Communities Mobilizing for Health Equity

2017 Western Forum for Migrant and Community Health

Conference Program

February 22–24
San Francisco, CA
Welcome to the City by the Bay

for the 2017 Western Forum for Migrant and Community Health!

On behalf of Northwest Regional Primary Care Association, I’d like to thank you for your participation and continuous dedication to helping advance health equity and community wellness.

This year’s theme, Communities Mobilizing for Health Equity, recognizes the importance of community building and grassroots organizing to effect change. Health centers have been at the forefront of the health equity movement since they were first established during the civil rights movement.

Today, health centers serve over 25 million people in 9,200 rural and urban communities across the country. Despite our significant growth and achievements as a movement, we find ourselves at a time of unprecedented change. Uncertainties lie ahead regarding policies affecting health care, immigration, education, and community and economic development, all of which have substantial implications for community health and health equity.

Among the highlights of this year’s Forum include a keynote presentation from Arturo Rodriguez, President of the United Farm Workers, and a live performance from El Teatro Campesino.

Arturo Rodriguez is continuing to build the union Cesar Chavez founded into a powerful voice for immigrant workers by increasing its membership and pushing historic legislation on immigration reform and worker rights. He seeks to fundamentally transform American agriculture by creating jobs offering workers decent pay, comprehensive health coverage, retirement security, protections against toxic poisons, job security and guarantees against discrimination and sexual harassment. His goal is also to preserve America’s food supply through a strong and viable agricultural industry.

El Teatro Campesino was founded in 1965 by American playwright Luis Valdez as a means to organize the nation’s agricultural workers through art and culture. From flat-bed trucks to the Broadway stage, this multigenerational company works to empower Chicano/Latino artists and communities from its home in San Juan Bautista, California. El Teatro Campesino’s seminal work has impacted and influenced several artists and cultural institutions in developing an acting technique, aesthetic, and narrative of Latinos’ pursuit of social justice in the United States and internationally.

Thank you again for joining us. We hope you will use your time here to connect, to dialogue, to learn, to strategize, and to organize as our movement continues onward in our pursuit of health equity and justice.

Bruce Gray
Chief Executive Officer
NWRPCA

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### WEDNESDAY

**Registration & Continental Breakfast**  
7–8 a.m.  
Lower Lobby Foyer & Redwood

**Opening Plenary**  
8–10 a.m.  
Gold Rush Ballroom

**Break with Exhibitors**  
10–10:30 a.m.  
Redwood

**Conference Sessions**  
10:30 a.m.–12 p.m.

**Lunch on Your Own**  
12–1:30 p.m.

**Conference Sessions**  
1:30–3 p.m.

**Break with Exhibitors**  
3–3:30 p.m.  
Redwood

**Conference Sessions**  
3:30–5 p.m.

**Welcome Reception**  
6:30–8:30 p.m.  
Emerald Ballroom

### THURSDAY

**Registration & Continental Breakfast**  
7:30–8:30 a.m.  
Lower Lobby Foyer & Redwood

**Conference Sessions**  
8:30–10 a.m.

**Break with Exhibitors**  
10–10:30 a.m.  
Redwood

**Conference Sessions**  
10:30 a.m.–12 p.m.

**Lunch on Your Own**  
12–1:30 p.m.

**Conference Sessions**  
1:30–3 p.m.

**Break with Exhibitors**  
3–3:30 p.m.  
Redwood

**Conference Sessions**  
3:30–5 p.m.

**Met(t)a Video Project Viewing & Discussion**  
5:30–6:45 p.m.  
Gold Rush A

### FRIDAY

**Registration & Continental Breakfast**  
7:30–8:30 a.m.  
Lower Lobby Foyer & Redwood

**Conference Sessions**  
8:30–10 a.m.

**Break with Exhibitors**  
10–10:30 a.m.  
Redwood

**Conference Sessions**  
10:30 a.m.–12 p.m.

**Closing Luncheon**  
12:15–2 p.m.  
Crystal Ballroom

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**CONFERENCE SESSION INFORMATION AND SUPPORTING DOCUMENTS**

Access to conference session information, including supporting documents, can be found here: [www.nwrpca.org/my-events](http://www.nwrpca.org/my-events)

If you are new to our Learning Portal, your log-in information is the email address used to register for the conference, along with the password "NWRPCA". If you have accessed our Learning Portal during another event, you may have created a stronger password. Regardless, you can always reset your password at the log-in with your registration email.

Upon successful log-in, please change your password in order to continue with secure access. If you have any questions regarding the log-in, please check with the registration desk or email [registration@nwrpca.org](mailto:registration@nwrpca.org).
CONTINUING EDUCATION

All CEU certificates will be accessed online. Conference attendees will be sent an email after the conference with instructions on how to process your CEUs online. You will be responsible for completing the process online and printing your certificate.

CONTINUING MEDICAL EDUCATION (CME)
Application of CME credits has been filed with American Academy of Family Physicians. Determination of credits is pending. Past conferences have offered up to 13.5 credit hours.

NATIONAL ASSOCIATION OF SOCIAL WORKERS (NASW)
This conference has been approved for 13.5 CEUs by the Washington Chapter, National Association of Social Workers (NASW) for Licensed Social Workers, Licensed Marriage & Family Therapists and Licensed Mental Health Counselors. Provider number is #1975-415.

CONTINUING NURSING EDUCATION (CNE)
CNE credits will be awarded through Migrant Clinicians Network. Migrant Clinicians Network is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center’s Commission on Accreditation.

CONTINUING DENTAL EDUCATION (CDE)
This program has been approved by the PACE program provided by the Academy of General Dentistry. The formal education programs are accepted by the Academy for Fellowship, Mastership and Membership Maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry.

NACHC UPDATE
Joe Gallegos
Senior Vice President of Western Operations
National Association of Community Health Centers

SPEAKER DISCLOSURE
Edward McClements
Barkley Insurance and Risk Management
ARTURO RODRIGUEZ

As president of the United Farm Workers of America, Arturo S. Rodriguez is continuing to build the union Cesar Chavez founded into a powerful voice for immigrant workers by increasing its membership and pushing historic legislation on immigration reform and worker rights.

Rodriguez is leading the UFW in bringing about meaningful change for farm workers by making it easier for them to organize and negotiate union contracts. He seeks to fundamentally transform American agriculture by creating jobs offering workers decent pay, comprehensive health coverage, retirement security, protections against toxic poisons, job security and guarantees against discrimination and sexual harassment. Under Rodriguez, the UFW is working to offer innovative alternative representation through benefits and services, and to extend innovative representation to workers temporarily brought to work in U.S. agriculture. His goal is also preserving America’s food supply through a strong and viable agricultural industry.

Since the Texas native took over the helm of the UFW upon the passing of its legendary founder in 1993, Rodriguez has increased union membership with aggressive organizing and negotiating campaigns. Among recent UFW victories are agreements with one of the nation’s top five largest vegetable growers, the biggest strawberry employer in the United States, the top U.S. rose producer, the country’s largest winery, the biggest dairy in the U.S. as well as winery workers in Washington state.

Recent historic UFW legislative achievements include a 2011 law signed by Gov. Jerry Brown helping farm workers organize when growers deny them the right to have a union; a 2002 California law signed by then-Gov. Gray Davis letting farm workers call in neutral arbitrators to hammer out union contracts when growers refuse to negotiate agreements; and a 2005 regulation the UFW convinced then-Gov. Arnold Schwarzenegger to issue, the first state regulation in the nation to help prevent farm and other outdoor workers from dying or becoming ill because of extreme heat. Rodriguez negotiated with growers to fashion the agricultural provisions in the bipartisan immigration reform bill passed by the U.S. Senate in June 2013; they would provide a pathway to citizenship for undocumented farm workers in this country.

The veteran farm labor organizer was first introduced to Cesar Chavez through his parish priest in his hometown of San Antonio, Texas in 1966. He became active with the UFW’s grape boycott as a student at St. Mary’s University in 1969. At the University of Michigan in 1971, where he earned an M.A. degree in social work, Rodriguez organized support for farm worker boycotts. He began serving full time with the UFW in 1973, when he first met Chavez, who became his mentor for 20 years. Rodriguez has more than 40 years experience organizing farm workers, negotiating UFW contracts and leading numerous farm worker boycotts and political drives across North America.

Rodriguez and his wife Sonia live near the UFW’s headquarters at Keene, in California’s Tehachapi Mountains.

EL TEATRO CAMPESINO

Founded in 1965 by award-winning American playwright Luis Valdez as a means of organizing the nation’s agricultural workers through art and culture, El Teatro Campesino — literally “the Farm Workers’ theater” — has been at the forefront of using theater as an artistic generator of social change for five decades. ETC’s seminal work has impacted and influenced several artists and cultural institutions in developing an acting technique, aesthetic, and narrative of Latinos’ pursuit of social justice in the United States and internationally. From flat-bed trucks to the Broadway stage, this multigenerational company has worked to empower Chicano/Latino artists and communities from its home in San Juan Bautista, California since 1971.
Angel Flight West
Angel Flight West arranges free air transportation for people who need to travel to access medical care and other essential services. Our volunteer pilots and airline partners donate the costs of all flights. *There’s never a charge for an Angel Flight West mission.*
Ivan Martinez
ivanm@angelflightwest.org
www.angelflightwest.org

Arista MD
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Designed by practicing physicians, the AristaMD eConsult Platform is the only comprehensive solution available that offers primary care providers proven clinical work-up checklists being utilized by leading academic medical centers across the country. It is HIPAA compliant, simple to use, and houses robust data analytic tools.
J. Ricks Mattson
ricks@aristamd.com
www.aristamd.com

California Primary Care Association
California Primary Care Association (CPCA) is the statewide leader and recognized voice representing the interests of California community health centers (CHCs) and their patients. CPCA represents 1,200+ not-for-profit CHCs who provide comprehensive, quality health care services to low-income, uninsured and underserved Californians, who might otherwise not have access to health care.
Elizabeth Oseguera
eoseguera@c pca.org
www.cpca.org

Callpointe
Callpointe offers easy to use, web-based appointment reminder services for medical professionals to communicate with their patients by phone, text, or email. An automated messaging service can be an invaluable part of an organization’s long-term strategy for growth and profitability.
Dianna Santillanes
dianna.santillanes@callpointe.com
www.callpointe.com

Cardinal Health
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At Cardinal Health, we strive to provide high quality health care and pharmacy access to patients in their communities. Community health centers offer a comprehensive approach to keeping patients healthy by striving to be true patient-centered medical homes. Cardinal Health is proud to serve your community with local, passionate health care professionals.
Rick McGraw
rick.mcgraw@cardinalhealth.com
www.cardinalhealth.com

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huzefa@certintell.com
www.certintell.com

Chiropractic Community Health Alliances
The goal of the Chiropractic Community Health Alliance (CCHA) is to serve the millions of people in America who rely on Federally Qualified Health Centers (FQHCs) for their family’s health.
Seenie Meehan
info@ccha.org
www.theccha.org
Coverys

Coverys is a leading medical malpractice insurance provider dedicated to helping its policyholders anticipate, identify, and manage risk. With an emphasis on physician education and patient safety, Coverys provides innovative risk management services and resolute claim defense to the health care community.

Sandy Brecker
sbrecker@coverys.com
www.coverys.com

FDA Office of Minority Health

The FDA Office of Minority Health’s mission is to promote and protect the health of diverse populations through research and communication of regulatory science that addresses health disparities.

Mary Ellen Taylor
maryellen.taylor@fda.hhs.gov
http://www.fda.gov/aboutfda/centersoffices/oc/officeofminorityhealth/default.htm

Foundation for Healthy Generations

We believe that people and communities thrive when all are healthy, included, and connected. Complex social issues like building healthy communities outpace the ability of any one organization to solve them. We provide strategically targeted philanthropic dollars from our investment fund along with technical expertise and convening for key community and leadership learning to invest in community-based health solutions.

www.healthygen.org

GE Healthcare

GE Healthcare provides transformational medical technologies and services to meet the demand for increased access, enhanced quality, and more affordable health care. From medical imaging, software & IT, patient monitoring and diagnostics to drug discovery, biopharmaceutical manufacturing technologies, and performance improvement solutions, GE Healthcare helps medical professionals deliver great health care to their patients.

David Pease
generalcare@ge.com
www.gegeneralcare.com/cps

Hesperian Health Guides

Hesperian Health Guides is a nonprofit health information and health education publisher that supports individuals and communities in their struggles to realize the right to health. We develop easy-to-read materials that are produced in many languages. All are available through our bookstore and many are available on our free online HealthWiki.

Kokaale Amissah-Aidoo
Hesperian@hesperian.org
www.hesperian.org

HITEQ Center

The HITEQ Center is a HRSA-funded National Cooperative Agreement that collaborates with HRSA partners including Health Center Controlled Networks, Primary Care Associations, and other National Cooperative Agreements to support health centers in full optimization of their EHR/Health IT systems.

Suz Friedrich
s_friedrich@jsi.com
www.hiteqcenter.org

The Inline Group

The Inline Group connects candidates with clients without commissions. Truly, in a nutshell, this is what we do. We match our clients’ jobs with candidates who are the perfect fit. Never pay a third-party placement fee again. Work with a company dedicated to shattering the status quo and finding you candidates.

Joseph Valdez
jvaldez@inline.group
www.inline.group

Institute for Healthcare Advancement

The Institute for Healthcare Advancement (IHA) is dedicated to empowering people to better health. To fulfill our mission, we:

» Publish easy-to-read books, and teacher manuals
» Organize an annual continuing education health literacy conference
» Offer health literacy rewrite/redesign and original writing and graphic design service

Andrew Pong
APong@iha4health.org
www.iha4health.org
MHP Salud
MHP Salud is a national nonprofit that implements Community Health Worker programs to empower underserved Latino communities and promotes the CHW model nationally as a culturally appropriate strategy to improve health. MHP Salud has extensive experience offering health organizations training and technical assistance on Community Health Worker programming. 
Rebecca Epstein
repstein@mhpsalud.org
www.mhpsalud.org

Migrant Clinicians Network
Migrant Clinicians Network is a 501(c)3 nonprofit organization that creates practical solutions at the intersection of poverty, migration, and health with the ultimate purpose of providing quality health care that increases access and reduces disparities for migrant farmworkers and other mobile underserved populations. 
Ricardo Garay
rgaray@migrantclinician.org
www.migrantclinician.org

National Center for Farmworker Health

ANNUAL CONFERENCE SPONSOR
The National Center for Farmworker Health (NCFH) is a private, not-for-profit corporation located in Buda, Texas dedicated to improving the health status of farmworker families by providing information services, training and technical assistance, and a variety of products to community and migrant health centers nationwide, as well as organizations, universities, researchers, and individuals involved in farmworker health.
Lisa Miller
miller@ncfh.org
www.ncfh.org

PDI Surgery Center
PDI Surgery Center’s mission is to maintain a sustainable dentistry resource that will serve the low income children of Northern California who needs safe sedation for dental treatment, and to provide prevention education and promote oral health. 
Wendy Lopez
wendy@pdisurgerycenter.org
www.pdisurgerycenter.org

NWRPCA extends its sincerest thanks to the following individuals and organizations for their contributions in planning the 2017 Western Forum for Migrant and Community Health.

Patria Alguila · MHP Salud
Teresa Andrews · University of California Davis
Hilda Bogue · National Center for Farmworker Health
Doug Brock · University of Washington
Gladys Cate · Health Resources & Services Administration
Maria Castro · State of Oregon Office of Equity & Inclusion
Stephanie Castro · Oregon Primary Care Association
Guadalupe Cuesta · FHI 360
Ignolia Duyck · Virginia Garcia Medical Center
Susan Gabbard · JBS International
Joe Gallegos · National Association for Community Health Centers
Leda Garside · Tuality Healthcare
Orlando Gonzalez · Family Health Centers
Celia Higuera · Oregon Community Health Worker Association
Barbara Hollinger · University of California San Francisco, Emeritus
Jillian Hopewell · Migrant Clinicians Network
Alice Larson · Larson Assistance Services
Sonia Lee · Health Outreach Partners
Elva Lopez · Mosaic Medical Center
Elizabeth Oseguera · California Primary Care Association
Emily Oakes · Arizona Alliance for Community Health Centers
Colleen M. Pacheco · SeaMar Community Health Centers
Carl Rush · University of Texas School of Public Health
Lorena Sprager · Providence Hood River
Kelly Volkman · Benton County Health Services
Mary Jo Ybarra-Vega · Moses Lake Community Health Center
Rebecca Young · Farmworker Justice
<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>7–8 a.m.</td>
<td>Registration (Lower Level Foyer) and Continental Breakfast (Redwood)</td>
</tr>
<tr>
<td>8–10 a.m.</td>
<td>Opening Plenary with Arturo Rodriguez, United Farm Workers of America • Gold Rush Ballroom</td>
</tr>
<tr>
<td>10–10:30 a.m.</td>
<td>Break with Exhibitors • Redwood</td>
</tr>
<tr>
<td>10:30 a.m.–12 p.m.</td>
<td>Conference Sessions</td>
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<tr>
<td>Addressing and Mitigating Trauma and Violence</td>
<td>Agricultural Worker Updates and Trends in a Shifting Environment</td>
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<tr>
<td>1 - Assessing and Responding to Depression and Trauma among Farmworkers</td>
<td>2 - Agricultural Worker Health 101: An Introduction to Agricultural Worker Health</td>
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<tr>
<td>5/6/7/8/9</td>
<td>Mary Johnson Rockers and Ann Watson, NC Farmworker Health Program</td>
</tr>
<tr>
<td>Oregon/Nevada</td>
<td>Washington/California</td>
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<tr>
<td>12–1:30 p.m.</td>
<td>Lunch on your own</td>
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<tr>
<td>1:30–3 p.m.</td>
<td>Conference Sessions</td>
</tr>
<tr>
<td>5 - Improving Health Outcomes through Violence Prevention: Lessons from a National Pilot Project</td>
<td>6 - Reaching out to Newly Insured Farmworkers: Taking Advantage of the Affordable Care Act</td>
</tr>
<tr>
<td>5/6/7/8/9</td>
<td>Anna Marjavi, Futures Without Violence; Noemi Elizalde, Mariposa Community Health Center; Melissa Marshall, CommuniCare Health Centers</td>
</tr>
<tr>
<td>Oregon/Nevada</td>
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<tr>
<td>3–3:30 p.m.</td>
<td>Break with Exhibitors • Redwood</td>
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<tr>
<td>3:30–5 p.m.</td>
<td>Conference Sessions</td>
</tr>
<tr>
<td>8 - Community-based Approaches to Address Workplace Sexual Harassment and Violence in Agriculture</td>
<td>9 - H-2A Workers: Policy, Trends, and Tools to Improve their Access to Health Care</td>
</tr>
<tr>
<td>5/6/7/8/9</td>
<td>Suguet Lopez, Lideres Campesinas, Inc.; Michael Meuter, CA Rural Legal Assistance, Inc.</td>
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<tr>
<td>Oregon/Nevada</td>
<td>Washington/California</td>
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<tr>
<td>6:30–8:30 p.m.</td>
<td>Welcome Reception • Emerald Ballroom</td>
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**INTERPRETATION SERVICES**
Simultaneous interpretation services and equipment, provided by UniVerse Language Solutions, will be available. Check in with the registration desk if needed. Workshops marked with the UniVerse logo will offer interpretation.

**SERVICIOS DE INTERPRETACIÓN**
La interpretación simultánea, proporcionada por UniVerse Language Solutions, estará disponible. Por favor pregunte a la mesa de matriculación. Los talleres marcados con el logo de UniVerse se ofrecerán la interpretación.
### Thursday, February 23, 2017

#### 7:30–8:30 a.m. • Registration (Lower Level Foyer) and Continental Breakfast (Redwood)

#### 8:30–10 a.m. • Conference Sessions

<table>
<thead>
<tr>
<th>The Role of Clinicians: A Deeper Dive</th>
<th>Methods and Models of Sustainable Outreach</th>
<th>Social Determinants of Health, Immigration, and the Way Forward</th>
<th>Fostering the Community Health Worker Workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 - Culturally Tailored Shared Medical Visits for Latinos with Type 2 Diabetes</td>
<td>13 - Collecting, Analyzing, and Using Data from Outreach Workers and Promotores(as) for Effective and Responsive Community Health Needs Assessments</td>
<td>14 - Immigration Policy 101 and What’s To Come</td>
<td>15 - Using Promotores(as) De Salud to Address Mental Health in Latino Communities</td>
</tr>
<tr>
<td>Carolina Noya &amp; Elizabeth Gatewood, University of CA, San Francisco</td>
<td>Edith Hernandez &amp; Diana Lieu, Health Outreach Partners; Rebecca Epstein, MHP Salud</td>
<td>Roger Rosenthal, Migrant Legal Action Program</td>
<td>Patria Alguila, MHP Salud</td>
</tr>
</tbody>
</table>

#### Oregon/Nevada | Washington/California | Gold Rush A | Gold Rush B |

#### 10–10:30 a.m. • Break with Exhibitors • Redwood

#### 10:30–12 p.m. • Conference Sessions

<table>
<thead>
<tr>
<th>16 - Whole Person Medicine: Increasing Access to Integrative Health Care in Underserved Populations</th>
<th>17 - Understanding Barriers to Health Care Utilization among Indigenous Immigrants from Mexico</th>
<th>18 - Protecting Health Care and Immigrants with Value-based Messaging</th>
<th>19 - Community Health Workers in the Primary Care Setting: Successful Practices and Training Development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Michelle Steinberg, Street Level Health Project; Tania Neubauer, Virginia Garcia Memorial Health Center; Fasih Hameed, Petaluma Health Center; Ariana Thompson-Lastad, University of CA, San Francisco</td>
<td>Sandra Young, Mixteco/Indigena Community Organizing Project</td>
<td>Marisol Aviña, The California Endowment; Gabrielle Lessard, National Immigration Law Center; Imelda Plascencia, Latino Coalition for a Healthy California; Melinda Rivera, Redwood Community Health Coalition</td>
<td>Mayra Fabiola Herrera Hernandez &amp; Lizdaly Cancel, Benton County Health Services</td>
</tr>
</tbody>
</table>

### Oregon/Nevada | Washington/California | Gold Rush A | Gold Rush B |

#### 12–1:30 p.m. • Lunch on your own

#### 1:30–3 p.m. • Conference Sessions

<table>
<thead>
<tr>
<th>20 - Clinical Coordination for Patients on the Move: Lessons and Barriers in Establishing Continuity of Care</th>
<th>21 - Not Just a Ride: Opportunities to Address Health Care Costs and Strengthen Patient-centered Transportation Solutions</th>
<th>22 - What Do We Know About Agricultural Workers’ Social Determinants of Health?</th>
<th>23 - Developing Common Community Health Worker (CHW) Evaluation Indicators: A Participatory Process to Gain Input from CHWs and Allies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ricardo Garay, Migrant Clinicians Network, Inc.</td>
<td>Alexis Wielunski &amp; Sonia Lee, Health Outreach Partners</td>
<td>Susan Gabbard, JBS International; Bobbi Ryder, National Center for Farmworker Health</td>
<td>Noelle Wiggins, Multnomah County Health Department; Leticia Rodriguez Garcia, Portland State University</td>
</tr>
</tbody>
</table>

### Oregon/Nevada | Washington/California | Gold Rush A | Gold Rush B |

#### 3–3:30 p.m. • Break with Exhibitors • Redwood

### Go Green

**Reuse:** We distribute reusable bags to carry conference materials. At the end of the conference, you may choose to drop off your bag at the registration desk so it can be reused/recycled.

**Recycle:** Please leave your recyclables in designated containers after the conference. We encourage you to drop off your nametag holder at the registration desk for reuse at the next conference.
### Thursday, continued

<table>
<thead>
<tr>
<th>Time</th>
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<tbody>
<tr>
<td>3:30–5 p.m.</td>
<td>Conference Sessions</td>
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<tr>
<td>24 - Palliative Care and the Potential Role for Community Health Workers</td>
<td>Lorena Sprager; Lorena Sprager and Associates, LLC</td>
</tr>
<tr>
<td>25 - Strategies for Improving Communication with Limited English Proficient Populations During Emergencies</td>
<td>Justine Kozo &amp; Kim McDermott, County of San Diego, Health and Human Services Agency</td>
</tr>
<tr>
<td>26 - Documenting Health Center Interventions to Address Patients' Social Determinants of Health Barriers</td>
<td>Tuyen Tran, Association of Asian Pacific Community Health Organizations; Kristen Stoimenoff, Health Outreach Partners</td>
</tr>
<tr>
<td>27 - California Perspectives on Workforce Development and the Promotores(as) Model</td>
<td>Melinda Cordero-Barzaga, Vision y Compromiso</td>
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<td>5:30–6:45 p.m.</td>
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<td>7:30–8:30 a.m.</td>
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### Friday, February 24, 2017

<table>
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<tr>
<th>Special Session: Tackling Zika</th>
<th>Continuation of the Promise of Delivery</th>
<th>Exploring the Impact of Artistic, Creative Avenues</th>
<th>Showcasing CHW Effectiveness</th>
<th>Project-Oriented Solutions Toward Health Equity</th>
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<tr>
<td>28a - A Hands-on Training to Empower Community Health Workers to Prevent Zika in Migrant Workers</td>
<td>29 - New Protections to Prevent Pesticide Exposure</td>
<td>30 - Integrating Digital Stories into Community Health Worker Programs</td>
<td>31 - Community Health Worker/Promotora Programs: Opportunities for Non-communicable Disease Management in Migrant Populations</td>
<td>32 - Bike Ajo: A CHW-led Bicycling Hub to Reduce Chronic Disease in a Frontier Border Community</td>
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<td>Julio Dicent Taillepierre, Corinne Fukayama &amp; Alina Gauntlett Shaw, Centers for Disease Control &amp; Prevention</td>
<td>Fabiola Estrada &amp; Katy Wilcoxen, U.S. Environmental Protection Agency, Region VIII; Martha Sanchez, California Department of Pesticide Regulation; Graciela Mendoza, California Department of Public Health - Office of Binational Border Health</td>
<td>Carl Wilmsen, Virginia Camberos, Martha Valle-Hernandez &amp; Gladys Garcia, Northwest Forest Worker Center</td>
<td>America Bracho, Latino Health Access; Paula Worby, Hispanic Health Guides</td>
<td>Martha Moore Monroy, University of Arizona; Anna Williams, Desert Senita Community Health Center; Adrian Vega, CHW; Elaine Marie Mariolle, Perimeter Bicycling Association of America, Inc.</td>
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<th>Location</th>
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<td>12:15–2 p.m.</td>
<td>Closing Lunch Plenary with El Teatro Campesino</td>
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<td>Washington/California</td>
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*This session will be presented in Spanish and interpreted in English.*
WEDNESDAY, FEBRUARY 22

1 - Assessing and Responding to Depression and Trauma among Farmworkers

**Track:** Addressing and Mitigating Trauma and Violence

1.5 CEUs

This interactive workshop will present resources for assessing and responding to the mental health needs of Spanish-speaking immigrants, particularly migrant and seasonal farmworkers, while guiding participants through skills practice and planning discussions for implementing a new tool in their own outreach or clinical setting. Participants will become familiar with the Refugee Health Screener (RHS-15), an effective instrument used to determine levels of depression and trauma among refugee groups in the U.S. This tool was recently revised through a collaborative process for use with Spanish-speaking migrant and seasonal farmworkers. In addition to the new RHS-15, presenters will share a curriculum for community support groups and a best practices guide for referring Spanish-speaking immigrants to behavioral health providers.

**Learning Objectives:**
1. Utilize a screening tool and visual aids to assess farmworkers and other Spanish-speaking immigrants for depression and trauma.
2. Integrate a new mental health screening tool into outreach and clinical settings.
3. Adapt existing behavioral health resources for use with farmworkers and other Spanish-speaking immigrants.

**Presenter:** Mary Johnson Rockers and Ann Watson, NC Farmworker Health Program

2 - Agricultural Worker Health 101: An Introduction to Agricultural Worker Health

**Track:** Agricultural Worker Updates and Trends in a Shifting Environment

1.5 CEUs

This workshop offers a comprehensive orientation to the agricultural worker health program in the U.S. Whether you are new to the agricultural worker health field or need a refresher, join us for a look into the fascinating world of the health care program for migrant and seasonal agricultural workers and their families.

In this workshop, presenters will provide a history of agricultural migration, the structure of the migrant health program, and the people that make it work. Learn about agricultural workers, their health care needs, and the system of care that works for them.

Acronyms such as DHHS, HRSA, BPHC, ONTASP, FHN, and PCMH, and more, will be deciphered, and available resources will be provided.

**Learning Objectives:**
1. Identify the migrant and seasonal agricultural workers (MSAWs) population and the challenges of farm work in the U.S.
2. Understand the history, structure, and requirements of the federal migrant health program, and explain the system of care for MSAWs.
3. Describe the multitude of resources available to health centers nationwide to access training and technical assistance.

**Presenters:** Alexis Guild, Farmworker Justice; Patria Alguila, MHP Salud; Liam Spurgeon, Health Outreach Partners
3 - Migrant and Community Health: The New Environment

**Track:** Organizing and Mobilizing for Health Equity
1.5 CEUs

The Affordable Care Act (ACA) includes numerous provisions that have helped increase health insurance coverage, expand access to health care services, and reduce health disparities. Community health centers have played a central role in implementing the ACA through outreach and enrollment efforts, expansion of integrated services (including behavioral and oral health), and programs that help address patients’ social determinants of health in order to improve health equity. The new presidential administration has stated that a key priority will be to repeal the ACA and replace it with something different. What will this new direction mean for community health centers and the patients they serve? This session will include perspectives from leaders within the community health center field and will provide attendees with an opportunity to discuss implications of “repeal and replace” and strategize on how to protect the gains that have been made under the ACA.

**Learning Objectives:**
1. Understand the potential impacts of the new administration on migrant and community health.
2. Discuss strategies for protecting gains that have been achieved under the ACA.
3. Identify agencies and resources that provide support to migrant and community health centers.

**Presenters:** Oscar Gomez, Health Outreach Partners; Carmela Castellano-Garcia, CA Primary Care Association; Zoe Reese, Neighborcare Health

4 - The Power of Cultural Leadership

**Track:** Leadership and Professional Development
1.5 CEUs

In this presentation we will reflect on the lessons learned from the emerging leaders in the field of migrant and community health. We will use the acronym of HEROES to identify the following key areas: H for Health, E for Education, R for Relations, O for Organizing, E for Energy, and S for Synergy. Interestingly, the same words work in Spanish: Holístico, Educación, Relaciones, Organización, Energía y Sinergía.

During the presentation we will highlight how to translate cultural competency into practical ways of building pathways with the community in the different stages of education, prevention, intervention, treatment, and self-care.

**Learning Objectives:**
1. Identify 3 common trends of emerging leaders in migrant and community health.
2. Understand the process to incorporate cultural leadership in migrant and community health.
3. Identify two effective strategies to build effective networks and rapport with communities.

**Presenter:** Roberto Dansie, Cultural Wisdom
5 – Improving Health Outcomes through Violence Prevention: Lessons from a National Pilot Project

**Track:** Addressing and Mitigating Trauma and Violence

**1.5 CEUs**

The prevalence of domestic violence (DV) in the U.S. is staggering: one in four women report experiencing violence from a current or former spouse or boyfriend at some point in her life. DV increases a woman’s risk for chronic health conditions and can restrict a woman’s ability to effectively manage chronic illness. Futures Without Violence (FUTURES) recently worked with ten health centers and ten DV programs on a national pilot project supported by U.S. DHHS agencies, the Health Resources and Services Administration, and the Family Violence Prevention and Services Administration to promote partnerships, expand capacity, and improve health and safety outcomes for DV survivors. This workshop will share FUTURES’ tools and training materials so other clinics can adapt the model in their own communities and review the strategies for success implemented by two project sites.

**Learning Objectives:**

1. Understand how to establish/expand their clinic’s work with community-based DV programs to improve health and safety outcomes for clients experiencing DV.
2. Identify one online resource and three patient education tools to help providers talk about DV and healthy relationships, and offer warm referrals for support.
3. Identify three strategies employed by community health centers to promote provider and staff engagement on addressing DV and health with clients.

**Presenters:** Anna Marjavi, Futures Without Violence; Noemi Elizalde, Mariposa Community Health Center; Melissa Marshall, CommuniCare Health Centers

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6 – Reaching Out to Newly Insured Farmworkers: Taking Advantage of the Affordable Care Act

**Track:** Agricultural Worker Updates and Trends in a Shifting Environment

**1.5 CEUs**

The Affordable Care Act (ACA) has expanded the availability of health coverage for an estimated two million impoverished agricultural workers in the U.S. through expansion of Medicaid and employer coverage. How is the ACA actually helping farmworkers, and what do migrant health clinics need to do to take advantage of the expanded coverage for this population? What more can we do on a policy level to expand farmworker coverage toward that of other populations?

This session will provide insights from a farmworker health plan executive, an insurance broker serving the agricultural industry, a migrant clinic director, and a clinic network executive. Presenters will share their experiences in engaging agricultural employers, employee representatives, and health plans in providing care to publically and privately insured farmworkers.

**Learning Objectives:**

1. Understand the impact of national health reform on the agricultural workforce and migrant clinics.
2. Develop strategies for maximizing services to agricultural workers who have benefited from health reform.
3. Provide information to clinic boards and staff on how to better reach the newly insured farmworker population.

**Presenters:** Edward McClements, Barkley Insurance and Risk Management; Joel Diringer, Diringer & Associates; Cathy Frey, Central Valley Health Networks; Dori Rose Inda, Salud Para La Gente
8 – Community-based Approaches to Address Workplace Sexual Harassment and Violence in Agriculture

Track: Addressing and Mitigating Trauma and Violence
1.5 CEUs

In this session, presenters will discuss the toll that sexual harassment and violence can take on a woman’s mental and physical health. Health centers and community-based organizations serving agricultural workers can work together to ensure that farmworker women get the help and support they need. Panelists will share their experiences working with community partners to help farmworker women obtain the medical care and legal services they need to move forward.

Learning Objectives:
1. Understand the toll of a hostile work environment on farmworker women’s physical and mental health.
2. Identify community partners who can help farmworker women obtain mental health services and legal assistance.
3. Recognize best practices for outreach and support for farmworker women facing workplace sexual harassment.

Presenters: Suguet Lopez, Lideres Campesinas, Inc.; Michael Meuter, CA Rural Legal Assistance, Inc.

GE Healthcare

GE Healthcare provides transformational medical technologies and services to meet the demand for increased access, enhanced quality and more affordable healthcare. From medical imaging, software & IT, patient monitoring and diagnostics to drug discovery, biopharmaceutical manufacturing technologies and performance improvement solutions, GE Healthcare helps medical professionals deliver great healthcare to their patients.
9 – H-2A Workers: Policy, Trends, and Tools to Improve their Access to Health Care

Track: Agricultural Worker Updates and Trends in a Shifting Environment

1.5 CEUs

The H-2A program has expanded rapidly over the last ten years with explosive growth in several western states, including Washington and California. At the same time, our agricultural labor system continues to face many challenges due to our broken immigration system. Health care providers must understand migration and immigration reform developments, including new protections for workers, as well as tools available to workers and service providers. This workshop will discuss immigration and labor law developments and protections, including anticipated Congressional and Administrative actions, as well as state law developments. The session will include strategies to better serve farmworkers and tools to share with these workers, including their labor rights and access to health care.

Learning Objectives:

1. Understand and share the current status of immigration policy and protections available for H-2A agricultural workers regarding immigration status, labor, and migration.
2. Identify potential partners to assist in H-2A education, outreach, and enrollment.
3. Share and utilize resources including contrados.org and other materials on labor protections and the Affordable Care Act (ACA)

Presenters: Iris Figueroa & Alexis Guild, Farmworker Justice; Rachel Micah-Jones, Centro de los Derechos del Migrante; Liz Oseguera, CA Primary Care Association; Jessica Burkard, NWRPCA

10 – Organizing for Health Access & Change in a New America

Track: Organizing and Mobilizing for Health Equity

1.5 CEUs

With the new administration comes many challenges and opportunities; a perfect storm for organizing and mobilizing your patients and community at large. Learn the different methods of organizing, what each model represents to you and your patients, and the potential gains from each organizing method. From promotoras to coalition building, and taking action, learn where you fit in and where you can drive change!

Learning Objectives:

1. Identify different models of organizing that fit the need of your patients and clinic.
2. Understand how to build a network of statewide support.
3. Draft your personalized action plan.

Presenters: Ana Grande, Clinic Romero; Jae Maldonado, Street Level Health Project; Sarah Dar, California Immigrant Policy Center

NWRPCA SPEAKERS BUREAU

Training Community Health Center staff is one of NWRPCA’s highest priorities. The Speakers Bureau program builds upon NWRPCA’s expertise in creating events, as well as identifying and vetting highly qualified speakers. It serves as another avenue to bring trainings to community health centers throughout the region.

The Speakers Bureau is comprised of three offerings:

- Speaker Referral Service
- Support Services for your training
- Speakers Bureau Roadshow

Learn more on our website: www.nwrpca.org/page/speakersbureau
At AristaMD, we know that limited access to specialists is a critical issue for underserved and rural populations. That’s why we created an electronic consult (eConsult) platform that expedites access to specialty expertise for your providers and your patients. AristaMD enables your primary care providers to consult with our board-certified specialists through a HIPAA-compliant, simple to use, eConsult platform directly from their offices. Our panel of more than 80 specialists representing 30 specialties and sub-specialties respond with official written consultations within 24 hours, typically resolving more than 50 percent of eConsults without sending your patient for an in-person specialist visit.

By ensuring your providers and patients have timely access to high-quality specialty care, the AristaMD eConsult Platform is proven to reduce overall specialist visits, ER visits and hospital admissions, and it enhances patient satisfaction and engagement.

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11 – Enhancing the Patient Experience

Track: Leadership and Professional Development

1.5 CEUs

While many health center leaders do not directly interact with patients on a daily basis, their leadership is key in the development of organizational commitment and planning to improve the patient experience. During this workshop, participants will learn key customer service elements to be included in ongoing staff development training plans to fulfill customer service and organizational goals. The presenter will review tips to assist health centers in defining organizational commitment and culture, strategies to engage staff in improving patient experience, and training resources for customer service.

Learning Objectives:
1. Discuss various strategies to create organizational commitment.
2. Define what it means to improve the patient experience.
3. Learn key customer service skills needed to enhance the patient experience that should be integrated in an ongoing staff development training plan.

Presenter: Alicia Gonzales, National Center for Farmworker Health

THURSDAY, FEBRUARY 23

12 - Culturally Tailored Shared Medical Visits for Latinos with Type 2 Diabetes

Track: The Role of Clinicians: A Deeper Dive

1.5 CEUs

This session addresses a health care redesign, Shared Medical Appointments (SMAs), in the context of diabetes and is appropriate for all professions in community health centers, including, but not limited to clinicians, outreach workers, behavioral health specialists, and nutritionists.

Through interactive activities and audience polling, participants will be able to discuss the effectiveness of SMAs. In particular, participants will learn to recognize disparities in diabetes care and outcomes, explore the relevance of SMAs to underserved populations including immigrants and migrant farmworkers, appreciate the importance of social support and empowerment, and explore opportunities to implement SMAs in their clinics. This exploration will look at roles of participants in SMAs and identify specific individuals within the clinic who may be interested in participating. By the end of the session, participants will have the initial tools to become champions for SMAs in their respective clinical environments.

Learning Objectives:
1. Discuss the effectiveness of SMAs and the importance/relevance to underserved populations, including immigrants and migrant farmworkers.
2. Discuss the interprofessional roles of health care providers in a SMA, including outreach workers, behavioral health professionals, medical providers, and other participants.
3. Explore opportunities to implement SMAs in clinical settings with patients.

Presenters: Carolina Noya & Elizabeth Gatewood, University of California, San Francisco

FUNDAMENTALS OF GOVERNANCE WEBINAR SERIES

November 2016 - September 2017

NWRPCA is offering a year-long series of ten governance webinars focusing on a variety of topics that relate directly to Community Health Center Boards of Directors.

Why a year-long webinar series?
Our goal is to make our conference and trainings connected and meaningful. Between our three conferences, this webinar series enables Boards of Directors from many CHCs to come together, ask questions, share knowledge and ideas, and continue discussing the issues that matter most to them.

Register before the next webinar on March 15!

www.nwrpca.org/event/governancefundamentals
13 – Collecting, Analyzing, and Using Data from Outreach Workers and Promotores(as) for Effective and Responsive Community Health Needs Assessments

Track: Methods and Models of Sustainable Outreach
1.5 CEUs

Outreach workers and promotores(as) de salud often share similar cultures, values, and life experiences with a health center’s target population. The key expertise they possess lies in their understanding of the community and their ability to build relationships with peers. With proper training and tools, these individuals can contribute invaluable data to their community’s health needs assessment and function as key collaborators in determining how the data should best be applied. Incorporating outreach workers and promotores(as) into a community health needs assessments can help shape it into a more responsive and effective instrument, as well as increase community engagement and participation in the assessment in order to create a more accurate portrayal of the community. In this session, participants will learn how outreach workers and promotores(as) can contribute to each stage of the needs assessment process at a health center.

Learning Objectives:
1. Understand the benefits of including outreach workers and promotores(as) in the community health needs assessment process.
2. Describe the value of data collected by outreach teams in improving patient care.
3. Identify at least one data collection method that could be used in participants’ own communities.

Presenters: Edith Hernandez & Diana Lieu, Health Outreach Partners; Rebecca Epstein, MHP Salud

14 – Immigration Policy 101 and What’s To Come

Track: Social Determinants of Health, Immigration, and the Way Forward
1.5 CEUs

With the election of Donald J. Trump as President, we expect some significant changes in immigration policy. In order to understand what lies ahead, this session will review the current status of immigration policy in the U.S. We will cover the basics, as well as the current status of the legalization process and immigration enforcement. The session will also dive into what has already occurred since inauguration regarding changes to previous policies.

Learning Objectives:
1. Understand current immigration law, including the legalization process.
2. Understand the changes in immigration law and policy in the new Administration.
3. Better design outreach and implementation of programs in community and migrant health clinics in the current environment.

Presenter: Roger Rosenthal, Migrant Legal Action Program

15 – Using Promotores(as) De Salud to Address Mental Health in Latino Communities

Track: Fostering the Community Health Worker Workforce
1.5 CEUs

In this interactive session, participants will learn about the development of the Salud Para Todos curriculum and outcomes from implementing this program in the Rio Grande Valley region of Texas. The facilitators will review the five modules of the Salud Para Todos curriculum: mental health, stress, intimate partner and domestic violence, substance abuse, and chronic disease and mental health. Through simulations and small group activities, participants will become familiar with the underlying concepts of the curriculum and the activities within it. Additionally, the Program Coordinator and a promotor(a) from MHP Salud’s team will share lessons learned from implementing this program, and recommendations on how to adapt this program to meet the needs of an agricultural worker community will be discussed. Each session participant will receive an electronic, bilingual copy of the Salud Para Todos curriculum.

Learning Objectives:
1. Describe the benefits of utilizing a community-based, peer-to-peer program to address mental health in Latino communities.
2. Identify culturally appropriate strategies and activities to address mental health in Latino and/or agricultural worker communities.
3. Apply concepts from the Salud Para Todos curriculum to existing or developing programs within communities.

Presenter: Patria Alguila, MHP Salud
diversity, and successes and obstacles in patient outcomes. Panelists will highlight integrative health care in their own clinical settings, including the delivery of holistic nutrition/herbal medicine to undocumented migrant communities at Street Level Health Project in California, naturopathy at the Cornelius Wellness Center at Virginia Garcia Memorial Health Center in Oregon, acupuncture and integrative medicine provision at Petaluma Health Center in California, and qualitative research on the use of group visit models to increase access to integrative care. Following their presentations, speakers will facilitate discussion among audience participants to explore relevant strategies to expand access to integrative medicine in their own communities.

Learning Objectives:

1. Describe multiple models that have succeeded in delivering integrative care in low-income populations.
2. Assess the relevance of existing integrative models to their own communities and articulate their own strategies for increasing access to complementary care.
3. Identify tools to build connections and supportive networks with others in the field engaged in similar work.

Presenters: Michelle Steinberg, Street Level Health Project; Tania Neubauer, Virginia Garcia Memorial Health Center; Fasih Hameed, Petaluma Health Center; Ariana Thompson-Lastad, UCSF

A 10-minute survey will unlock a free one-hour phone consultation for your organization. Go here to access the survey: www.nwrpca.org/surveys/?id=EHCI_Assessment
17 – Understanding Barriers to Health Care Utilization among Indigenous Immigrants from Mexico

Track: Methods and Models of Sustainable Outreach
1.5 CEUs

Many indigenous immigrants from Oaxaca and other areas in southern Mexico use health care services only as a last resort, unless low cost or free services are available. The Mixteco/Indigena Community Organizing Project and researchers at the University of California, Los Angeles trained two Spanish-Mixteco and Spanish-Zapoteco bilingual promotores(as) to conduct in-depth interviews with 44 indigenous women residing in Oxnard, CA on issues that affect health care utilization. This presentation focuses on structural, cultural, and provider-related barriers to health care utilization. We will provide quotes to illustrate these barriers and discuss the need to consider them when developing programs for this community. One of the promotores(as) will provide a personal perspective on access to care in her community. In addition, we will describe how these findings have informed our next study, which will test a promotor(a)-driven intervention to promote a wellness visit among women 40 years of age and older.

Learning Objectives:
1. List barriers to health care utilization among indigenous immigrants from Mexico.
2. Develop an outline of questions useful for assessing barriers to health care utilization.
3. Describe how promotores(as) can conduct a needs assessment in an indigenous community.

Presenter: Sandra Young, Mixteco/Indigena Community Organizing Project

18 – Protecting Health Care and Immigrants with Value-based Messaging

Track: Social Determinants of Health, Immigration, and the Way Forward
1.5 CEUs

In this session, the National Immigration Law Center will provide an overview of the current political climate while Continue your education when you can, where you can!

Check out NWRPCA’s available eLearning courses and pre-recorded webinars:

» 19 Program Requirements for Governing Board Members
» 19 Program Requirements: Beyond the Site Visit
» Grant Writing: Plan for Your Next SAC or NAP Grant

bit.ly/eleamingstore
The California Endowment discusses opportunities for using media, messaging, and community stories to shift the narrative on the impact of health care access to our communities and economy. Participants will also hear from the Redwood Community Health Coalition regarding communication strategies for health centers and the resources available to help relay information to the patients they are serving. The Latino Coalition for a Healthy California will provide an overview of the rights that health centers have to protect themselves and their patients from immigration raids and potential contact or interaction with Immigration and Customs Enforcement.

**Learning Objectives**

1. Identify messaging and strategies to defend our current health services and promote access to health for all.
2. Utilize advocacy resources and tools to revamp or create advocacy plans around health care and patients.
3. Extrapolate and adopt communication strategies around ICE at health centers.

**Presenters:** Marisol Aviña, The California Endowment; Gabrielle Lessard, National Immigration Law Center; Imelda Plascencia, Latino Coalition for a Healthy California; Melinda Rivera, Redwood Community Health Coalition

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19 – Community Health Workers in the Primary Care Setting: Successful Practices and Training Development

**Track:** Fostering the Community Health Worker Workforce

**1.5 CEUs**

As part of a multidisciplinary primary care team, community health workers (CHWs) provide a continuum of services, including care coordination, outreach, advocacy, and the ongoing support to improve health outcomes. In this session, we will explore the evolution of CHWs in a patient-centered primary care home (PCPCH), along with continuing efforts to ensure proper documentation, training, and capacity as the program expands.

**Learning Objectives:**

1. Describe the creation, evolution, and establishment of community health workers (CHWs) in a patient-centered primary care home (PCPCH).
2. Identify the development of standardized processes for training and capacity building of CHWs in order to achieve consistent practices for delivery of services in a PCPCH.
3. Identify strategies for incorporating a CHW into a PCPCH.

**Presenters:** Mayra Fabiola Herrera Hernandez & Lizdaly Cancel, Benton County Health Services

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20 – Clinical Coordination for Patients on the Move: Lessons and Barriers in Establishing Continuity of Care

**Track:** The Role of Clinicians: A Deeper Dive

**1.5 CEUs**

Migrant Clinician Network’s Health Network (HN) program is an effective tool for maintaining continuity of care and creating a patient-centered medical home (PCMH) for mobile populations. The HN’s primary focus is to eliminate mobility as an active obstacle for continuity of care. For clinics, the HN provides patient referrals, outcome reports, outreach staff integration, and updated medical records. For patients, the HN offers culturally appropriate services that promote engagement and health education. The HN promotes communication among a wide range of stakeholders including administrative staff, outreach teams, clinicians, and mobile patients. Knowing which patients to enroll, how to enroll, and what to expect are crucial for every health center looking to establish effective continuity of care. Beaufort Jasper Hampton Comprehensive Health Services, Inc. of South Carolina provides an excellent example of planning and execution of the HN to provide a PCMH for their migrant patients. This partnership serves as a national template for health providers working with mobile populations.

**Learning Objectives:**

1. Replicate the outreach and enrollment plan developed at Beaufort Jasper Hampton Comprehensive Health Services, Inc.
3. Create a migrant agricultural flowchart for continuity of care for H-2A workers in the U.S. and create an annual calendar for the HN case review.

**Presenter:** Ricardo Garay, Migrant Clinicians Network, Inc.
21 – Not Just a Ride: Opportunities to Address Health Care Costs and Strengthen Patient-centered Transportation Solutions

Track: Methods and Models of Sustainable Outreach

1.5 CEUs

In any given year, at least 3.6 million Americans do not obtain medical care because of a lack of transportation. Evidence shows that access to reliable transportation correlates with improved health outcomes and increases the utilization of services. Efforts to strengthen patient-centered transportation are needed more than ever. In this session, Health Outreach Partners (HOP) will present an overview of its new Transportation Initiative, which was launched in May 2016 with funding from HRSA and the Federal Transit Administration. This initiative seeks to document the impact of transportation barriers on health care costs and strengthen patient-centered transportation solutions through data analysis and collaboration. The session will include a review of current research and data collected from health centers, as well as highlight innovative transportation practices from around the country. Through a small group activity, participants will use HOP’s new Transportation Quality Improvement toolkit to assess existing or potential efforts at addressing transportation barriers for health center patients.

Learning Objectives:
1. Become familiar with current research related to the impact of transportation barriers on health access and health care costs.
2. Identify at least three ways health centers can help patients overcome transportation barriers.
3. Review current transportation activities occurring across the health care sector and opportunities to get involved.

Presenters: Alexis Wielunski & Sonia Lee, Health Outreach Partners

Scholarships Available
Se proporcionarán servicios de traducción al español
Spanish Translation Services Offered

HealthyGen.org | Creating Enduring Health Equity
22 – What Do We Know About Agricultural Workers’ Social Determinants of Health?

**Track:** Social Determinants of Health, Immigration, and the Way Forward

**1.5 CEUs**

This session will focus on agricultural workers’ social determinants of health drawing on data from the Department of Labor’s National Agricultural Workers Survey. With the collaboration of the Health Resources Services Administration and other federal agencies, the survey collects data across the U.S. on up to 3,000 migrant and seasonal crop workers each year. The session will first focus on agricultural workers’ health care access and utilization as well as the burden of chronic disease. Following a discussion on the social determinants of agricultural workers’ health, the session leaders will present information on the current status and trends in social determinants of health, including household characteristics, living conditions, poverty status, access to social services and education, migration, and occupational risk factors and safety concerns.

**Learning Objectives:**
1. Identify three or more social determinants of health.
2. Describe how social determinants of health affect crop workers’ access to and utilization of health care.
3. Access the resources of the National Agricultural Workers Survey.

**Presenters:** Susan Gabbard, JBS International; Bobbi Ryder, National Center for Farmworker Health (NCFH)

23 – Developing Common Community Health Worker (CHW) Evaluation Indicators: A Participatory Process to Gain Input from CHWs and Allies

**Track:** Fostering the Community Health Worker Workforce

**1.5 CEUs**

Community Health Workers (CHWs) have made important contributions to communities and health and social service systems for decades, and interest in the model has grown significantly. However, policy makers and health system leaders are asking for more systematic studies to achieve a strong evidence base before making long-term investments in the CHW workforce. Using popular education methodologies, this participatory session will allow participants to contribute their expertise to build upon the current efforts to identify the indicators that should be included in evaluations of CHW programs.

**Learning Objectives:**
1. Explain the importance of identifying common process and outcome indicators to measure the success of CHW programs.
2. Describe the proposed indicators developed during the October 2015 Common Indicators Summit, which built upon the work initiated by the Michigan CHW Alliance.
3. Provide input about the proposed indicators and know how they can be involved as the project moves forward.

**Presenters:** Noelle Wiggins, Multnomah County Health Department; Leticia Rodriguez Garcia, Portland State University

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BEHAVIORAL HEALTH WEBINAR SERIES

**January–December 2017**

NWRPCA is offering a series of ten behavioral health webinars that serve as a platform each month for a blend of didactic trainings and interactive opportunities.

Webinar topics include brief interventions and conceptualization for a variety of conditions, such as:

- Depression
- Anxiety
- Diabetes
- Sleeping Problems
- Substance Abuse
- Pain
- Obesity

Register before the next webinar on March 8!

www.nwrpca.org/event/bhwebinarseries
24 – Palliative Care and the Potential Role for Community Health Workers

Track: The Role of Clinicians: A Deeper Dive

1.5 CEUs

Palliative care is an emerging field in health care that will only grow with the very large aging population in the nation. Palliative care is specialized medical and whole person care for people with serious illness. Come learn about primary and specialty palliative care. Also learn the difference between palliative care and hospice. Learn key points of making palliative care accessible to all, including integrating Community Health Workers (CHWs) to care teams.

Learning Objectives:
1. Learn one element of primary and specialty palliative care.
2. Identify one difference between palliative care and hospice.
3. Address one way CHWs can support patients and their families in palliative care.

Presenter: Lorena Sprager; Lorena Sprager and Associates, LLC

25 – Strategies for Improving Communication with Limited English Proficient Populations during Emergencies

Track: Methods and Models of Sustainable Outreach

1.5 CEUs

Over 400,000 San Diegans speak a language other than English and report speaking English “less than very well.” In the event of a natural disaster or public health emergency, communicating with non-English speaking communities is paramount. Linguistically-isolated communities that do not have access to media in their native languages may not receive critical information. San Diego County has formed a “partner relay” with trusted, diverse community organizations who have agreed to share critical information with non-English speaking communities during emergencies. This session will share findings and lessons learned from community engagement activities and implementation efforts, and recommendations on how this outreach process can be replicated in other jurisdictions will be discussed.

Learning Objectives:
1. Understand and become aware of barriers faced by non-English speaking communities in receiving important information during emergencies.
2. Address this topic within their own community through identifying populations at risk for not receiving information, current barriers, solutions, and key partnerships.
3. Learn strategies for building a trusted communication network “partner relay” in order to improve communication with non-English speaking communities during emergencies.

Presenters: Justine Kozo & Kim McDermott, County of San Diego, Health and Human Services Agency

26 – Documenting Health Center Interventions to Address Patients’ Social Determinants of Health Barriers

Track: Social Determinants of Health, Immigration, and the Way Forward

1.5 CEUs

The nation’s network of community, migrant, homeless and public housing health centers provide high quality primary and preventive care to diverse cultural populations in under-resourced communities. Health centers also provide non-clinical services to address the various social determinants of health barriers of their patients, including low income, lack of health insurance and transportation, and significant language barriers. Some of these services are called enabling services, defined as non-clinical services that aim to increase access to health care and improve health outcomes. The ability to track and evaluate these services is an important tool for health centers to demonstrate their value in meeting and addressing patient social risks. The Association of Asian Pacific Community Health Organizations, in collaboration with member and non-member health centers, Health Outreach Partners, and National Health Care for the Homeless, have updated a standardized protocol for enabling services data collection.

Learning Objectives:
1. Explain the importance of tracking health center interventions in addressing patients’ social determinants of health risks.
2. Describe the updated standardized protocol to track health center enabling services.
3. Identify resources available to implement the protocol within their own health centers.

Presenters: Tuyen Tran, Association of Asian Pacific Community Health Organizations; Kristen Stoimenoff, Health Outreach Partners
Session descriptions, continued

27 – California Perspectives on Workforce Development and the Promotores(as) Model

Track: Fostering the Community Health Worker Workforce
1.5 CEUs

While it is true that community health workers (CHWs) and promotores(as) share similar characteristics, there is little consensus about how best to advance the workforce associated with two distinct models: the promotor(a) model and the CHW model. The CHW model is increasingly a medical or “health services model.” As such, it does not always represent the needs, interests, concerns, and priorities of local communities and the community workers who live there. In contrast, the promotor(a) model, or “community transformational model,” is first and foremost based on the needs of the local community, including the promotores(as) who share similar characteristics as the communities they represent. Respectful integration of the community transformational model may require a shift in organizational policies and practices in order to ensure that the model is adopted as it was intended.

Learning Objectives:
1. List the six workforce issues promotores(as) in California are facing.
2. Identify key characteristics of the promotor(a) community-based transformational model.
3. Identify how the community-based promotor(a) model supports holistic health and addresses social determinants of health.

Presenter: Melinda Cordero-Barzaga, Vision y Compromiso

FRIDAY, FEBRUARY 24

28 – A Hands-On Training to Empower Community Health Workers to Prevent Zika in Migrant Workers

Track: Special Session: Tackling Zika
1.5 CEUs

Farmworkers may be at an increased risk of contracting the Zika infection, as well as other vector-borne diseases, due to the nature of their occupation, which can include increased exposure to mosquitoes while working outdoors, farmworker living conditions, and increased likelihood of travel to areas with Zika. They may also experience barriers to receiving information on Zika as a result of language, acculturation, and different sources of information. This workshop aims to provide community health workers (CHWs) and others providing health information to migrants with basic information regarding Zika transmission, symptoms, and prevention strategies. The session will include an educational component which will cover Zika history, symptoms, transmission, effects, diagnosis, treatment, and prevention, with a specific focus on migrant farmworkers. Afterwards, participants will engage in a dialogue about the material covered as well as take part in practice sessions to build skills and capacity in delivering information on the Zika virus to migrant farmworkers.

Learning Objectives:
1. Understand why Zika is a concern for migrant farmworkers and communities.
2. Learn how to teach migrant farmworkers and communities about Zika transmission, symptoms, and prevention.
3. Obtain tools and strategies to share and to take concrete actions in participants’ homes and communities to prevent and control the spread of Zika, and understand prevention strategies to undertake while traveling.

Presenter: Julio Dicent Taillepierre, Corinne Fukayama & Alina Gauntlett Shaw, Centers for Disease Control & Prevention

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29 – New Protections to Prevent Pesticide Exposure

Track: Continuation of the Promise of Delivery

1.5 CEUs

The U.S. Environmental Protection Agency signed stronger protections for the nation’s two million agricultural workers and their families working on farms, forests, nurseries, and greenhouses in September of 2015. Included under the Worker Protection Standard (WPS), these protective requirements include annual mandatory training sessions to inform farmworkers of required protections, a minimum age requirement of 18 to handle pesticides, and more robust anti-retaliation provisions.

In this session, participants will learn about the WPS revisions and where to report pesticide issues. In addition, promotores(as) and medical providers will be provided with resources to inform their communities about preventing pesticide exposure in the workplace and at home.

Learning Objectives:

1. Understand the new protections for farmworkers designed to prevent exposure to pesticides and where to report non-compliance.
2. Examine the various roles of the promotores(as) in ensuring farmworkers are informed about their protections in the workplace.
3. Identify farmworker pesticide exposures and how to report them.

Presenters: Fabiola Estrada & Katy Wilcoxen, U.S. Environmental Protection Agency, Region VIII; Martha Sanchez, California Department of Pesticide Regulation; Graciela Mendoza, California Department of Public Health - Office of Binational Border Health

30 – Integrating Digital Stories into Community Health Worker Programs

Track: Exploring the Impact of Artistic and Creative Avenues

1.5 CEUs

Forest workers, who are largely Spanish-speaking immigrants from Latin America, are at a high risk for work-related injuries and illnesses. In addition, due to bullying in the workplace, limited knowledge of their workplace rights, and uncertain immigration status, they fear retaliation for seeking improved working conditions. In a participatory research-to-practice project, promotores(as) de salud from the Northwest Forest Worker Center’s teamed up with five forest workers to create digital narratives about work-related injuries, attempts to improve working conditions, and reasons for becoming promotores(as).

The videos were incorporated into educational materials to empower forest workers and to train them on how to prevent job-related injuries and illnesses. In this interactive session, the promotores(as) and other project personnel will lead participatory activities to engage session participants in mutual learning about the benefits and challenges of developing digital narratives as part of research-to-practice projects, and how to integrate them into community health worker (CHW) programs.

Learning Objectives:

1. Identify the benefits and challenges of developing digital stories as part of research-to-practice community-based participatory research projects.
2. Apply the principles of popular education to the use of digital narratives as educational tools in occupational safety and health.
3. Integrate digital narratives into CHW programs for empowering workers and helping them prevent job-related injuries and illnesses.

Presenters: Carl Wilmsen, Virginia Camberos, Martha Valle-Hernandez & Gladys Garcia, Northwest Forest Worker Center

*This session will be presented in Spanish, and interpretation services will be provided.

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31 – Community Health Worker/Promotor(a) Programs: Opportunities for Non-Communicable Disease Management in Migrant Populations

**Track:** Showcasing CHW Effectiveness

1.5 CEUs

This session will discuss and demonstrate the benefits of using community health workers (CHWs) or promotores(as) to increase and improve access to chronic disease prevention and management for immigrant populations. Using Latino Health Access of Santa Ana (LHA) as a model, the session presenters will show the applicability of community-based strategies as an optimal way to address the health challenges of non-communicable diseases (NCDs) in underserved communities, using the easily understandable content from Hesperian’s NCD modules.

**Learning Objectives:**

1. Identify the benefits of CHW/promotor(a)-based chronic disease prevention and management strategies.
2. Understand the mechanisms and the importance of “trickle up” strategies to achieve community health and the organizational strategies underlying the success of LHA.
3. Examine the reasons for successful CHW strategies for NCD management.

**Presenters:** America Bracho, Latino Health Access; Paula Worby, Hesperian Health Guides

32 – Bike Ajo: A CHW-led Bicycling Hub to Reduce Chronic Disease in a Frontier Border Community

**Track:** Project-oriented Solutions Toward Health Equity

1.5 CEUs

Bike Ajo is a rural bicycling hub that provides education and resources to train and cultivate community clinic linkages to work toward achieving health equity. Ajo, Arizona is a former mining community located on the Arizona-Sonoran border. Residents of the community face high rates of chronic disease and have limited access to resources for physical activity and diabetes prevention. Bike Ajo provides resources to promote bicycling for recreation, transportation, and diabetes prevention and management. Led by community health workers (CHWs), the asset-based coalition is rooted in a strong multi-sector partnership between community members, public health professionals, and planners, and it seeks to develop sustained policy, systems, and environmental (PSE) change that address the relevant social determinants of health.

**Learning Objectives:**

1. Determine the assets and barriers to physical activity in rural communities.
2. List three best practices for developing effective partnerships and coalitions to create policy systems and environmental change.
3. Identify roles CHWs can play in PSE change to promote health equity.

**Presenters:** Martha Moore Monroy, University of Arizona; Elaine Marie Mariolle, Perimeter Bicycling Association of America, Inc.; Ada Wilkinson-Lee, University of Arizona; Anna Williams, Desert Senita Community Health Center; Adrian Vega, CHW, LCI

33 – Utilizing Popular Theater for Outreach and Education

**Track:** Exploring the Impact of Artistic, Creative Avenues

1.5 CEUs

This workshop is El Teatro Campesino’s (ETC) basic approach to movement and making theater. No theatrical experience necessary. Participants will learn about the Chicano theater form known as the ACTO developed by ETC. This form is premised around political and social justice, and will be taught with participant experience in mind, for example: building relationships with growers and the challenges that health centers encounter.
Learning Objectives:

1. Obtain a basic understanding of teatro style and movement.
2. Understand what an ACTO is and how it is used for education.
3. Learn how to develop image-based theater that suggests the ACTO form and hint at a solution to a problem.

Presenters: Daniel Garcia, Emily Morales, Alejandro Gomez, Cristal Gonzalez, Noe Montoya & Cristy Sandoval, El Teatro Campesino

*Please note there is a 50 person maximum capacity in this session

34 – SNAP Employment, Training, and Funding for CHWs

Track: Showcasing CHW Effectiveness

1.5 CEUs

The positive impact Community Health Workers (CHWs) bring to their communities is widely agreed upon, yet many organizations face major obstacles in obtaining funding to help cover the training and labor costs associated with impactful CHW programs. One way organizations can defray the costs associated with effective CHW training is by applying for a 50 percent reimbursement grant (50-50 funds) offered by the USDA. Under the terms of the grant, the federal government pays for 50 percent of the training program, with the nonfederal entity paying the remaining costs with non-federal dollars. With prior approval from their local government, organizations may also apply for funding to help pay the salaries of SNAP recipients who are providing eligible nutrition education.

Attend this session to learn how your organization can access these resources to expand its CHW program. Participants will gain key information on the USDA’s 50-50 fund program and learn the best practices on partnering with county and state governments.

Learning Objectives:

1. Understand the 50-50 fund program and how it can be used to expand training programs and services.
2. Gain knowledge on the state plan process.
3. Acquire advice on how to build a successful partnership with states and, if applicable, counties in order to access reimbursement funds.

Presenters: Brian Solomon, US Food and Nutrition Service; Kacie Obrien, US Food and Nutrition Service; Ana Bolanos, California Dept of Social Services; Asbury Jones, CA Department of Public Health; Adriana Mora, Latino Coalition for a Healthy California

35 – Supporting Health and Reducing Costs: Addressing Social Determinants of Health in Medicaid Managed Care

Track: Project-oriented Solutions toward Health Equity

1.5 CEUs

The social determinants of health (SDOH), the conditions in which people are born, grow, live, work, and age, are increasingly recognized for their impact on health outcomes. Addressing SDOH can help health care and public health systems achieve the Triple Aim: better patient care, improved health outcomes, and reduced costs.

However, doing this type of work requires a shift in payment models in order to finance interventions that can effectively address patients’ SDOH. This session will present a demonstration project in New Mexico between Medicaid Managed Care Organizations (MCOs) and health care organizations, including community health centers. In the project, the MCOs and health care organizations have negotiated a payment model that supports community health worker (CHW)-led patient support services. The model has demonstrated cost savings and improved health outcomes among the “hot spotter” patients, the small percentage of Medicaid enrollees who are sickest and consume the most health care services. In addition, research from the project demonstrates that if all patients are screened for SDOH, nearly 50% will report having at least one adverse SDOH. CHWs are now screening all patients in order to effectively design interventions based on patients’ SDOH.

Learning Objectives:

1. Understand the evolution of different Medicaid payment structures in support of CHW services in the New Mexico demonstration.
2. Learn how to obtain SDOH data to inform SDOH interventions.
3. Understand the complexities of working in a multiple and competitive MCO environment to align service delivery in support of patients.

Presenter: Charlie Alfero, Southwest Center for Health Innovation; Margarita Perez-Pulido, UNM Office for Community Health
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