task Name	Duration	Start	Finish	Predecessors	1st Quarter												2nd Quarter					3rd Quarter				4th Qua								
						Jan 1	Jan 11	Jan 21	Feb 1	Feb 11	Feb 21	Mar 1	Mar 11	Mar 21	Apr 1	Apr 11	Apr 21	May 1	May 11	May 21	Jun 1	Jun 11	Jun 21	Jul 1	Jul 11	Jul 21	Aug 1	Aug 11	Aug 21	Sep 1	Sep 11	Sep 21	Oct 1		
42	<b>Design and Develop Database</b>	<b>94 days</b>	<b>Sun 2/20/00</b>	<b>Tue 5/23/00</b>		<b>Design and Develop Database</b>																													
43	Confirm Database Requirements and Standards	6 days	Sun 2/20/00	Fri 2/25/00	25	43																													
44	Prepare Data Model and Entity Relation Diagram	10 days	Wed 3/1/00	Fri 3/10/00	27,28,29,43	44																													
45	Prepare Summary of Standard Queries and Reports	10 days	Sat 3/11/00	Mon 3/20/00	44	45																													
46	Outline Graphic & Geographic Component Requirements	3 days	Tue 3/21/00	Thu 3/23/00	45	46																													
47	Database Selection	2 days	Fri 3/24/00	Sat 3/25/00	46	47																													
48	Summary Package to ANTHC	0 days	Mon 3/27/00	Mon 3/27/00	47FS+2 days	48																													
49	Summary Package to SC	0 days	Tue 3/28/00	Tue 3/28/00	48FS+1 day	49																													
50	SC Review	6 days	Wed 3/29/00	Mon 4/3/00	49	50																													
51	SC Meeting (Anchorage)	0 days	Wed 4/5/00	Wed 4/5/00		51																													
52	Develop Database	14 days	Thu 4/6/00	Wed 4/19/00	51FS+1 day	52																													
53	Populate Database	7 days	Thu 4/20/00	Wed 4/26/00	52	53																													
54	Build Initial Draft Reports	7 days	Thu 4/27/00	Wed 5/3/00	53	54																													
55	QC Data and Reports	4 days	Thu 5/4/00	Sun 5/7/00	54	55																													
56	Prepare Data Dictionary & Data Status Summary Package	4 days	Mon 5/8/00	Thu 5/11/00	55	56																													
57	Summary Package to ANTHC	0 days	Fri 5/12/00	Fri 5/12/00	56FS+1 day	57																													
58	Summary Package to SC	0 days	Fri 5/12/00	Fri 5/12/00	57	58																													
59	SC Review	3 days	Sat 5/13/00	Mon 5/15/00	58	59																													
60	SC Meeting (Anchorage)	0 days	Tue 5/16/00	Tue 5/16/00	59FS+1 day	60																													
61	Finalize Database	7 days	Wed 5/17/00	Tue 5/23/00	60	61																													
62	<b>Prepare Interim Report</b>	<b>94 days</b>	<b>Tue 3/28/00</b>	<b>Thu 6/29/00</b>		<b>Prepare Interim Report</b>																													
63	Develop Report Outline and Req'd Database Exhibits	5 days	Tue 3/28/00	Sat 4/1/00	48	63																													
64	Prepare Draft Report	25 days	Thu 5/4/00	Sun 5/28/00	63,54	64																													
65	OTS Review BY ANTHC	0 days	Mon 5/15/00	Mon 5/15/00	64SS+12 days	65																													
66	Draft Interim Report to ANTHC	0 days	Mon 5/29/00	Mon 5/29/00	64FS+1 day	66																													
67	Draft Interim Report to SC	0 days	Mon 5/29/00	Mon 5/29/00	66	67																													
68	Distribute to Stakeholders	3 days	Tue 5/30/00	Thu 6/1/00	66	68																													
69	SC Review	13 days	Tue 5/30/00	Sun 6/11/00	67	69																													
70	Stakeholder Comments Due	0 days	Thu 6/15/00	Thu 6/15/00	69FS+4 days	70																													
71	SC Meeting (Anchorage)	0 days	Fri 6/16/00	Fri 6/16/00	70FS+1 day	71																													
72	Finalize Report	10 days	Sun 6/18/00	Tue 6/27/00	71FS+1 day	72																													
73	Final Interim Report to ANTHC	0 days	Wed 6/28/00	Wed 6/28/00	72FS+1 day	73																													
74	Final Interim Report to SC	0 days	Thu 6/29/00	Thu 6/29/00	73FS+1 day	74																													

